

# KENTUCKIANA INFERTILITY SUPPORT GROUP

## INFORMED CONSENT

Welcome to your group experience!

This peer-led support group is open to anyone struggling with infertility. There are no barriers to participate. The goal of our group is to build a support system on information and knowledge to empower and uplift individuals struggling with infertility. A support group can be a powerful and valuable venue for healing and growth. It is the desire of your group facilitator(s) that you reap all the benefits this group has to offer. To help this occur, groups are structured to include the following elements:

- A safe environment in which members feel valued and understood
- Mutual respect for others
- An experience of support

### **WHAT TO EXPECT:**

Group meetings are peer-led with an assigned facilitator(s) present at each meeting. This is not a psychotherapy group. Group meetings will last approximately one hour. Discussions may revolve around the experiences of the group members or focus on a particular topic with all members participating. At times the group may invite guest speakers to join us. In either case, the peer-led support group dynamic offers a place where you can both experience and offer support.

### **A SAFE ENVIRONMENT:**

A safe environment is created and maintained by both the facilitator(s) of a group and its members. Primary ingredients are mutual respect and a chance to create trust. Respect will be extended toward group members as well as professionals in the field of fertility treatment. Another primary ingredient for a safe environment has to do with confidentiality. As group members, we are bound by honor to keep what is said in the group in the group. Your group facilitator(s) will monitor discussions and maintain a respectful environment to keep safety and trust a priority. Should a member break the code of safety, leaders reserve the right to ask the group member to leave the group.

### **LIMITS OF CONFIDENTIALITY:**

Although this is not a counseling/therapy group, the facilitator(s) are required to follow their professional laws/standards regarding limits of confidentiality. If you are a threat to yourself or others (showing suicidal or homicidal concerns), or if information regarding or suggesting any type of violence or abuse/neglect of persons be shared, your facilitator(s) may need to report your statements and/or behaviors to family or other appropriate mental health or law enforcement professionals in order to keep you and others safe.

### **ADDITIONAL SUPPORT:**

Facilitators are not medical professionals. If you have any medical questions, concerns or needs, you need to follow up with your personal healthcare providers. If you feel you would benefit from more formal counseling support or would like information about therapists in your area, please speak to the facilitator(s) at your group meetings, or contact Jenny Shanks at Kentucky Fertility Institute, located at 4612 Chamberlain Lane, Ste 200 Louisville, KY 40241; 502-996-4480; [jenny.shanks@kentuckyfertility.com](mailto:jenny.shanks@kentuckyfertility.com).

### **AGREEMENT:**

Your signature below indicates that you have read this consent agreement in its entirety, understand it, and agree to abide by its terms.

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**Group Member Signature**

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**Date**

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**Group Member Name Printed**