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Kom binne: a narrative exploration of 'home' and personal agency for young people living in Eldorado Park

Titus, Jacqlyne Jo-Anne

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https://hdl.handle.net/10539/26468

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Drama for Life | Postgraduate Studies in Applied Drama, Drama Education and Drama Therapy | Wits School of Arts | University of the Witwatersrand
Private Bag 3, Wits 2050
Director: Warren Nebe

Programme Managers: Academic – Tamara Gordon-Roberts 011 717 4728; Cultural Leadership, Fundraising and Partnerships – Munyaradzi Chatikobo 011 717 4615; Recruitment, Student Welfare and Scholarships |Media and Communication – Natasha Mazonde 011 717 4755; Projects Management Officer – Hamish Neill 011 717 4735; Finance and Administration – Caryn Green 011 717 4727; Research - Hazel Barnes and Warren Nebe 011 717 4729;

Kom Binne: A Narrative exploration of Coloured adolescents' relationship between home and personal agency.

Informed consent to partake in research project

Dear Parent/Legal Guardian

I _____ parent/legal guardian of _____ confirm that by reading the information sheet Jacqlyne Titus has explained the nature of the research project. The research project will be to work collaboratively with a group where personal story will be explored using drama and theatre, with the group we will also be creating and performing a theatre piece making use of the personal story.

If you consent to this study please note that are agreeing to allow _____ (name of particioants) to be a participant in these workshops. The participants will be a part of group who will be a part of gereating material and creating a theatre piece. In the workshop process there will be extensive focus put on internal reflection through journaling (which will be guided by structured questions from the facilitator and which will be done by keeping record of personal progress and experience of the workshop in a notebook) and verbal dialogue with the other participants involved in the study.

I _____ parent/legal guardian of _____ (name of participant), confirm that Jacqlyne Titus has answered any questions pertaining the process of the research project. [If there are still more questions or questions that arise during the study, feel free to contact either me at 481020@students.wits.ac.za or alternatively my supervisor at: petro.jansevanvuuren@wits.ac.za]

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Participation in this project is entirely voluntary. If at any point _____ (name of participant) wishes to remove themselves from the research project, they will be able to do so. If they wish to not be part of the research project they will be free to do so, they will still be allowed to be a part of the workshops but their contributions to the study will not be used in the final research report.

Please ensure that you have received two copies of this form, both are to be signed, one is for my personal record keeping and the other is to be kept as confirmation that you have consented to this reseach project.

Please also note that audio and video recording devices will be made use of for archiving and to ensure that the data is accurate. This material will not be used to be presented in the final theatre piece but will be used as a means to capture the data from each session accurately, this material will not be seen by anyone other than myself and my supervisor, this video material as well as the journaling will be regarded as confidential research material. I, _____ parent/legal guardian of _____ (name of particpant) give permission to Jacqlyne Titus to make use of the data collected from journaling (which will be guided by structured questions from the facilitator (Jacqlyne) and which will be done by keeping record of personal progress and experience of the workshop in a notebook), recordings and from creating the collaborative theatre piece. Jacqlyne Titus will use the data as an essential part of her Master's research report on the relationship between *Home* and *Personal agency.*

- ☐ I consent to audio/visual recording for the purpose pf this research project (this material will only be viewed by myself and my supervisor is necessary.)

_____ _____

Parent/Legarl Guardian Signature Date

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Researcher Statement "I certify that the research study has been explained to all individuals involved in the study, and that the individual understands the nature and purpose, the possible risks and benefits associated with taking part in this research study. Any questions that have been raised have been addressed."

Researcher Signature

_____

Jacqlyne Titus
481020@students.wits.ac.za