

**Informed Consent Documentation is a Requirement of all ERB/IRB Review**

Hello, my name is *[data collector's name]*, and I work with UNICEF *[or your organization]*.

We are conducting a study about *[study topic or purpose]*.

We would very much appreciate your *[or your child's]* participation in this study. Participation involves *[data collection type, e.g., FGD]* with you *[or your child]* about your *[or your child's]* experiences with *[study topic]*. *[Continue thusly with adult self or child's parent or guardian.]*

Your participation will take about *[time commitment]*.

The information you provide will be strictly confidential and never connected to you. We will put information from you together with information from other people in this study. No one will be able to tell what information came from you. When we report on this research, we will not use your name, and no one will know what answers you gave. Only a few researchers will have access to this information, and all information will be stored safely under the care of the lead researcher.

Your participation in this study may not benefit you directly, but it may benefit others. Your responses may improve UNICEF's work and understanding about ways to provide better services to people like you.

Your participation in this study is voluntary. If you don't want to be in the study, it is okay. If you want to be in the study now and change your mind later, that is okay too. You can decide not to answer any question and can stop at any time. Your decision about whether to participate or to answer any questions will not affect any services you receive. If you choose to participate, please answer the questions honestly, so that we can understand your experience.

Before you say yes or no to being in this study, we will answer any questions you have. If you join the study, you can ask me questions at any time. You may also contact *[Name and contact info of Principal Investigator or other staff]* if you have any questions or concerns.

Do you have any questions now?

Do you understand everything I have explained?

Do you agree to participate in this interview?

Signature of Participant: \_\_\_\_\_

*[NB: Signature is optional and verbal consent is permissible if investigators feel this is the best option for their study. Likewise, it is preferable but not mandatory to leave a copy of this form with each subject. However, contact information must be left with each subject for later use.]*