**INFORMATION SHEET**

For females aged 18 and above / For females aged below 18 unaccompanied by a guardian or parent

("emancipated minors")

**Study title**

Improving adolescent access to contraception and abortion-related care in [COUNTRY]: Health system pathways.

**Introduction**

Hello. Our names are [NAMES]. We are part of a team from the London School of Economics and Ipas-[COUNTRY]. We are conducting a study whose main objective is to improve the implementation of sexual and reproductive health services for adolescents in [COUNTRY]. We are asking you to take part in the study because your experience and thoughts are very important to help us achieve the study objective. You were selected for this study because you received treatment here today at [NAME OF FACILITY].

**What are we asking of you?**

Should you agree to participate, we are going to have an interview with you, and ask you questions about your experiences. All the information that you provide will remain anonymous, which means that no-one will be able to know who you are. This interview will take about one hour of your time. Your views are important to us and we would like to record the interview so that we can remember the conversation.

**What are the potential benefits of participating?**

The intention of this study is to contribute towards understanding the health of females in [COUNTRY]. By participating in this interview, you will be providing information that will be useful in designing more effective policies and programmes for female health in [COUNTRY].

**What are the potential risks for participating?**

The questions of the interview concern your sexual and reproductive behaviour, and these can be sensitive and embarrassing. However, we have a team that is well trained in handling interviews of such a sensitive nature. If you need emergency attention, we shall refer you to the hospital staff to assist. The risk to you of participating in this study is therefore very minimal.

**What happens if I don’t want to participate?**

Participation is voluntary and there are no consequences for refusing to participate. Before making a decision about participation, please feel free to ask any questions about what we have just said. If you agree to participate, we will ask you to thumbprint or sign this form to show that the study has been explained to you and that you agree to be part of it. You may decide to end your participation in the interview at any time if you don’t feel comfortable about continuing.

**Compensation for participation**

You will receive [CURRENCY, AMOUNT] as a thank you for your time participating in this interview.

**Apart from the [COUNTRY ETHICS NAME], who else has approved the study?**

The study protocol was reviewed and approved by the London School of Economics (LSE) institutional Review Board (IRB). The contact details of the IRB are as follows: LSE, Houghton Street, London, WC2A 2AE, UK (rescon@lse.ac.uk)

**What happens if I want to know more?**

If you wish to have further information or if you have questions you wish to ask after the interview, please contact the principal investigator, whose details are provided below:

Name: Ernestina Coast, PhD (Email: [e.coast@lse.ac.uk](mailto:e.coast@lse.ac.uk) )

Telephone: #### (United Kingdom)

For ease of contact by phone in [COUNTRY], you can reach the principal investigator through [NAME] on this telephone number: ####

**What happens if I have questions regarding ethical procedures?**

If you have any questions about the ethical clearance of the study, or any questions regarding your rights in participating in the study, or you have any complaints about the way the study was implemented, you can contact the [CONTACT DETAILS FOR NATIONAL RESEARCH ETHICS REVIEW]

**INFORMED CONSENT FORM: For females aged 18 and above / For females aged below 18 unaccompanied by a guardian or parent ("emancipated minors")**

SID: | | | | | | | |

**Instruction to Interviewer: Ask respondent the following:**

‘Are you willing to participate in a recorded interview to discuss the issues that I’ve just mentioned? Please remember that you do not have to participate if you do not want to.’

**Instruction to Interviewer: Ask respondent the following:**

‘Do we have your permission to examine at your medical records and to ask medical professionals about your care here?’ Please remember that you do not have to participate if you do not want to.’

**Instruction to Interviewer: Ask respondent the following:**

‘Do we have your permission to include your information, without your name, in our research findings, which will be shared and published?’

Interviewer’s Declaration

I,………………………………………………………

Date ………………………………………

hereby declare that I have explained clearly to the participant the aims and objectives of

this study. I have received the participant’s consent to participate according to the components agreed.

Respondent’s Declaration

|  |  |  |
| --- | --- | --- |
|  | YES | NO |
| I have been given an opportunity to ask any questions I may have, and all such questions or inquiries have been answered to my satisfaction. I have been informed orally and in writing of whom to contact in case I have questions. |  |  |
| I give my consent to participate in this study |  |  |
| I agree to participate in a recorded interview |  |  |
| I give permission for my medical notes to be examined and my case to be discussed With medical practitioners |  |  |
| I give permission to include my information, without my name, in your research findings, which will be shared and published |  |  |

Respondent’s Thumbprint or signature

Date: ---------------------------------------------

*Note: Signed copies of this form must be retained on file by the PI*