

**“Cook Well After Stroke” Program Study**  
**INFORMATION FOR PARTICIPANTS/ CONSENT FORM**

**Introduction**

You are invited to take part in a research study to help test out a cooking program for people who have had a stroke. This cooking program will provide information and tips from health professionals and stroke survivors about healthy eating and cooking skills. The program aims to help stroke survivors build confidence in meal preparation by preparing simple, nutritious meals.

This study will test a cooking program designed to assist stroke survivors with meal preparation, focusing on healthy eating practices.

This research is being conducted as a part of a PhD research degree at the University of Newcastle. The PhD student is Nicole (Chian Thong) Chun, and she is supervised by Associate Professor Amanda Patterson (principal supervisor), Professor Lesley McDonald-Wicks, Professor Coralie English and Professor Natasha Lannin.

**What is the research about?**

Eating well helps reduce the risk of another stroke. However, the effects of a stroke can make preparing meals and changing eating habits challenging.

Our research team, which includes stroke survivors and health professionals, has designed a cooking program. The program aims to simplify healthy eating after a stroke. Our team has previously created the first Australian Stroke Recipe Book with input from stroke survivors. This project focuses on testing a cooking program using the Recipe Book.

**Where is the research being done?**

The study is being conducted by researchers from The University of Newcastle and will use online platforms such as email, web browser and Zoom.

If you're not sure about using Zoom, the research team can help you practice before the sessions, so that you feel comfortable on the day.

**Who can participate?**

Adults over 18 years who have had a stroke more than 3 months ago, but less than 10 years ago, living in the community.

Carers/ family members of stroke survivors are encouraged to participate with stroke survivors if desired.

## **What choice do you have?**

Take your time deciding if you want to participate. We will wait at least 7 days after you express your interest (via email) before contacting you again.

Joining this study is entirely voluntary. If you decide not to participate, that decision will be respected."

You can choose to stop participating in the study at any time and for any reason. Your decision to continue or stop will not affect your care. You do not need to explain why you decided to leave the study.

## **What will the study involve?**

1. This is a 10-week program that you can participate in in your own home.
2. At the beginning of the study, you will complete a survey about your personal information, meal preparation confidence, and fruit and vegetable intakes. The surveys may take about 20-30 minutes to complete, but this may vary depending on the individual. You are welcome to take your time or pause and return to the surveys at your convenience.
3. You will receive a recipe book along with some introductory resources. All the recipes are simple and easy to make, needing just basic cooking tools.
4. Every two weeks, we will send you one to two short cooking videos, each lasting less than 10 minutes. You will be asked to prepare meals using these videos. The estimated cost of groceries for these meals is between \$30 and \$50.
5. You are encouraged to join three Zoom Peer Support sessions to share your cooking experiences with researchers and other stroke survivors. Each session will last no more than 1 hour, and you are free to leave whenever you like. These Peer Support Zoom sessions will not be recorded.
6. Throughout the study, you are also welcome to join a private social media group and share your experiences with other participants.
7. At the end of the study, you will complete another survey about your experience with the program. The surveys may take about 30-40 minutes to complete, but this may vary depending on the individual. You are welcome to take your time or pause and return to the surveys at your convenience.

## **What are the risks and benefits of participating?**

### **Risks**

We do not foresee any risks associated with participation. However, some risks may be unforeseeable.

If you experience any discomfort or stress, please do not hesitate to reach out to the research team. You can also contact to the following helplines available 24/7: Emergency Line (000), NSW Mental Health Line (1800 011 511), Beyond Blue

Mental Health Line (1300 22 4636); or StrokeLine (1800 787 653) which is available Monday to Friday 9am-5pm (AET).

## **Benefits**

This project will help us ensure the cooking program is practical, acceptable, and easy for stroke survivors to use. In the end, this may help them feel more confident in preparing nutritious meals.

## **Will the study cost you anything?**

There is no cost to participate. The estimated cost of groceries to prepare the suggested meals is between \$30 and \$50. You will receive a total of \$100 in grocery gift cards to help cover the cost of ingredients for the recipes and internet usage. You'll get \$50 by the end of week 1 and another \$50 by the end of week 10.

## **How will your privacy be protected?**

The information collected from you will be treated securely. You will not be identified in any publication or media without additional written permission. Study data will be stored securely in accordance with Australian privacy laws for a minimum of 5 years from the date of the first publication.

All data will be collected and stored using REDCap (Research Electronic Data Capture) on a secure University of Newcastle drive. Only the researchers named in this document will have access to the data. The full privacy policy is available here: <https://projectredcap.org/software/mobile-app/privacypolicy/>

Your survey response data will be analysed by the research team. All the data will be de-identified to protect your confidentiality.

## **Further Information**

When you have read this information, Nicole Chun or Associate Professor Amanda Patterson can discuss it with you and answer any questions you may have.

If you have any questions, please contact:

Nicole Chun, Email: [chianthong.chun@uon.edu.au](mailto:chianthong.chun@uon.edu.au) or

Amanda Patterson, Phone: 49216420, Email: [amanda.patterson@newcastle.edu.au](mailto:amanda.patterson@newcastle.edu.au)

A full list of researchers involved in this research project can be requested.

This information statement is for you to keep.

Thank you for considering the invitation to take part in the study.

If you are interested in participating, please contact the researchers via email [chianthong.chun@uon.edu.au](mailto:chianthong.chun@uon.edu.au).

Yours sincerely,

*Amanda Patterson*

Amanda Patterson

Principal Coordinating Investigator

Associate Professor at the University of Newcastle

*Nicole Chun*

Nicole (Chian Thong) Chun

Principal Investigator

PhD Candidate at the University of Newcastle

**Ethics:**

This research has been approved by the University of Newcastle Ethics Committee, (H-2024-0310).

**Governance:**

The conduct of this research has been authorised by the University of Newcastle.

**Complaints about this research:**

Should you have concerns about your rights as a participant in this research, or you have a complaint about the manner in which the research is conducted, it may be given to the researcher, or, if an independent person is preferred, please contact the University of Newcastle Research Ethics Office, Telephone: (02) 4921 6333. Email: [human-ethics@newcastle.edu.au](mailto:human-ethics@newcastle.edu.au) and quote the Reference Number.

# Consent Form

## **Declaration by Participant**

I have read the Participant Information Statement or someone has read it to me in a language that I understand.

I understand the purpose, procedures and risks of the research described in the project.

I have had an opportunity to ask questions and I am satisfied with the answers I have received.

I freely agree to participate in this research project as described and understand that I am free to withdraw at any time during the project without affecting my future care.

I understand that I will be given a signed copy of this document to keep.

☐ I wish to be notified about results of this study. My contact details are below:

Email address/ phone contact:

☐ I wish to be notified about future research studies.

Email address/ phone contact:

Name of Participant

Signature

Date

## **Declaration by Researcher†**

I have given a verbal explanation of the research project; its procedures and risks and I believe that the participant has understood that explanation.

Name of Researcher†

Signature

Date

† An appropriately qualified member of the research team must provide the explanation of, and information concerning, the research project.

Note: All parties signing the consent section must date their own signature.