

## **Consent and information sheet form**

Participant information sheet and consent form, Arba Minch University Post Graduate Studies, Department of Biology, Infectious disease Program

### **I. Information sheet**

#### **Introduction**

I am Nigatu Eligio. I am post-graduate PhD student in Arba Minch University in Biology department “Infectious disease” program. I am doing my research on assessing the impact of house screening and ivermectin cattle treatment on residual malaria transmission using entomological indicators in southwest Ethiopia: A Cluster Randomized Control Trial. I am going to give you information and invite you to participate in this research as house owner to permit your house for center for disease control (CDC) light trap, pyrethrin spray sheet collection (PSC), and Human Landing collection (HLC) mosquito sampling. You are free to decide your agreement to participate or not voluntarily. If you faced something wrong or that are difficult to you to understand, please ask me any time and I will take time to explain.

Regardless of the presence of core malaria controlling tools, the transmission of malaria is continuing and affecting millions of lives globally. Several reasons are raised behind this residual malaria transmission. Malaria mosquito behavioral change, human activities at night time when the malaria mosquitoes become active, and vector resistance to insecticides that used in insecticide treated bed nets and indoor residual spray. This study will be done in malaria endemic villages of Gamo zone, southwest Ethiopia close to the southern Rift ally Lakes, Abaya and Chamo. By doing this research, the community living in this study area will be benefited by the trial of this complementary malaria control interventions screening house and cattle treatment with ivermectin may make some additional reduction of mosquito’s density as well as the reduction of the residual malaria transmission. This is also may be good evidence for policy makers to implement as one of malaria control strategy.

#### **Purpose**

This research is intended to examine and answer, do the screening houses and ivermectin cattle treatment reduce indoor and outdoor mosquito density in southwest Ethiopia?; Do the screening houses and ivermectin cattle treatment affect the blood meal feeding patterns of mosquitoes in southwest Ethiopia?; Do the screening houses and ivermectin cattle treatment reduce the gametocyte positivity rate in freshly fed mosquitoes in southwest Ethiopia?; Do the human night time activities and sleeping patterns contribute for residual malaria transmission?; Does ivermectin cattle treatment post-feeding reduce parasite transmission in malaria mosquitoes?; So you are pleased to participate in this study voluntarily.

#### **Procedure**

If you are house owner and volunteer for participation, your house will be selected randomly for one of CDC light trap, PSC or HLC mosquito sampling and direct human sleeping time observation. So, we will visit once/month for these mosquito sampling methods.

If you are participant as field assistant, you are needed to participate in installing the CDC light trap, HLC and PSC mosquito sampling in respective selected houses, and other entomological activities in your kebele.

## **Voluntary Participation**

Your decision to have your participation in this study is entirely voluntarily. It is your choice whether to participate or not. If you choose not to involve yourself, all your relation with any one in society and the investigator of this study will be normal and nothing will change. You may also choose to change your mind later and stop participating, even if you agreed earlier.

## **Participant selection**

I am inviting you to take part in this research because you are living in this kebele (Delbo, Algie, Mole, Ankober, Fura, Umo Lante, Lante, Chano Mile, Chano Chalba, Shara, Sile, Shelle Mella, Elgo, Shelle, Bicha) selected purposely as a malaria endemic villages in Mirab Abaya and Arba Minch area districts in Gamo zone, and your house is situated near to breeding site of the village so that your cluster is selected for one of the trial in this research and your house is one of these clusters.

## **Duration**

This study is intended to take 2 years data collection in these selected areas. Entomological sample collection will be conducted each month and this means total 24x trapping in 24 months. We need one visiting night in each house for malaria collections per month. During this time, you are requested to allow your house for one of either collection type mentioned above.

## **My responsibility**

Providing necessary information about the research and participants who takes some part of the research and what benefit they can get from this study and also what challenges they may face. Answer the questions made in the mind of the participants and make the research aim clear for all participants.

## **Your responsibility**

You are requested to allow your house for one of either mosquito collection type light trap. As it is discussed before this collection is needs overnight. Study participants who selected as field assistants requested to do all works directed to do form investigator as per their payment.

## **Risk**

By participating in this research, it is obvious that you may face some discomforts. There is a possibility that you may be disturbed in your sleeping time when the CDC light trap lamp producing light to attract mosquitoes; human landing collector may move out/in the house in each hour; early awaking for PSC collection may disturb your early morning sleeping; an interview for human behavior examination may takes your time, and so on. So it is important to inform you all possibilities of discomfort you may face for one day per month in following two years.

