

University of Illinois at Chicago
Consent for Participation in Research
Accessibility Audits of Fitness and Recreation Facilities

Consent Form for Fitness or Recreation Professional To Evaluate A
Fitness or Recreation Facility

Why am I being asked?

You are being asked to be a subject in a research study about accessibility of fitness and recreation facilities for people with mobility impairments conducted by Dr. James H. Rimmer from the University of Illinois at Chicago. You have been asked to participate in the research because you have been identified as a professional employed at a recreation facility with either a fitness center or a swimming pool. We ask that you read this form and ask any questions you may have before agreeing to be in the research.

Your participation in this research is voluntary. Your decision whether or not to participate will not affect your current or future relations with the University of Illinois at Chicago. If you decide to participate, you are free to withdraw at any time without affecting that relationship.

Why is this research being done?

This research is being conducted because there is a common perception that many fitness and recreation facilities are often not accessible to people with mobility impairments (including, but not limited to, older adults, individuals who have been injured, individuals who are obese, and individuals with disabilities).

What is the purpose of this research?

This research will describe the overall state of accessibility of recreation facilities nationwide using a measurement instrument called AIMFREE (Accessibility Instruments Measuring Fitness and Recreation Environments).

What procedures are involved?

If you agree to be in this research, we would ask you to do the following things:

- Read through a training tool on how to use the AIMFREE instrument.
- Perform an accessibility assessment on your facility using the AIMFREE instrument, which will take approximately 1.5 hours.

What are the potential risks and discomforts?

The only potential risk that you may experience is feeling uncomfortable evaluating your facility that may not be fully accessible to persons with mobility impairments. However, your evaluation of the facility will not be disclosed and the facility that you evaluate will not be disclosed.

Are there benefits to taking part in the research?

A benefit that you may gain from this study is a better understanding of what makes a fitness or recreation facility accessible or inaccessible based on using the evaluation instrument. In addition, upon completing the assessment your facility will have the option of receiving advice and support in making changes to improve the accessibility of your facility.

What about privacy and confidentiality?

The only people who will know that you are a research subject are members of the research team. No information about you or your facility will be disclosed to others without your written permission except:

- If necessary to protect your rights; or
- If required by law

Any information that is obtained in connection with this study and that can be identified with you will remain confidential and will be disclosed only with your permission or as required by law.

A copy of your assessment will be kept in a confidential file at the University of Illinois at Chicago.

Can I withdraw or be removed from the study?

You can choose whether to be in this study or not. If you volunteer to be in this study, you may withdraw at any time without consequences of any kind. You may also refuse to answer any questions you do not want to answer and still remain in the study. The investigator may withdraw you from this research if circumstances arise which warrant doing so.

Who should I contact if I have questions?

The researcher conducting this study is Dr. James H. Rimmer. You may ask any question you have by contacting the researcher at: (312) 413-9651.

What are my rights as a research subject?

If you have any questions about your rights as a research subject, you may call the Office of Protection of Research Subjects at (312) 996-1711.

Signature of Subject

I have read (or someone has read to me) the above information. I have been given an opportunity to ask questions and my questions have been answered to my satisfaction. I agree to participate in this research. I have been given a copy of this form.

_____ I would like to receive suggestions for ways to increase the accessibility of the facility I assessed.

_____ I would NOT like to receive suggestions for ways to increase the accessibility of the facility I assessed.

Signature

Date

Printed Name

| _____
