PARTPICPANT INFORMATION

Study Title: Implementer's Voices: An input to the Lancet Commission on Evidence-based Implementation in Global Health

Principal Investigator:
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Qualitative Investigator:
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Thank you for your interest in participating in this in-depth interview. If you would like a discussion regarding any questions you have after reading this participant information, please email dknnkwesiga@gmail.com.

Background and rationale for the study:
Despite numerous life-saving innovations, there are major gaps and inequities in implementation, particularly in low-income and middle-income countries (LMICs). There is an increasing chasm between what is known and what is done. The Lancet Commission on Evidence-Based Implementation in Global Health has been established to accelerate this progress, especially in LMICs.

A description of sponsors:
This study on implementer's voices is being conducted as part of the work of The Lancet Commission on Evidence-Based Implementation in Global Health. This work is funded by the Children's Investment Fund Foundation (CIFF).

Purpose:
This study aims to understand how and why implementers in the health sector use evidence or information or not, and what the gaps between evidence and implementation are and how these can be closed.

Procedures:
The study will involve an in-depth interview with the 1-2 researchers to talk about the role of information in your work, learning about your insights and actual experiences with using information – how easy or difficult this is; discussing the challenges you face in using information for implementing interventions to improve health and getting your suggestions on how to make it easier to use information in your work. This discussion shall be held online (using the Zoom platform). We are interested to learn from your honest opinions.
This discussion will not last more than one hour.

Who will participate in the study:
You have been asked to participate in this study because you work in the health sector and will have good information to share, plus suggestions on how to improve the use of information in making decisions to improve health. All participants are from low- and middle-income countries.

Risks/Discomforts:
While we anticipate there is a low risk of physical and mental challenges during this discussion, we will ask about potentially sensitive issues raised in the survey. We recognise the risk that some participants may be identifiable by virtue of their singular position and will carefully assess the presentation of these data (including use of aggregation) to maintain anonymity where necessary.

Benefits:
There may not be any immediately personal benefits to taking part in this study. However, by answering our questions, you will inform understanding of how evidence can be used by implementers in low- and middle-income countries to improve health.

Confidentiality:
This will be an audio-recorded discussion with yourself and the study moderator(s). The audio recording will be transcribed (and translated into English if necessary). Your name will not be written on the transcript or in our report. We will combine information from the participants, without including names or personal information.

Any information with names will only be accessible to the research team. The local Research Ethics Committees (REC) and Uganda National Council for Science and Technology (UNCST) may have access to information that identifies the research participants to undertake ethics checks.

Anonymous or abstracted information and data will be archived and made available to other researchers within and outside the country. The study results will be published so that other public health professionals can learn from them (e.g. in medical journals, study reports, or blog). Your personal information will not be included in any associated data sets, reports or publications.

Costs and compensation:
You do not have to pay any money to participate. You shall have to acquire internet access for one hour though, which may come at a cost. There is no compensation/ reimbursement for participating in this study.

Questions about the study:
If you have any study related questions please call the lead investigator, Prof Joy E Lawn (Joy.Lawn@lshtm.ac.uk) or the lead qualitative investigator, Dr. Doris Kwesiga (dknnkwesiga@gmail.com)

If you have questions about your rights as a research participant, you can contact the Chair of the Research and Ethics Committee (Dr: Joseph Kaggayi jkagaayi@musph.ac.ug, 256-773-785-333/ 256-312-291-397,)

Statement of voluntariness:
Your participation is completely voluntary. If you agree to participate, you will be free to change your mind at any point during the interview. You can also refuse to answer certain questions if you don't feel comfortable doing so. Data will be fully anonymised, so it will not be possible for researchers to redact or remove your data after the interview as it will not be linked to you.

Ethical approval:

This study has been approved by an accredited Ugandan based REC from Makerere School of Public Health and the London School of Hygiene and Tropical Medicine Research Ethics Committee (TBC), in addition to Uganda National Council for Science and Technology (UNCST) (TBC).

STATEMENT OF CONSENT/ASSENT

I have read the participant information regarding what is going to be done, the risks, the benefits involved and my rights regarding this study in a language I understand.

- I have had the opportunity to consider the information, ask questions and have these answered satisfactorily.
- In the use of this information, my identity will be concealed.
- I am aware that my participation is voluntary, and I may withdraw from interview at any time without giving a reason. I understand that data from me may be shared (via a public data repository or by sharing directly with other researchers), but I will not be identifiable from this information.
- I understand that by providing my verbal consent in accordance with this form, I do not waive any of my legal rights but merely indicate that I have been informed about the research study in which I am voluntarily agreeing to participate.
- A copy of this form will be retained by me.

Name of participant ……

Date ……

Name of interviewer/Person checking informed consent form has been received ……..

Date ……..