## **Benefits**

Participants who selected as field assistant will be paid as per their participation in the research. But the participants as owner of the house will not be paid. There may not be any benefit to the society at this stage of the research, but in future time they will benefit from the appropriate intervention measures applied as recommendation provided in this research.

## **Confidentiality**

The information that we collect from this research project will be kept confidential. Information collected about you will be put away and no-one but the researchers will be able to see it. Any information about you will have a number (code) instead of your name. Only the researchers will know the code. It will not be shared with or given to anyone except investigator.

## **Right to withdraw from the study**

You have the right to withdraw from the study at any time without consequence or penalty.

## **Result publication and dissemination**

The results of the study will be resented shared and shared in coppies to your kebele.

If you have any further questions about the study process and data collection, you can contact the person who owns and conducts the study at the following address.

Mr. Nigatu Eligio

Phone number +251-921223216, Email: [enigatu6@gmail.com](mailto:enigatu6@gmail.com)

In addition, if you have a complaint about the research because of you find the data collection process unethical during the conduct of this research, you can contact:

Dr. Fekadu Massebo

Phone number +251-911733885, Email: [massebofekadu@gmail.com](mailto:massebofekadu@gmail.com)

Manaye Yihune (Ass.Prof)

Phone number +251-911008759

Email: [manaye.yihune@amu.edu.et](mailto:manaye.yihune@amu.edu.et) / [ymenaye@yahoo.com](mailto:ymenaye@yahoo.com)

## **Certificate of Consent**

I understand that this study is designed to gather information for the thesis work on Evaluating the Impact of a Novel Push-Pull Vector Control Strategy on Residual Malaria Transmission Using Entomological Indicators in Southwest Ethiopia: A Cluster Randomized Control Trial. I will be one of the participants in this study.

My participation in this project is voluntarily. I understand that I will not be paid for my participation. I may withdraw and discontinue participation at any time without penalty. If I withdraw myself from the participation, no one on my village will be told.

Participation involves CDC light trap/ HLC/ PSC collection overnight once in my house.

I have read and understand the explanation provided to me. I have had all my questions answered to my satisfaction, and I voluntarily agree to participate in this study.

## **II. Consent form**

### **Consent form for head of households**

1. Is all information given above clear to you? Yes..... No.....
2. We understand all procedures of the study; his/her participation is completely based on willingness. We were also told that he/she will lose nothing for not participating in the study and he/she have full right to discontinue providing information at any time of data collection and all information he/she will provide will be kept confidential. So, are you willing to participate in the study? Yes..... No.....

If yes, your Signature \_\_\_\_\_

### **Consent form for the Data collectors**

1. Is all information given above clear to you? Yes..... No.....
2. I understand all procedures of the study. My participation is completely based on my wish. I was also told that I will lose nothing for not participating in the study and I have full right to discontinue doing data collection at any time and all information will be kept confidential.

So, are you willing to participate in this study? Yes..... No.....

If yes, your Signature \_\_\_\_\_

### **Witnesses**

1.----- Signature -----

2.----- Signature-----

3.----- Signature-----

For any question contact- Nigatu Eligio (principal investigator)

Tel mobile- 09-21-22-32-16 Email- enigatu6@gmail.com

Thank you for your willingness to participate in the study!

