INFORMED CONSENT FORM
In-Depth Interviews with Project Staff

Title: Strengthening FP/RH services for women living in humanitarian settings in Borno and Cross River States, Nigeria

Funder: USAID

Site(s): Multiple sites in Borno State where the IHANN project is active and in Cross River State where the UNHCR SS-HNIR project is active

Introduction
Hello. My name is _____, and I work for the firm AHEAD, which is a partner of FHI 360 and EVIHDAF.

Information about the study
We are interested in learning about how family planning and reproductive health programs in humanitarian settings are being modified in response to COVID-19. The information we gather will be used to inform these programs in the future.

We are asking staff from two different family planning and reproductive health programs in Nigeria to join our study and participate in a phone interview. I would like to speak with you as a member of the _____ project staff. The interview would include questions relating to how COVID-19 has impacted your program activities and your ideas for improvement. If you decide to participate in this interview, the interview can start right after you consent to participate, or we can schedule it at a day/time that is more convenient for you. The phone interview will take about 30 minutes.

Confidentiality
With your permission we will audio record the phone interview and take notes. If you do not wish to be recorded then you cannot participate in this interview. Your identity will be kept confidential and we will not associate your name with what you say. Any information we collect which clearly identifies you (for example, your phone number) will be kept confidential to the best of our ability. This information will only be shared with those working on this study. Other information you provide that does not directly identify you will be shared with others. We may include direct quotations from you in our report, but we will not identify who said the information or include any information that could identify you.

Possible risks
There is a risk that someone might learn that you participated in this study, or the responses you gave, but we will take steps to ensure confidentiality by storing audio recordings, transcripts, and data safely on secured computers. We will destroy the audio recordings after we have analyzed them. The information you provide will not be shared with your supervisor or impact your employment, and the name of your facility will be removed before any data are shared publicly to further protect you and your privacy.

Possible benefits
Although you will not directly benefit from participating in the phone interview, the information you provide us may help us to improve family planning and reproductive health programs in humanitarian settings in the future.

Voluntary participation

You are free to decide if you want to participate in this study. You do not have to answer any questions you do not want to answer. You can stop the interview at any time. If you agree to participate and then you change your mind, you may end your participation without any penalty at any time. If you refuse to participate, it will not affect your employment.

If you have a question about the study
If you have any questions about this study later, you can call [contact removed]

Your rights as a participant
This research has been reviewed and approved by the Protection of Human Subjects Committee of FHI 360 and the Nigerian State Level Ethical Review Boards in Borno and Cross River states. If you have any questions about how you are being treated by the study or your rights as a participant you may contact the Department of Clinical Governance, Servicom and eHealth, Ministry of Health, Headquarters, Old Secretariat, Calabar, Cross River State [contact removed].

Do you have any questions?

Have all of your questions been answered? YES ☐ NO ☐

STATEMENT OF CONSENT

PARTICIPANT AGREEMENT

I certify that the nature and purpose, the potential benefits, and possible risks associated with participating in this study have been explained to me. I have been given an opportunity to have any questions about the study answered to my satisfaction. I agree to participate as a volunteer in this study and understand that I have the right to withdraw from the study at any time.

Do you consent to participate in the phone interview? YES ☐ NO ☐

Do you agree to be audio recorded? YES ☐ NO ☐

INTERVIEWER AGREEMENT

I certify that the nature and purpose, the potential benefits, and possible risks associated with participating in this research have been explained to the above individual, and that the respondent consented to participant AND be audio-recorded.

_____ _____

Signature of Person Who Obtained Consent Date