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# Pacific Coast Groundfish Trawl Fishery Social Survey

# **Informed Consent Form - Optional**

Principal Investigator: Suzanne M. Russell, NOAA/NMFS/NWFSC

Co-Investigators: Karma Norman, NOAA/NMFS/NWFSC Anna Varney, ERT Contractor for NOAA/NMFS/NWFSC Others TBD

## WHAT IS THE PURPSOE OF THIS STUDY?

This study aims to collect social and cultural information from those participating in any aspect of the Pacific Coast Groundfish fishery. The study will allow us to create a baseline or foundational description of the people in the industry prior to the upcoming fisheries management system change in the form of a 'catch shares' or rationalization program. After the management change we will repeat the study. We can then compare the results from both studies to update the baseline data on the industry, and better understand any changes or social impacts that have occurred in the industry.

#### WHAT IS THE PURPOSE OF THIS FORM?

This form is in addition to the survey information section in the primary survey document. This form is to further clarify information about each individual's participation in this research.

#### WHY AM I BEING IINVITED TO TAKE PART IN THIS STUDY?

You are being invited to participate in this study because you are involved in the Pacific Coast Groundfish Trawl Fishing industry. People who are being invited to participate include but are not limited to fishermen, permit holders, quota allocation recipients, buyers/first receivers, processors, or participate in any role(s) or company that supplies services to the trawl fishery.

#### WHAT WILL I HAVE TO DO AND HOW MUCH TIME IS REQUIRED FROM MY PARTICIPATION?

You are being asked to participate in this study which includes your completion of a survey and a short interview. It is expected that the average time to complete the survey and conduct the interview is 1 hour. Time periods may be shorter or slightly longer depending on each participant.

#### WHO WILL SEE THE INFORMATION I GIVE?

The information you provide will be seen in its full form by those researchers participating in this study. They will collect the information you provide and enter the information into a database. Your responses will be combined with responses from other participants and analyzed. The analysis of the data will then be added to any reports or publications of the study and be available to view by anyone whom is interested in this research.

#### ARE MY RESPONSES CONFIDENTIAL?

The information you provide will be kept confidential to the extent possible per MSA Sec. 402(b) and the NOAA Administrative Order NAO 216-100, Protection of Confidential Fisheries Statistics. In addition, in the event of a Freedom of Information Act (FOIA) request, we will protect the confidentiality to the extent possible under the Exemption 4 of the FOIA. To support the confidentiality of this research, your name will not be included on the survey document. When writing final reports and publishing the findings of this

research, your responses will be combined with responses from other participants so that no single individual may be identified. All personal names provided will be viewed only by the researchers. The names will either be coded with a descriptor such as 'X Community Fisherman' or assigned a code such as 'A1' as an identifier. The type of code that will be applied to each data set may vary based on the question or the analysis required of that question. Every method to protect the confidentiality of all responses will be applied in any and all contexts of this research.

#### DO I HAVE A CHOICE TO BE IN THE SURVEY?

Participation in this research is completely voluntary. You may ask questions at any time. You may ask for additional information about specific questions or the research as a whole. You may participate in the study and chose not to answer specific questions without any consequence at any time. You may stop your participation at any time.

### WHAT ARE THE RISKS AND BENEFITS OF THIS STUDY?

There are no foreseeable personal risks or any personal direct benefits of this study.

#### WILL I BE ABLE TO SEE THE RESULTS OF THIS STUDY?

Research results will be provided either in electronic or hard copy form to all participants/ organizations who participated in the research. The resulting documents will also be publicly available to any other parties who have an interest in the research.

#### WHAT IF I HAVE QUESTIONS?

If you have additional questions or would like additional information about this study, please do not hesitate to contact the Principal Investigator, Suzanne Russell, Office (206) 860-3274 or suzanne.russell@noaa.gov.

## THANK YOU FOR YOUR TIME AND WILLINGNESS TO PARTICIPATE IN OUR RESEARCH

Your signature indicates that this research study has been explained to you, that your questions have been answered, and that you agree to take part in this study. You will receive a copy of this form.

Participants Name (printed):

(Signature of Participant)

(Date)