## Amharic version of participant information sheet (የመረጃና የሰምምነት መግለጫ)

የድርጅቱ ስም፡-በኢትዮጵያ የኩስርድር የድህንጻች ተናት፡ የባባለው ትምህር ክፍል፡  
ተለሳ በሽታዎች ማስተና ይገኘ ተመራም

**መግለጫ፡-** የበታችን መስከተትና በርቃን እና የወጣ ትንሹ መግለጫ ቁጥጥዎችን በሚሽን ስጋ  
በመረጃና የአይብርመከትና መድሃኒት ለከበታች በመስጠት የወጣ መተላለፍ ላይ ጥን የህል  
ተክስ እንዲለው በሚያሳይ የእንተጣለው አመልካች የሚደረግ አስፈላጊ በሚል ላይ ተናት  
ይደረጋል፡፡ ስለዚህ ሥራ ለእርስዎ መረጃ እየሰጠሁ የእርስዎ በት ለወጣ ትንሹ መሰብሰቦ  
እንዲሳተና ፈቃድቻነትዎን እጠይቃለሁ፡፡ በስራው ወሰጥ ለመሳተፍም ሆነ ለለመሳተና መል  
ፈቃድ ያለውት ለመን በማንኛውም ገዢ የሚፈጻሚዎችን ተያቄ መጠየቅ ይቻላለ፡  
ለተፈጻሚዎች ተያቄ መልስ ለመስጠት ሁሉም ነኝ፡፡ በዘሱ ተናት የበታችን መስከተና  
በር እና ለለው የወጣ ትንሹ መግለጫ ቁጥጥዎችን በሚሽን ስጋ መረጃና የአይብርመከትና መድሃኒት  
ለከበታች በመስጠት በሚገኘው የወጣ ትንሹ መጠንና ወጪ መቀነስ ተጠቃሚ ይሆናል፡፡ ከዚህም  
ባለፈ ከዚህ ተናት በሚገኘው መረጃ ለጋለጫ ቁጥጥ እስተዳደር አካላት በሚተገበው ትግበራ  
ቻልቃሚ ይሆናል፡፡

**ዓለማ፡-** የበታችን መስከተና በር እና ለለው የወጣ ትንሹ መግለጫ ቁጥጥዎችን በሚሽን ስጋ መረጃና  
የአይብርመከትና መድሃኒት ለከበታች በመስጠታችን ከበት ወጪና በት ወሰጥ ያለው የወጣ ትንሹ  
መጠን እንደሚቀን ለማረጋገጥ፡፡ ያለውች የሚታ እንቅስቻለዎች እና የመተናት ሁኔታ ለወጣ  
መተላለፍ አስተዋጽኑ አለው ወይም የለውም የሚለውን ተያቄ ለመማለስ ለው፡፡ ስለዚህም እርስዎ  
በዚህ ተናት ወሰጥ በፈቃድቻነት ተሳታፊ እናይሆኑ ይጠየቃል፡፡

**እውራር፡-** በበታች የወጣ ትንሹ ፍጤና መሰብሰቦ እና ቁጥጥና የሰው የእንቅስቻለፍ ገዢ የሚከታታ  
በሠራተኞች ወጪ እና እናይርጋለን፡፡

**በፈቃድቻነት ተሳታፊ፡-** በዚህ ተናት ወሰጥ የመሳተና ወሰኑም መል በመል በፈቃድቻነት ነው፡፡  
መሳተና ወይም አስመሳተና የእርስዎ መብት ነው፡፡ ለሰውን ከተሳተፈ በማግለጫው ከማንም ጋር  
የለውት ማንኛነት እና የዚህ ተናት በድን ሥንም ነገር እያደርሰበዎችም፡፡ በማንኛውም ገዢ  
መሳተናውን ማቆም ይቻላለ፡፡

**የተሳታፊ ምርመራ:-** የእርስዎ በት· የወጣ በሽታ ካለባቸው እና የወጣ ትንኑ መራብያዎች አጠገባ ካማጋገጥ ቁበለያት· ወሰኑ ስለሆነ በዚህ ትናት· ወሰኑ እንደሳተኞ ተመርጓል::

**ቆይታ፡ ይህ ትናት ለ2 ፍመትት በሁለት ወር እንደ ገዢ መረጃ ለመሳሰሉ የታሰበ ነው::**

**የእኔ ታላፊነት፡-** ስለምርምሩ እና በጥናቱ የተወሰነ ክፍል ወሰኑ ስለሚውሰዱ ታላፊነቶች ለተሳታፊዎች አስፈላጊውን መረጃ መሰጠት እና ከዚህ ትናት ምን ጥቅም ማግኘት እንደማቻች እና እንዲሆዎ ምን ተግዳሚቶች ለይጠጥሟችው እንደምንትል ማሳወቂ እና በተሳታፊዎች የሚነስ ጥያቄዎችን መመለሰና ግልጊ ማድረግ::

**የእርስዎ ታላፊነት፡-** በትምን ለወጣ ትንኑ መሳሰሉበታ ክተማዎን ዘዴዎች ወሰኑ ለእንዲ መፍቃድ::

**ስጋት፡-** በዚህ ትናት ወሰኑ በመሳተኞ እንዲንደ የሚይመቱ ነገሮች ለይጠጥምዎት እንደማቻች ግልጊ ነው:: ትንኑዎችን ለመሳበ የሚጠቀማችው ዘዴዎች እንቅልፍዎን ለረበሽ ይቻላል::

**ጥቅምዎች፡-** ይህ ትናት የወጣ ትንኑን ለቀንስ ይቻላል፤ እንዲሆዎ በከበቶች ለይ ለከሰቱ የሚቻች የውጭና የውሰኑ ጥገና ትለት ስርጾትን ለቀንስ ይሰጠል:: ከዚህ ትናት በማጋገጥ ወጪት መሠረት ካማተገበሩ ተጠሪ ወሰኑዎች ተጠቃሚ ይሆናል::

