

Appendix I:

**Focus Group Moderator's Guide: Children
Parental Consent Form for Children to Participate**

Focus Groups Moderator's Guide: Children

[Note to moderator: All participants younger than 18 must have a consent form signed by a parent or legal guardian to participate in an interview or legal guardian. Please adapt the questions for the specific age group of the participants in the focus groups.]

Hello, my name is [Name of Moderator] and I work for [Westat/Georgetown University]. Also, with me is [Name of notetaker]. We would like you to participate in a group discussion about your experiences in [Name of Project], which is funded by the U.S. Department of Labor. We will also be talking to your [teachers, educators, etc.] about the needs of children in your area.

We are very interested in your experiences in school/vocational training as well as your work and family life. The purpose of gathering this information is to think about ways that we can improve your time in school. We will also use the information to start new educational programs similar to the one you attend.

The discussion will take about 1 hour. Participation is voluntary. Once the discussion gets going you may decline to answer any question.

We will report what everyone says without saying your name or what you specifically said during the discussion. If you don't want to answer a question, that is o-k. Do you have any questions before we begin?

[Name of Notetaker] will take notes during the discussion. We would also like to audiotape the discussion in case we miss something in our notes. Please let me know if it is o-k for us to record the discussion.

[NOTE TO MODEATOR: IF ANY OF THE PARTICIPANTS DO NOT AGREE TO THE RECORDING OF THE FOCUS GROUP, DO NOT RECORD IT.]

Let's first go around the table. Can each of you tell us your name, your age, and the length of time you have been in the program? *Probe for time in program.*

1. Please describe the type of program in which you are enrolled.

Probe: Formal education, vocational training, other.

2. What kinds of activities does the program offer?

*Probe: Educational activities (e.g., reading, writing, math, health, art, music, etc.).
Vocational activities (e.g., job skills – carpentry, agriculture, etc.)*

3. What kind of services does the program provide?

Probe: Uniforms, lunch, school fees.

4. Please tell me what you like about the program.

5. What do you not like about the program?

6. Do you work after school?

If yes, what kind of work? How does this program fit into your work?

Probe: Vocational training related to work?

7. How has the program changed the kind of work you do or the number of hours that you work?

8. What do you plan to do after you have completed school/training?

Probe: Additional schooling/training, work, work/school, family

9. What else would you like to tell me about your work/school/family life?

Thank you very much for participating in the discussion.

**PARENTAL CONSENT TO PARTICIPATE IN RESEARCH STUDY
EVALUATION OF THE U.S. DEPARTMENT OF LABOR'S TECHNICAL CHILD LABOR
COOPERATION PROGRAM**

Hello, my name is [Moderator's Name] and I am conducting a discussion with your child and his/her classmates about their participation in [Name of Project] as part of an evaluation of the U.S. Department of Labor's International Child Labor Technical Cooperation Program.

INTRODUCTION:

We are asking you to give permission for your child to participate in a discussion with approximately 7 other children on their experiences in [Name of Project]. The participants in the discussion group will be asked about the kinds of activities the project offers, and what they like and dislike about the project. Children will also be asked about the work they do after school and how the program has influenced them and their work.

PURPOSE OF THE STUDY:

The purpose of this study is to look at educational projects like [NAME OF PROGRAM] to make sure that they are meeting the needs of the children enrolled in them. The information we get will be used to help us better meet your needs. We are also collecting information to learn how best to inform people about the hazards of child labor

INFORMATION ABOUT THE STUDY:

This research involves 6 site visits to locations that have similar projects as yours. We are collecting information from parents, project staff, and community leaders as well as children to learn how we might enhance your project and similar ones.

YOUR ROLE IN THE STUDY:

Participation in the discussion group is voluntary. If you give permission for your child to participate in the discussion group he/she may decline to answer any question he/she chooses. The discussion group will take about 1 hour.

RISKS AND DISCOMFORTS:

There are no physical risks involved in participating in the study. The questions we will ask are very general and do not require your child to provide any personal information, except for his/her name and age. The decision to participate or not participate in the discussion group will not affect, in any way, the services your child receives.

POTENTIAL BENEFITS:

Your child may receive no direct benefit from participation in this research.

REIMBURSEMENT FOR STUDY PARTICIPATION:

There is no reimbursement for your participation.

CONFIDENTIALITY:

As part of this study, the study staff may record personal information, such as your child’s age. The notes taken during the focus groups will only include your child’s first name.

The collection and submission of the information will be accomplished with strict adherence to professional standards of confidentiality.

Information from this study may be published in professional journals or at scientific conferences but your child’s confidentiality will be respected and no names will be used in any report or presentation.

RESEARCH QUESTIONS AND CONTACTS:

You may freely ask questions about this consent form or the study now or at any time during the study. If you have any questions about the research, may contact Maureen Jaffe at the U.S. Department of Labor at the following phone number 202-693-4848. Local staff contact information_____

VOLUNTARY NATURE OF STUDY:

Entering into a research study is voluntary. Anyone who is asked to be in a research study may say no. No person has to become a research subject. If your child starts the study, he/she may stop at any time. Your child does not need to give a reason. The services your child receives from [NAME OF PROJECT] will not be influenced in any way by your decision.

CONSENT STATEMENT BY PARENT OR GUARDIAN:

I have read this consent form. My questions have been answered. I agree to allow my child to be in this research study for the purposes listed above. I will receive a copy of this consent form for my records.

Printed Name of Minor Research Subject (child)

Name of Parent or Guardian (Print)

Signature

Date

Name of Person Obtaining Informed
Consent

Signature

Date