

Family Options Counseling, LLC
Alternatives to Sexual Assault Program – for Persons with
Limited or Underdeveloped Skills (ASAP-PLUS)
Informed Consent Policy

Treatment:

The purpose of this form is to provide clients with specific information regarding the treatment and/or psychological assessment that will be received while involved in the Alternatives to Sexual Assault Program. This information is offered in both written and verbal forms.

The Alternatives to Sexual Assault Program is specifically designed to treat children and adolescents between the approximate ages of 5-21 years of age who have engaged in inappropriate sexual behavior or are at risk for this type of behavior. The Alternatives to Sexual Assault Program is also appropriate for children, adolescents, and their families who have been otherwise affected by sexual abuse, including being exposed to sexual aggression or being a victim of sexual abuse.

The informed consent regarding the treatment and assessment through the Alternatives to Sexual Assault Program will expire in one year unless otherwise specified below.

Adjusted expiration date: _____

Research:

This is a research related treatment program. The data collected from the client in this program may be used to conduct research about the nature of sexual abuse as well as the effectiveness of this treatment program. The purpose of this research is to gain a more scientific understanding of inappropriate sexual behavior among children and adolescents as well as to ensure that the best treatment is being offered. In regards to the research, the client's name will be coded in order to maintain anonymity.

The informed consent regarding the use of data for research purposes does **not** expire within a certain period of time as the data may be used in research much later than the dates the client is involved in treatment.

The client's informed consent to participate in the treatment, assessment, and/or research can be withdrawn at any time. The client would need to express this withdrawal of their informed consent in writing.

Client

Date

Legal Guardian (if client is under 18)

Date