**ማስተዳደሪያዎች፡-** ከዚህ የምርምር ጥጋቸኩት የምንስበሰበው መረጃ በሚስጥር ይጠበቃል:: ሰላ እርስዎ የተሰበበበ መረጃ ይቀመጣል እና ክተማራማጭዎች በስተቀር ማንም ለያዥ እያችልም:: ሰላ እርስዎ ያለ ማንኛውም መረጃ ካእርስዎ ሲም ይለቀ መለያ ቁጥር (code) ይኋረዋል::

**የውጭ ሁኔታ እና ስርጾት፡-** በጥናቱ የተገኘውን ወጪት እንዲቋር ይደረጋል::

**በጥናቱ ሂደትና መረጃ አስቀሰበ ለይ ተጨማሪ ጥያቄ ካለ ትናቱን በባለቤትነት የሚያከናወነውን ለው በማቀጥለው እናራሽ ማግኘት ይቻላል::**

**ስም : የገብር አልጋ**

**ስልክ: +251-921223216, አ.ማድ: enigatu6@gmail.com**

በተጨማሪ በጥናቱ ለይ ቅሬታ ካለምት::-ይህ ጥናት በማከናወንበት ገዢ መረጃ አሰጣጥ ማረጋገጫ  
ከስነ ሽማገኘ ወጪ ሆኖ ካገኘት.

ዶ/ር እ.ቁዳ. መስቀል:

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በጥናቱ ለመሳተኞ ቅቁደኛ ነውት:: እወ ----- አይደለሁም -----

## የፍቃድ የምስክር ወረቀት

አርባምንጭ የነጋሪርአ.ቁ. ተ&ጥር ማይንስ ከልደ፡ የጥኑችና ተርጉራው ተናትና የመግኘር ከፍል

የተመራመማሪ ስም፡ ጂታ አልጭ

የቦታሰብ ሌሎ መለያ/ ቁጥር/ \_\_\_\_\_

የግለሰብ መለያ \_\_\_\_\_

የተከታታለው ስም \_\_\_\_\_ እድሜ \_\_\_\_\_ ዓ.ም. \_\_\_\_\_

ይህ ተናት “የኢትዮጵያ አመልካችንን በመጠቀም የቦታችን መስከታታና በርቃን እንደሆም የወጣ ትንኑ መግበያ ቁጥጥሮችን በማሽን ስቦ መጋልጋና የአይነት መክሳት ለከበታ በመስጠት የሚያደርጋለውን ተዕኑም የሚገምገም የጥናት ሥራ መረጃን ለመስጠት የተዘጋጀ መሆኑን ስለተረዳሁ በዚህ ተናት ወሰጥ ከተከታታለውን እንዲ እሆናለሁ፡፡ በዚህ ተሮችና ወሰጥ የእኔ ተሳትሬ በፈቃድና ነው፡፡ ለተሳትሬ ከፍያ እንደማይከፈልኝ ተረድችለሁ፡፡ በማንኛውም ገዢ የለ ተዕኑም ተሳትሬውን ማቆረጥ እንደማችል ተረድችለሁ፡፡ የወጣ ትንኑ በዚህ ወሰጥ ከሆነው እንደ ገዢ እንደማሳሰለበት ማጠራራያውን ተረድችለሁ፡፡ ለጥያቄዎች ሁሉ እርካታ አግኝችለሁ፡፡ እናም በዚህ ተናት ለመስተና በፈቃድ ተስማምችለሁ፡፡

ከእኔ የተከተለው መረጃ ሁሉ ለእርከም ግልጋ ነው? እወ ..... እይደለም.....

ስለዚህ፡ በጥናቱ ለመስተና ሌፈቃድና ነው? እወ ..... እይደለም.....

እወ ከሆነ፡ የእርከም ፈርማ

ምስክር ስም፡ 1. ----- ፈርማ-----

2.----- ፈርማ-----

3.----- ፈርማ-----