Informed Consent Template

**Title of the Research Study:** <study title>

**Principal Investigator(s):** <PI name(s)>

*General Study Information*

**Introduction**

If a person (e.g., **enumerator**) will conduct the consent process:

*IPA version:* Hello, my name is <enumerator name>. I am a researcher for Innovations for Poverty Action (IPA), a research and policy non-profit that finds and promotes effective solutions to global poverty and other problems.

*Non-IPA version:* Hello, my name is <enumerator name>. I am a surveyor from <insert data collection firm>, <explain what data collection firm does>.

If consent will be **self-administered (**e.g., an online form):

*IPA version:* Hello! We are Innovations for Poverty Action (IPA), a research and policy non-profit that finds and promotes effective solutions to global poverty and other problems.

*Non-IPA version:* Hello! We are <insert data collection firm>, <explain what data collection firm does>.

We are doing a research study on behalf of <add funding agency/organization or other institution commissioning the research>.

**Why is this study being done?**

The purpose of this study is to <explain research goals in language understandable to respondents>. We are inviting <you/your child/you and your child> to participate in this study because <add eligibility/screening/inclusion criteria>.

Please note that our primary focus is on research, aiming to understand <note the knowledge you expect to gain through the research>. This study is not intended to provide aid or services but rather to gather valuable insights into these areas.

*Voluntary Participation*

**Do I have to be in the study?**

You do not have to be in this study if you don’t want to; it is completely voluntary.

You will not be penalized in any way (or lose any benefits you currently receive) if you refuse to participate. During the <survey/interview/etc.>, you can skip any question or stop participating at any time. After today, if you later decide you would like to withdraw your consent and stop participating in this study, you can do so by informing the research contact person listed at the end of this consent.

If respondents are **employees** at a firm, teachers at a school, etc.:

Your participation or nonparticipation in this study will in no way affect your employment at <insert employer here>.

If there is any circumstance where the research team would terminate a subjects’ participation:

If the research team determines that <describe circumstances where PI would terminate a subjects' participation in the research>, you will be removed from the study.

*Research Procedures*

**What is involved in this study?**

If you choose to participate in this study, we will ask you to <describe data collection procedure – e.g., complete a survey, participate in a focus group>. This <survey/interview/etc.> will take approximately <duration> of your time. We will ask you questions about <describe topics to be covered – e.g., household information, education, savings behaviors, any sensitive topics, etc.>.

If the study involves **randomization, intervention**, etc.:

*Default language:*

You also may be randomly assigned to <describe possible intervention(s) – e.g., be invited to participate in a training, receive SMS messages about xyz>.

*If you wish to be less explicit about your randomization design to avoid potential biases:*

In this study, participants are randomly assigned to different groups which may receive different interventions. While you will be informed about the version of the study you have been assigned to, you will not be informed about the different versions that other participants are in.

Random assignment to different groups in this study will be conducted by a computer (or other automated system)—this means that nobody (not you or anyone on the research team) can affect your chances of being assigned to any group.

If the participant will be asked to participate in **more than one procedure** (for example, a survey AND a focus group):

You <may/will> also be asked to <describe other data collection procedures, including duration>, where we will ask you questions about <describe topics to be covered>.

If the study will involve **follow-up** data collections:

*If you know how many times you expect to return:*

We also plan to return <number of times> in the next <total timeframe> for <a> follow-up <survey/interview/etc.>, but you are free to decline participation in the follow-up<s> if you wish.

*If you are not sure how many times you will return:*

We also plan to return in the future for some follow-up <surveys/interviews/etc.>, but you are free to decline participation in the follow-ups if you wish.

*Other Procedures*

**What else is involved in this study?**

If this data collection will be **audio-** or **video-recorded**:

We would like to <audio/video> record <all/parts> of today’s survey <specify purpose – e.g., to help us validate the quality of the data collected, for further analysis, etc.>.

If you wish to collect **GPS coordinates**:

We would <also> like to record the GPS location of this <survey/interview/etc.> <specify purpose – e.g., to help us validate that we are collecting data in the right place, for location-based analysis, etc.>.

If you wish to **photograph** participants:

*If you do not plan to share photos publicly:*

We would <also> like to take photographs of <be as specific as possible about what will be photographed> for <specify purpose – e.g., to allow us to analyze xyz>.

*If you plan to use photos publicly in presentations, publications, etc.:*

We would <also> like to take photographs of <be as specific as possible about what will be photographed> for use in publications or presentations about the study. <Explain any steps you will take to preserve anonymity for photo subjects if photos will be used publicly, e.g., photographing from behind.> Even though we will take these steps to preserve your anonymity, it still may be possible to identify you as a participant in this study if someone recognizes you in photos that are shared publicly.

