

HML IRB Sample Child Informed Assent

Child Informed Assent

For study participants less than 18 years old
[for survey, FGD, etc.. here]

Your Study Title Here
Your Organization Name Here

Hello, my name is _____, and I work with [your organization].

We are studying [briefly explain the purpose of your research].

We would like you to be a part of this study. This involves a [survey or interview or FGD, etc.] about your experiences with [study purpose and why they were selected].

The [survey, etc.] will take about [time].

Being a part of this study is voluntary. If you don't want to be in the study, it's OK. If you want to be in the study now and change your mind later, that's OK too. You can stop at any time. You can choose not to be in the study even if your parent gave their permission. Your choice about being in this study or to answer any questions will in no way affect your grades any services you receive.

We will record your information by [audio, photo, video, or other].

The information you give us will be strictly confidential. That means it will never be connected to you. Other people will not know if you are in this study or what you have said unless required by the law (ex; child abuse). We will combine the information you give with information from other young people in the study. When we report this research, we will never use your name, and no one will ever know what answers you gave. Only a few researchers will have this information, and all your information will be stored safely by the lead researcher.

[For focus groups] Please do not tell anyone outside of the group what was said in our discussion. You may use a fake instead of your real name.

We will use the information you give us to [briefly explain uses and reuse of data collected].

Your participation in this study may not benefit you directly, but it may benefit others. There are [no risks or these risks; describe] for you by being in this study

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 questions at any time. You may also contact [*local accessible name, phone/text number, email*] if you have any questions or concerns.

Do you have any questions now?

Do you understand everything I have explained?

Would you like a copy of this assent?

Do you agree to participate in this study?

Child's assent: [*recorded by verbal, signature, check box, etc., assent*]

Researchers also please note:

1. This is a suggested version of the assent you may use and will necessarily change with age group and translations. However, please touch on each of the points mentioned here.
2. For child subjects, this should be accompanied by a parental consent. Please see *Sample Parental Informed Consent*.
3. If you have more than one type of data collection (survey & FGD), you will need separate assents for each type.
4. You must record each assent.
5. Your contact info must be provided for subject to keep.