Exploring the perceptions of communities toward the impact novel Coronavirus-2 (SARS-CoV-2), COVID-19 outbreak and response can have on their lives and security

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<th>Authors</th>
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APPENDIX TWO

INFORMATION SHEET AND RECORD OF VERBAL CONSENT FOR PARTICIPANTS

REC Reference Number: 2026 MSF_2020

PART ONE: INFORMATION ABOUT THE ASSESSMENT:

We would like to invite you to participate in this assessment project. You should only participate if you want to; choosing not to take part will not disadvantage you in any way. Before you decide whether you want to take part it is important for you to understand why the assessment is being done and what your participation will involve. Please take time to read or let's go through the following information carefully and please discuss it with others if you wish. Ask if there is anything that is not clear or if you would like more information.

Who is MSF?

This assessment is being led by a team from Medecins Sans Frontieres (MSF). MSF is an international nongovernmental humanitarian organization that aims to help people worldwide where the need is greatest, delivering emergency medical aid to people affected by conflict, epidemics, disasters, or exclusion from healthcare.

MSF has been working in X since X, most recently focusing on improving medical care for X. In response to the COVID19 outbreak MSF alongside managing their ongoing activities would like to prepare for appropriate outreach activities, surveillance, social care, and symptomatic treatment linked to the outbreak. We have also been supporting the COVID19 pandemic in many countries affected around the world.

Who is collaborating in this assessment?

Both Medecins Sans Frontieres, community representatives and a selection of people from the communities, and the authorities are collaborating in the assessment. X [list people] will be in the assessment team and Beverley Stringer from Medecins Sans Frontieres will coordinate the assessment. The Ministry of Health has provided a letter supporting the assessment and local authorities have been informed.

What is the aim of this assessment project?

This assessment aims to provide more information on how people have seen, understood and experienced COVID19 since the beginning of the epidemic. We will consider questions about: how you see health risks, what happens when someone in the family is sick, your family and social networks, what should you and your community do to prevent spread of infections and how you see treatment and care. By gathering peoples’ opinions as the outbreak progresses, we hope that we can improve our collective response.

Who can take part?

We are inviting members of the community and the leadership in the community to take part (as long as they are over the age of 12 years). We would like to hear the opinions of people living, caring and working in the community and those with responsibility too.

What will the assessment involve?
We will ask certain people from the community to take part; they can be young people, women, men, traders, farmers as well as leaders, healers, teachers. Participation is voluntary and you may choose if you would like to take part or not.

We will then conduct conversations which will last between 45 minutes and 1 hour. There is no right or wrong answer to questions. We would like to learn about your experiences and hear your ideas on how it may be possible to strengthen our activities to help you get through the changes to life and health due to the COVID19.

Considering the information from all the interviews we will discuss with you the solutions and preparations for prevention, treatment, and care. Our shared findings will be made available to all participants; you may choose if you would like to receive this feedback or not before the interview.

If you decide to take part, you are still free to withdraw, ask us to access your data or delete at any time and without giving a reason. Your answers and information will be kept private and confidential. Any comments we use will be done so anonymously (without using your name or any details that can link it to you. We will record interviews by taking notes, but these will not be used for any other purposes or be available to any other parties and will be destroyed at the end of the project.

What are the risks and benefits of participating?

There is a risk a participant may feel distressed by talking about worrying experiences during the interview. For this, we aim to link with existing support teams should any specific needs for psychosocial support arise.

We will treat interviews as anonymous and confidential and hope that people will feel free to talk openly about their experiences and opinions.

The main benefit of participating is the opportunity to improve the outbreak response by giving your opinions and suggestions. We hope based on this assessment we can not only improve the response of MSF but also other organisations at a national and international level.

What are the next steps?

If you would like to take part, please inform X. We will then arrange a convenient time for interview. Prior to the interview we will explain the assessment project in more detail, discuss any questions you have, and ask if you consent verbally to the following:

PART TWO: RECORD OF VERBAL CONSENT:

1. I understand that participation is voluntary.
2. I understand the information explaining the assessment and what my participation means.
3. I have had the opportunity to ask questions and discuss the assessment.
4. I understand that I may withdraw from the assessment at any time without giving a reason and without personal consequence at any time.
5. I understand that the information I give may form part of a published report and that I can choose to receive a summary copy.
6. I understand that what I say is confidential and my name and other identifying information will be removed to not reveal my identity in any reports, or to persons or organizations requesting it without my permission.

7. I understand that if I share information about an incident(s) of abuse or sexual and gender-based violence, it is my right to report it to a legal entity. I understand that medical and psychological care and support is available to me if needed.

**Date and Record of verbal consent:**

We have fully explained the assessment aims and process described in this form. We have answered the participant questions and will answer any future questions to the best of our ability. We have ensured the participant is competent to consent and understood what they were consenting to.

Printed name of field assessment investigator obtaining verbal consent for participation in the assessment:

_______________________________________

Signature of field assessment investigator obtaining verbal consent for participation in the assessment:

________________________________________

Printed name of field assessment investigator obtaining verbal consent for interview to be audio recorded:

_______________________________________

Signature of field assessment investigator obtaining verbal consent for interview to be audio recorded:

________________________________________

Date: ___________________________________________________________________

PART THREE: RECORD OF INFORMED ASSENT FOR PARTICIPANTS 12 – 17 Y AND THEIR GUARDIANS:

1. I have checked with the participant and they understand that participation is voluntary.

2. I have checked with the participant and they understand the information and have had a full explanation of the assessment and what participation means.

3. I have checked with the participant and they have had the opportunity to ask questions and discuss the assessment.
4. I have checked with the participant and they understand they may withdraw from the assessment at any time without giving a reason and without personal consequence at any time.

5. I have checked with the participant and they understand that the information given may form part of a published report and that they can choose to receive a summary copy.

6. I have checked with the participant they understand that what they say is confidential and their name will be removed and other identifying information so as not to reveal their identity in any reports or to persons or organizations requesting it without their permission.

7. I have checked with participant and they understand that if they share information about an incident(s) of abuse or sexual and gender-based violence, it is their right to report it to a legal entity. They understand that medical and psychological care and support is available to them if needed.

**Date and Record of verbal assent:**

We have fully explained the assessment described in this form. We have answered the participant and/or husband/parent/guardian's questions and will answer any future questions to the best of our ability. We have ensured the participant is competent to agree to take part and understood what they were agreeing to.

Printed name of field assessment investigator obtaining verbal assent for participation in the assessment:

_______________________________________

Signature of field assessment investigator obtaining verbal assent for participation in the assessment:

_______________________________________

_______________________________________

Printed name of field assessment investigator obtaining verbal assent for interview to be audio recorded:

_______________________________________

Signature of field assessment investigator obtaining verbal assent for interview to be audio recorded:

_______________________________________

Date: ________________________________