INFORMED CONSENT FORM

Informed Consent for adolescent girl and young women (AGYW) receiving services at health facilities (Ounick, Oshakati, Ongwediva & Ondangwa) in Oshana region who are invited to participate in research project: Development of peer-led strategies for health care providers to facilitate pre-exposure prophylaxis services among adolescent girls and young women in Oshana region, Namibia.

Name of Principal Investigator:	Peneyambeko Ipawa Shikulo
Name of Sponsor:	UNAM

This Informed Consent Form has two parts:

- **Information Sheet (this section, to share information about the study with you)**
- **Certificate of Consent (for signatures if you choose to participate)**

You will be given a copy of the full Informed Consent Form.

PART I: INFORMATION SHEET

Introduction

My name is Peneyambeko Ipawa Shikulo and I'm a candidate studying PhD in public health conducting research projects is one of the requirements to obtain my Doctoral degree. Since you are between the age of 18-24 years, you have the right to take part in the research study without your parent/guardian consent. Meaning you can decide if you want to take part in the study or not. You are free to talk to anyone for more information so you are able to make up your mind. I am going to give you more information about this study project.

The study is focusing on reducing the spread of new HIV infections among adolescents' girls and young women. We cannot do it without your contribution. Meaning your contributions to this research project it's very important not only to me as a researcher but to the entire country. The Government is also trying to come up with the strategies to reduce new HIV infections among adolescents' girls.

There may be some words which you may not understand or things that you want me to explain more. Please feel free to stop me any time and I will take time to explain.

Purpose of the research: Why are you doing this research

I would like to develop peer-led strategies that will facilitate PrEP service among adolescent girls and young women. To motivate AGYW to take action in taking care of themselves in the context of HIV prevention. I'm focusing to the adolescent girls and young women because they are more vulnerable and they are future generation. Failing to take Adolescents health in to consideration, they will be no future.

Type of Research Intervention

This research will involve your participation in answering the questionnaire and interview that will take at least 40 minutes.

Participant Selection

As I mentioned early, the study is targeting adolescent girls (15 -24 years old). Meaning every adolescent girl of your age using that mentioned health facilities are qualified to take part in this, she can be a **PrEP user or non-PrEP users**.

Voluntary Participation

I am humbly requesting you to assist me to take part in my research project. However, if you do not feel comfortable, then no need to take part. Even after you signed the consent to take part, you still have full right to refuse if you feel so without any intimidation. Meaning taking part in this study is should be something of your choice. Even if you say "yes" now, you can change your mind later at any stage.

Procedures

As a researcher, I will be given the authority to conduct the study by the executive office in form of an approval letter. The arrangement will be made with the regional Health director to collect the data at the indicated health facilities. The data collection date will be discussed with the health facilities in charge. Individual consent will be obtained from the participants before taking part in the study. I will be making an arrangement with the clinic in charge to meet with you after you have agreed that you will take part in the study. We will have been given a room for privacy where we are going to have our discussions. First you will be given the paper with questions (questionnaires) to complete. There is clear instruction in the questionnaire, but I will still be available to explain to you what is really expected of you. Then once you are done with questionnaires we will have individual interview. In the agreement there will be also information of audio record. Meaning our discussions will be recorded. Everything that we are going to discuss will be handling with confidentiality. Your name will be not link to any information

Example 1 (for questionnaire surveys)

If you do not want to answer some of the questions included in the questionnaire, you may skip them and move on to the next question. The information recorded is confidential, and no one else except myself, research assistant and my supervisors will have access to information. [The questionnaires will be destroyed after 5 years' period time.

Example 2 (for interviews)

If you are not willing to answer any of the questions during the interview, you should feel free to say so and the interviewer will move on to the next question. The interview will take place in clinics, and no one else but the interviewer will be present unless you ask or someone else to be there. The information recorded is confidential, and no one else except me will have access to the information. The recordings will be destroyed after 5 years' period of time.

Duration

The research takes place 2 months in total. During that time, I will visit you once and the interview will take 40 minutes

Risks

There is no risk involved, the participant will be just required to answer questions which are formulate in consideration of topic sensitivity and also by adhering to the ethical measures.

Benefits

There is no direct benefit. But, the adolescents will gain knowledge about the study subject and your contributions will help in developing the strategies to facilitating PrEP services among AGYW.

Reimbursements

You will not be provided any incentive to take part in the research.

Confidentiality

Confidentiality means everything that we are going to discuss; it will be kept as a secret. No name will be recorded, but we will rather use the code.

Information about you that will be collected from the research will be put away and no-one but the researchers will be able to see it.

Sharing the Results

Actually, there will be no sharing of the result with individuals, but the result will be generalized and specific to your group and the book will be developed and the findings will be also shared with the clinic management and will be also used to mobilize the adolescents to utilize the PrEP services. However, arrangements can be made after data analysis and to meet at your health facilities to share the findings. Another point, the book will be also used by the health care providers at the health facilities.

Right to Refuse or Withdraw

To take part in the research project is voluntary as I have explained it before. You are free to withdraw from the study at any time at any stage without intimidation if you wish to do so.

Who to Contact

Feel free to contact me (Peneyambeko Ipawa Shikulo) at 0812567373

This research has been reviewed and approved by the relevant Ethics Review Committee at the University of Namibia, which is a committee whose task it is to make sure that research participants are protected from harm. The committee reports to the University's Centre for Research Services. If you wish to contact this Centre, please call +264 61 206 4673 or send an e-mail to research@unam.na.

You can ask me any questions about any part of the research study if you wish to. Do you have any questions?

PART II: CERTIFICATE OF CONSENT

I have been invited to participate in research about Development of peer-led strategies for health care workers to facilitate pre-exposure prophylaxis services as an HIV preventive measure to reduce HIV prevalence among adolescent girls and young women in Oshana region, Namibia. I have read the foregoing information, or it has been read to me. I have had the opportunity to ask questions about it and any questions I have been asked, have been answered to my satisfaction. I consent voluntarily to be a participant in this study

……. ……

Name of Participant (print) Signature of Participant

……

Date (day/month/year)

If illiterate

I have witnessed the accurate reading of the consent form to the potential participant, and the individual has had the opportunity to ask questions. I confirm that the individual has given consent freely.

…….

Name of Witness (print)

Thumb print of Participant

……

Signature of Witness

……

Date (day/month/year)

Statement by the Researcher/Person taking Consent

I have accurately read out the information sheet to the potential participant, and to the best of my ability made sure that the participant understands and the following will be done:

1. Obtain informed consent
2. Complete the questionnaire
3. Taking part in individual interview

I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been answered correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

A copy of this ICF has been provided to the participant.

……. ……

Name of Researcher/Person taking Consent (print) Signature

……

Date (day/month/year)

If Assisted by an Interpreter: Statement by Interpreter

I have accurately interpreted the information sheet to the potential participant in ……. (insert name of target language), and to the best of my ability made sure that the participant understands that the following will be done:

1.
2.
3.

I confirm that the participant was given an opportunity to ask questions about the study, and all the questions asked by the participant have been interpreted correctly and to the best of my ability. I confirm that the individual has not been coerced into giving consent, and the consent has been given freely and voluntarily.

I declare that I will not divulge any information that I interpret during this research intervention to a third party outside this study.

……. ……

Name of Interpreter (print) Signature

……

Date (day/month/year)