*If participants can opt out of this:*

This is not mandatory—you can still participate in this study if you do not consent to <audio recording/video recording/GPS data collection/photography>, and there will be no negative consequences for opting out.

*If mandatory:*

This is required for participation in the study—if you do not wish to <be recorded/have these GPS data collected/be photographed>, that is fine, but you will not be able to participate in the study.

These <audio recordings/video recordings/GPS data/photos> will be securely destroyed as soon as possible once they are no longer needed, and only anonymous responses will be stored for future use.

If the data collection involves…

***Anthropometric*** *measurements:*

We also would like to measure your <height/weight/etc.>.

***Biospecimen*** *& other* ***biometric*** *data collection:*

We also would like to <collect/measure> your <heart rate/blood pressure/stress levels/etc.>. To do this, we will <explain procedure – e.g., put a cuff on your arm to take your blood pressure, prick your finger to collect a single drop of blood, etc.>. <Explain if participants will be informed of any relevant health information, e.g., high blood pressure.>

If participants can opt out of this:

This is not mandatory—you can still participate in this study if you do not consent to <list specific anthropometric measurements/biospecimen collection/etc.>. There will be no negative consequences for opting out.

If mandatory:

This is required for participation in the study—if you do not consent to <list specific anthropometric measurements/biospecimen collection/etc.>, that is fine, but you will not be able to participate in the study.

If collecting physical samples:

We will make every effort to keep the samples collected from you secure and ensure that they are only handled by authorized members of the research team.

*Compensation*

**Will I be paid or given anything to take part in this study?**

*If yes:*

As a token of thanks for your participation, you will receive <describe compensation, including amount & method of delivery, e.g., mobile money> for completing this <survey/interview/etc.>. <If participants will be compensated for any other procedures, mention this as well.>

*If no:*

You will not be compensated for participating in this <survey/interview/etc.>.

*Benefits*

**Are there benefits to taking part in this study?**

If subjects may benefit from participating in the study:

You might benefit from being in this study <state how participants might benefit – e.g., if participants may receive information via SMS on farming best practices>.

If there are **no direct benefits** to subjects:

You may not receive any personal benefits from being in this study. However, the knowledge gained from this study has the potential to benefit others in the future. By participating, you are playing a role in advancing our understanding and potentially improving outcomes for <note community that may benefit from the research in the long run – e.g., at-risk youth in xyz city>.

*Risks*

**Are there risks to taking part in this study?**

- Below are possible risks applicable to many IPA studies. If there are other risks involved in your study beyond the ones covered below, please describe these risks as well. -

- Remove all that do not apply to your study -

*Sensitive Questions*

Some questions may touch on sensitive topics. If any question makes you uncomfortable and you prefer not to answer, you can skip it or stop the <survey/interview/etc.> at any point.

Since some of the questions are sensitive, we will ensure you are in a private space before commencing the <survey/interview/etc.>. Your privacy and comfort are our top priorities throughout this process.

*Loss of Confidentiality*

In all research studies, there is a risk that confidentiality may be compromised and others outside the research team may see your private information. The research team will use careful procedures to avoid this possibility and keep your information private.

If any **mandatory reporting** requirements may apply to your study:

*Legal Implications*

If we uncover certain sensitive information (for example, abuse or neglect), we may be required to report this to authorities. This may result in legal consequences, including the possibility of arrest.

If you will collecting **biometric data**:

*Physical Effects*

Participants might encounter physical discomforts such as <xyz>.

For greater than minimal risk studies, if applicable:

This study may involve risks that cannot be anticipated at this time. If we learn of anything that may affect your decision to participate, we will inform you as soon as possible so you can reconsider your continuing participation in the research.

*Confidentiality*

We will use careful procedures to maintain the confidentiality of any information and/or responses collected during this research study.

**Who will see my information?**

The responses you provide will only be accessible to the research team and individuals from <IPA/other non-IPA organization> who oversee the research. Information that might identify you or your responses will only be disclosed to others outside this team of authorized researchers with your permission or as required by law.

For a **focus group discussion**:

We ask all members of this group to respect each other’s privacy and not repeat later what people said in today’s discussion. Please keep in mind that because we are in a group setting, we cannot guarantee that others in the group will not repeat what you said after you leave today.

**How will my data be kept safe?**

We will protect your confidentiality by ensuring all research data is collected and stored only on password-protected and encrypted devices in a manner consistent with all data security procedures.

If any **country-specific data protection** language should be included:

<Insert text entered by research team.>

**What happens after the study is done?**

Once we finish our study and no longer need your personal data, we will remove any details that could identify you. If we publish or present results of this study, we won’t include anything that could reveal who you are.

