



## **SOCIAL, ECONOMIC AND BEHAVIOURAL DRIVERS OF ANTIBIOTIC USE IN-DEPTH INTERVIEW/OBSERVATION WITH PROVIDERS**

### **STUDY & CONSENT INFORMATION**

#### **Introduction and study overview**

My name is ..... and I'm from a Kolkata-based organisation called Liver Foundation. We have come to your clinic on a previous occasion also and interviewed you about your practice and about the antibiotics and other medicines that you use in your daily practice. Liver Foundation is helping the state government of West Bengal implement a training programme with rural healthcare providers (RHPs) all over the state. In this connection, we are conducting an academic research with the London School of Hygiene and Tropical Medicine, UK, which is one of the topmost universities in the world in the field of Public Health. This research is to understand in-depth and document what types of antibiotics and other medicines are used by village providers in managing their rural patients and the main reasons for the use of these antibiotics and medicines. Our research regulations require that we give you some essential information before we begin, and then formally ask if you agree to participate.

#### **Future benefits of the study findings**

The focus of this study is on antibiotics because these are essential medicines that can save lives. However, their over-use also leads to the disease causing bacteria becoming resistant to the antibiotics. We are trying to find out what are the disease patterns here and what are the antibiotics used for those, whether any resistance is being perceived to any antibiotics, and what can be done to rationalise the use of antibiotics among rural communities and providers. This will help us to help the government and providers like you understand the situation and to modify use of medicines, particularly antibiotics. The findings can be used in the government's training programme for rural healthcare providers. This in turn will be of great value to the health of the millions of people who rely on providers like you. Therefore, your responses and contributions will be highly valuable.

#### **Study processes**

As we have explained before also, this study is taking place in 2 districts of West Bengal – South 24 Parganas and Birbhum. We first visited 100 selected provider clinics and interviewed them. Now we are meeting 15 RHPs in each district to have in-depth discussions with them. We would like to know more about your services and about your experience with various antibiotics. If you agree we would like to spend one day (or half a day, depending on our pilot experience) in your clinic making observations as you interact with your patients and also asking you questions in between whenever you are free.

#### **Seeking consent from patients**

Whenever a patient comes to seek treatment, we would like you to seek their consent for us to continue with our observation. You can make the following statement: *'This person (name...) is doing research on rural healthcare providers in West Bengal. They would like to observe how the providers interact with their patients, what sort of symptoms patients come with and what treatment and antibiotics they receive. The findings will be used in a training programme for RHPs so that the quality of their treatment can become even better and also so that the government and health department people become more aware of the problems that rural communities suffer from. They will keep the information fully confidential and only use it for analysis and reports. Your name will not be linked with any data. If you decide not to take part, there will be no negative consequences for you. You can ask them to stop the observation at any time. There may be no direct benefits to you for participating in this study. However, the collective findings of this study will be of widespread interest to Government and Non-Government stakeholders with an interest in engaging with rural healthcare providers to improve health for the rural population.'*

If any patient would like to know more, please let us know and one of us will explain more in detail to him/her. In case any patient objects to us sitting and observing, we will leave the room and not observe that patient.

## **Data use and confidentiality**

We will take notes during our interview with you, and if you agree we will also digitally make an audio recording of the interview to ensure that we capture all your responses accurately. If you agree, we may use some quotes from your interview anonymously in our report.

In addition, if you agree, we may take some photos at your practice. These photos may be used in presentations and reports about our work.

Participation in this survey is voluntary. If you decide not to take part, there will be no negative consequences for you. You can stop participating at any time. Feel free to interrupt the interview to attend to your patients if you need to. You are also free to stop us from making any specific observation.

All information gathered will be treated as confidential. We will not use your name or the facility's name in any of our reports. Data from the in-depth interviews will be anonymised for archiving. The identifier information will be separated from the detailed transcripts and notes before the data is stored on the LSHTM server. The identifier information will be stored on a separate log sheet. The analysis of the quantitative and qualitative data will be done without reference to personal particulars, such as names and street addresses. Care will be taken to avoid any individual identification by presenting results for reasonably large groups only. Interview transcripts/notes and translations, will be securely transferred and held at LSHTM on the Compact database. Study photographs will be redacted if needed and also stored on the LSHTM database, as will any records and documents that constitute data collected. If there are any requests for data sharing for the qualitative data, they will be reviewed on a case basis and data sharing will depend on the reasonable discretion of the study PIs. The data will be stored for 10 years on the LSHTM server as per the LSHTM data storage guidelines, and after that the study team will decide whether to delete or continue with the data storage and for how long.

There may be no direct benefits to you for participating in this study. However, the collective findings of this study will be of widespread interest to Government and Non-Government stakeholders with an interest in engaging with rural healthcare providers to improve health for the rural population.

## **Sharing the findings**

We may come back to you towards the end of this year to share our findings with you and ask your feedback on what interventions can be tried so that providers and communities use antibiotics more responsibly. Please give us your contact number.

## **Questions and study contact people**

If you have any questions, you can ask them at any time.

If you wish to ask questions later, you may contact any of the following members of the study team:

**PERSON 1 Dr. Dipesh Das, Liver Foundation, telephone number :**

**PERSON 2 Dr. Abhijit Chowdhury, telephone number: +91-9433045435**

**Do you have any questions for us at this stage?**

## CONSENT FORM

**Please tick all boxes that apply:**

I have read the study information sheet and/or have been given a clear overview of the study	
I am happy for you to write about what I have said during our interview on the understanding that you will not reveal my identify in any study outputs	
I am happy for the interview to be sound recorded on the understanding that you will not reveal my identify in any study outputs	
I am happy for you to include quotations from this interview on the understanding that you will not reveal my identify in any study outputs	
I am willing to be interviewed	

**Interviewee (name in BLOCK CAPITALS)**

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Signature

Date

**Researcher (name in BLOCK CAPITALS)**

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Signature

Date