**Focus Group Participant Consent form**

**Title: ….**

**What is this study about?**

This study is being conducted by**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**. I am inviting you to participate in this study because\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Purpose of study**

**Do I have to take part in the focus group discussions and if I do can I stop participating in the focus group discussions at any time?**

Your participation in this research is completely voluntary. You may choose not to take part at all. If you decide to participate in this research, you may stop participating at any time. If you decide not to participate in this study or if you stop participating at any time, this will not affect your ongoing research studies in any way.

**What will I be asked to do if I agree to participate?**

You will be asked to participate in a focus group discussion comprising of (participants and their roles)\_\_\_\_\_\_\_\_\_\_. Guiding questions will be asked by a trained moderator. The discussions will be held at a selected site in a room that can afford a maximum degree of privacy and individual participants will be not be identified by their names but will be assigned a number which will be displayed on a nametag. The focus group discussions should take a maximum of \_\_\_\_\_\_\_\_\_\_ minutes. The moderator and note-taker will be (**tool for data collection e.g. audio tape**) the session as well as taking notes so that we don’t miss any of your important comments and contributions. The questions that you will answer will include questions on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

**Would my participation in this study be kept confidential?**

We will do our best to keep the information you provide during the discussions confidential. Your identity as well as that of all team members involved in the focus group discussions will remain confidential. The moderator and note-maker will not use names or personal identifying information in anything written about this focus group discussion. To help protect your confidentiality, all effort will be made to ensure that \_\_\_\_\_\_\_\_\_\_\_\_\_\_( e.g the tapes with the answers to your questions and any notes which will be made) during the group discussion will kept in lockable filling cabinets which will remain locked at all times. The research investigator for this study will be the only one with access to the key. Data that will be entered in the computer will be protected with a password only accessible to the research team. In case of any publications, or reports about this research project, your identity will be protected to the maximum extent possible. Your identity as well as that of the focus group team members will remain confidential.

**What are the risks of this research?**

**What are the benefits of this research?**

**What if I have questions?**

This research is being conducted by\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (names and place of Principal Investigator) If you have any questions about the research study itself, please contact (PI) Postal address, Telephone or e-mail address. Should you have any questions regarding this study and your rights as a participant or if you wish to report any problems you have experienced related to the study, please contact:

**Head of Department:**

Research Unit Ministry of Education (Names , postal address and telephone numbers)

Contacts for Office of Research and Development, University of Botswana

**Declaration by participant**

I have read or has been explained the information above, and I have had all my questions answered to my satisfaction. I voluntarily agree to participate in this focus group discussion

Please indicate below whether you agree to participate in the focus group discussion

\_\_\_ I agree to be (**method of collecting data e.g. audio tape, videotape etc)** during my participation in this study.

Signature……………………………… Date……………………

\_\_\_ I do not agree to be  audio taped during my participation in this study.

**Signature……………………………….. Date**

**Audio taping/Videotaping/Photographs/Digital Recordings**

This research study involves making audiotapes to allow data to come out in its detailed richness and allow research assistants to observe the participants and make notes. These tapes will be locked up in filling cupboards and only the research team will have access to the key. The tapes will be destroyed three years after close-out of the study.

Please indicate below whether you agree to be audio taped.

\_\_\_ I agree to be audio taped during my participation in this study.

Signature……………………………… Date……………………

\_\_\_ I do not agree to be  audio taped during my participation in this study.

Signature……………………………….. Date

**Declaration by Principal Investigator /research assistant**

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ declare that:

* I explained the information in this document to the participant.
* I encouraged him/her to ask questions and took adequate time to answer them.
* I am satisfied that he/she adequately understood all aspects of the proposed study

Signature of researcher/research assistant\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_