Language about whether you will **share data with/without PII**:

*If you will only* ***share de-identified data****:*

It is possible that we may wish to use information collected through this study for future research on different topics. We may even wish to share this information with other researchers. Before we use or share these data, we will make sure to remove any information that could identify you. We will not ask you to give consent again for these future studies as we will not share anything that identifies you.

*If you plan to* ***share data linked to PII*** *for other future research studies:*

We would like to share your identifiable information with other researchers for future research. We will ask for your consent to do so at the end of this form. You can be a part of this current research project without agreeing to this future use of your identifiable information.

Language about **re-contact for future studies**:

*Default language (if participants’ contact info will* ***not be shared outside the research team****):*

We may re-contact you in the future to invite you to participate in other studies. You may opt out of those studies and opt out of future invitations at any time.

*If you plan to* ***share contact information with other research teams*** *(to conduct future studies with same population):*

We would like to share your contact information with other research teams so that they may invite you to participate in other studies. This is optional—you are free to decline if you are uncomfortable. Even if you say yes now, you are free to decline any future invitations to take part in other studies.

*Contact Information*

**Who can I talk to with questions about this study?**

If you have any questions, comments, or concerns about this study, you can contact the research team using the information below:

<name of Research Associate/other responsible project personnel>

<title, e.g., Research Associate>

Phone: <local phone number>

If you have questions or concerns that you would like to discuss with someone other than the researchers, you can contact <*if more than one IRB:* one of> the ethics committee<s> overseeing this study. Their role is to protect the rights of people participating in research studies.

IPA IRB

Email: humansubjects@poverty-action.org

*Please reference project ID number <5-digit IPA ID number> in your email.*

If applicable:

<name of other/local IRB>

<Email/Phone>: <email address/phone number>

*Questions:*

If a person (e.g., **enumerator**) will conduct the consent process:

Do you have any further questions? [Yes/No]

If I have answered all your questions, do you agree to participate in this study?

If only obtaining **verbal** or electronic consent (e.g., an online checkbox):

Do you agree to participate in this study?

Yes\_\_\_\_ No\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If obtaining a **written signature**:

**Participant Signature:**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature/Thumbprint Date

**Signature of Individual Obtaining Consent**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Individual Obtaining Consent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Individual Obtaining Consent Date

- Remove all that do not apply to your study -

*Most common questions:*

Do you agree to be contacted in the future for follow-up parts of this study?

Yes\_\_\_\_ No\_\_\_\_

Do you give permission for this <survey/interview/etc.> to be <audio-recorded/video-recorded/photographed>?

Yes\_\_\_\_ No\_\_\_\_

Do you give permission for us to record the GPS location of this <survey/interview/etc.>?

Yes\_\_\_\_ No\_\_\_\_

Do you give permission for us to share your contact information with other research teams so that they may invite you to participate in other studies?

Yes\_\_\_\_ No\_\_\_\_

*Other questions:*

Do you give permission for us to <collect/measure> <list any anthropometric measurements/biometrics/biospecimens>?

Yes\_\_\_\_ No\_\_\_\_

Do you give permission for <photos/video recordings/audio recordings> taken of you during this <survey/interview/etc.> to be used publicly in presentations or publications about the study?

Yes\_\_\_\_ No\_\_\_\_

Do you wish to be contacted later about the results of this study?

Yes\_\_\_\_ No\_\_\_\_

ONLY if you plan to **share data linked to PII** for other future research studies:

***Consent to use or share your personal data for future research:***

We, the research team, may wish to use your identified data *(meaning: research data linked to information that could be used to directly identify you, like your name or home address)* for future research studies. We may also wish to share these data with other researchers.

Future studies may be investigating similar topics as this project, or they may be about something completely different. We will not re-contact you for additional consent to use or share your identified data if you give permission here.

You can contact us at any time to ask us to stop using your identified data. However, we will not be able to take it back from research projects that have already used it.

*Do you give permission for the research team to use or share your identified data for future research*?

Yes\_\_\_\_ No\_\_\_\_

ONLY if you plan to **share contact information with other research teams** (to conduct future studies with same population):

***Consent to share your contact information with other research teams:***

We would like to share your contact information with other research teams so that they may invite you to participate in other studies.

You are free to decline any future invitations to take part in other studies.

You can contact us at any time to ask us not to share your contact information with other research teams. However, we will not be able to take it back from research projects that have already used it.

*Do you give permission for us to share your contact information with other research teams so that they may invite to you participate in other studies?*

Yes\_\_\_\_ No\_\_\_\_