



DEADLY LIVER MOB

Resources

DEADLY LIVER MOB PROJECT AGREEMENT

I understand and agree to the following:

I will be paid \$20 voucher for the first session of the DLM Project. This involves doing the DLM hepatitis C education session.

I will be offered the chance to educate up to 3 of my friends/family about hep C. To participate my friends/family must be Aboriginal. I will get \$10 dollar voucher for each of my friends/family that I introduce to the DLM Project. I will be paid up to another \$10 voucher depending on their knowledge of hep C in the DLM education. My friends/family will be paid \$20 dollar voucher for participating in the DLM.

I can phone the project workers to organise a time for my friends/family to do the education. <Alternately I can come to < > to participate, but I might have to wait if there is someone already doing the project>.

I'll be paid up to \$10 dollar voucher for the hep C info that I teach my friends/family I can use the TEACH SHEET that I have been given to help me.

There are 3 parts of info in the TEACH sheet. When each of my friends/family comes for their interview, they'll be given a short quiz to see if they have learned the information I taught them.

The 1st part of info What is it?

The 2nd part of info How do you get it?

The 3rd part of info How do you avoid it?

The 4th part of info What can I do about it?

I can earn up to \$10 dollar voucher for teaching each of my friends/family the right answers to the education. To get the full \$10 dollar voucher they'll have to talk with the DLM project worker and answer all of the hep C questions.

I agree that if one of my friends/family can't answer any of the questions, then I won't get paid anything for that person but I will have the chance to get the right info and try again if I want to.

I can be paid by coming to the project with my friends/family and waiting for them to do the DLM education or I can arrange with the DLM workers to be paid later.



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Following the education, I will be offered the option to attend the Sexual Health Clinic for a hepatitis C screen, hepatitis B vaccination or a sexual health screen or a combination of these health screens. If I choose to be screened, I will receive a \$10 voucher. **The sexual health screen is optional and I can choose not to participate.**

I agree to being contacted to arrange a follow up hepatitis C education session and a short interview about my experiences of being involved in the project.

Any information I provide during the course of this project will remain confidential. **Where the results of the research are published, my involvement and my personal results will not be identified.**

SIGNED.....

WITNESS.....

DATE.....

DATE.....