

APPENDIX A

SUBJECT INFORMATION SHEET

My name is Emeldah Mashaba. I am conducting a study on disclosure among black South African homosexuals. I invite you to participate in this study. The research is a part of the requirements for the Masters course of Arts in Clinical Psychology at University of the Witwatersrand.

The research aims to investigate the process of disclosure, in terms of understanding the factors that facilitate and inhibit disclosure among black South African homosexuals. Furthermore, the research seeks to explore the positive and negative consequences of disclosure and ways of dealing with them.

Your participation in this study is voluntary. You have the right to refuse to participate as well as the right to withdraw from partaking in the interview at any point you wish without any penalty whatsoever. Participation in the study will involve taking part in an audio-taped interview which will take approximately an hour of your time. Please take note that the information you give will be confidential. Only the supervisor and the researcher will have access to any identifying information. You are not required to state your identifying details.

In case you experience negative reaction(s) from participating in this study, the researcher will help to provide you with adequate counselling from the Career and Counselling Development Unit (CCDU).

If you have any queries concerning the study, please feel free to contact the people below.

Thank you.

Researcher: Emeldah Mashaba
0736557028

Supervisor: Modipa Oscar
011 717 4518

APPENDIX B

CONSENT FORM

I.....(full names), voluntarily agree to participate in the study of disclosure among a group of black South African homosexuals. I have been fully informed about and have understood the procedures in this study. I am aware of the purpose of the study. I understand that the information I shall have given will be treated with confidentiality. I am also aware about my rights to withdraw from the study at any time without negative consequences to me whatsoever. Shall a need to get emotional help arise; I will be offered adequate help.

I have been given an opportunity to ask questions which have been answered adequately.

Sign..... Date.....

Witness..... Date.....

APPENDIX C

TAPE RECORDING CONSENT FORM

I.....(full names), voluntarily give consent for my interview to be tape-recorded. I have read, understood and fully agree to conditions of this interview. I am also aware of how the recorded information will be utilised.

Sign.....Date.....

Witness.....Date.....