

Appendix 2. Informed parental consent form – English version

INFORMED PARENTAL CONSENT FORM

Description: This study will examine menstrual practices of Nepali girls and women, menstrual product accessibility and financing of menstrual products in Nepal. It will help in establishing of a non-profit company in Nawalparasi District, which will produce menstrual pads, but also invest in the activities aiming to improve the well-being of Nepali women and girls . The research will be conducted in face-to-face interview method and the answers will be noted on the designated research sheet for the purpose of standard research procedures (eg. Analysing of responses, scientific publications, presentation at professional conferences, etc.). Your child's identity will not be revealed to anyone but designated research team.

Confidentiality: Respondent's answers will not be associated with their name. Rather, each respondent will be given an identification number on the interviewer's sheet.

Risks: There are no risks to your child's safety. You may opt to preview the research sheet or be present during the interview. The questions raise sensitive matters regarding menstruation practices but should not be seen as controversial issues and do not contain elements typically frightening to children and youth.

Freedom to Withdraw or Refuse Participation: I understand that my child has the right to stop the interview at any time, or to refuse to answer any of the interviewer's questions without prejudice from the investigator.

Questions? Please feel free to ask the investigator any questions before signing the consent form or at any time during or after the study.

Informed Consent Statement

I,, give permission for my child, to participate in the research project entitled, "Menstrual product choice, accessibility and practices among Nepali girls and women". The study has been explained to me and my questions answered to my satisfaction. I understand that my child's right to withdraw from participating or refuse to participate will be respected and that his/her responses and identity will be kept confidential. I give this consent voluntarily.

Parent/Guardian Signature: Signature Date:

Investigator Signature: Signature Date: