

Informed Consent Agreement

I am a graduate student in the Department of Political Science at the University of Florida. As part of my work toward a PhD I am conducting research for my dissertation. The scientific purpose of this research is to better understand the efforts of human rights activists, the role of donors and the response and concerns of the state regarding human rights between 1988 and 1997. I am asking you to participate in this interview because of your knowledge of the topic. The interview will last no longer than 45 minutes unless you wish to continue a little longer. I will conduct the interview at a place convenient for you. There are no anticipated risks, compensation or other direct benefits to you as a participant in this interview. You are free to withdraw your consent to participate and may discontinue your participation in the interview at any time without consequence. You do not have to answer any question that you do not wish to answer. If you do not want your name used, your identity will be kept confidential to the extent provided by law. If you agree that your name may be used but wish to say something that you have not said openly before and wish it to be on a confidential basis, your anonymity will be protected by my taking notes on separate pages without a traceable identification. The results of this research may be published as part of my dissertation and in subsequent publications.

If you have any questions about this research protocol, please contact me at my local number while in Kenya (444-59-37) or later at my home in the United States (386-734-3061. My home address is Box 4661, DeLand, Florida 32721; my email is bpress@stetson.edu or bob.press@ufl.edu. My faculty supervisor is Dr. Michael Chege who can be contacted at the University of Florida in Gainesville, Florida at telephone 352-392-2187, or 352-392-0262 or by mail at the Department of Political Science 234 Anderson Hall, University of Florida, Gainesville, Fl. 32611-7325. Questions or concerns about your rights as a research participant may be directed to the University of Florida Institutional Review Board office, University of Florida, P.O. Box 112250, Gainesville, Florida 32611 (telephone 352-392-0423)

Please sign this letter. By signing this letter, you give me permission to report your responses in the final manuscript to be submitted to my faculty supervisor as part of my course work.

Sincerely, Robert Press
Robert Press, University of Florida

I have read the above agreement. I voluntarily agree to participate in the interview and I have received a copy of this consent agreement. And I give permission for my name to be used.

X [Signature]
Signature of participant

(Sept 18, 2002)
Date

I have read the above agreement. I voluntarily agree to participate in the interview and I have received a copy of this consent agreement. I do not want my name used.

Signature of participant

Date

APPROVED BY
University of Florida
Institutional Review Board (IRB 02)
Protocol# 2002-433
For Use Through 5/21/03

DAVID MAKALI