



**African Population and
Health Research Center**

Transforming lives in Africa through research.

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CONSENTING FOR REMOTE INTERVIEWS

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INTRODUCTION

CONSENTING FOR REMOTE INTERVIEWS

The COVID19 pandemic has presented multiple challenges for research institutions as efforts to contain its spread has restricted movements and interactions that most people were accustomed to in their daily lives. The process of conducting research has been severely affected following the directives issued by the Government in various countries, and organizations have been forced to identify mitigation measures, such as remote data collection and training as a means to ensure that their work continues. As in-person data collection becomes increasingly restricted, it is imperative that projects begin to shift to remote data collection methods whenever possible. This entails finding new ways of obtaining and recording consent. We have developed guidelines for remote data collection and this document complementary to maintain ethical practices in the process

This document provides information that will guide researchers through the process of obtaining informed consent for remote interviews.

DEFINITION

Informed consent is an ethical obligation for research projects. Within this guidance, remote consenting is defined as the consent process for potential or enrolled research participants that takes place by means other than face-to-face engagement and without the physical presence of the study staff.

It is also important to bear in mind that informed consent is not a matter of appending a signature or saying “YES”. The same principles for obtaining informed consent during face to face interviews must be upheld. This implies that participants can revoke it in the process of data collection for whatever reason.

Acceptable methods for confirming consent include use of electronic signatures, faxing the signed consent forms, online consenting, tele-consent, oral consenting if the consent is obtained through audio/video communication through different applications such as Zoom, Skype, WhatsApp, telephone etc. The multiple processes are highlighted below.

PROCESS

1. APPLYING PROCEDURAL SAFEGUARDS BEFOREHAND:

Concise consenting documents must be prepared prior to the interviews for each participant. The standardized documents must contain information about the project, the stipulated procedures, risks and benefits, confidentiality, voluntary participation, as well as the address and contact information of the project principal investigator. Participants must be made to explicitly know when the consenting process starts.

2. AFFIRMATION OF CONSENT:

a. Online:

If the study is online or short text, it may be more challenging to obtain written consent, as this is traditionally done by having the participant physically sign a consent form. However, a provision for the participant to use a 'check box' style consent statement can be used to affirm that the participant fully understands the objectives, risks, and benefits of the study, and has voluntarily agreed to participate.

b. Oral consent through audio/ video:

The participant needs to be informed that the affirmation of consent will be recorded. This is irrespective of whether the entire interview is to be recorded or not. The proposed affirmation statement to be read by the interviewer and responded to by the interviewee is as below:

"Mr/Ms xxxx, do you confirm that you are the rightful owner of this phone line or you have permission to use it and that you are an adult of at least 18 years of age?"

Do you also confirm that the study objectives and procedures have been explained to you, that you understand the risks and benefits, and you have voluntarily agreed to participate in the study?"

For focus group discussions, participants should take turns, saying their name followed by one of them repeating the rest of the statement on their behalf. This should be followed by a similarly recorded confirmation by the interviewer as summarized in the text below:

"I confirm that the study objectives and procedures have been explained to the participant-study ID xxx, and I am sure/confident that he/she understands the risks and benefits, and that participation is voluntary with no consequences if one chose not to participate".

c. Consent for minors:

The affirmation process above needs to be done for both the parent/guardian who is responding on behalf of the minor. However, it is important to note that it is the minor participating in the study, and not the parent/ guardian.

For the minor, the statement is as follows:

"Mr/Ms xxxx, do you confirm that Mr. /Ms xxxx is your parent (or guardian) and that he/she is an adult of at least 18 years of age and that the study objectives and procedures have been explained to both of you, that you understand the risks and benefits, and you have voluntarily agreed to participate in the study?"



d. **Additional consent:**

Some studies involve several procedures in addition to interviews. For example participants may be required to give blood for testing for HIV, kidney function, blood sugar levels or provide blood samples for future studies. For such studies participants will be required to consent separately for each component of the study.

For instance, a participant may consent to having an interview being conducted, blood pressures measures taken, ultrasound scan or testing for the HIV serostatus, testing for kidney function, genetic testing separately.

Broad consent will be sought from the participants whose data may be needed for answering specific research questions in the current project as well as any additional future research questions that will contribute to new knowledge.

3. MAINTAINING CONFIDENTIALITY:

It is a researchers' duty to ensure that their participants' confidentiality is maintained. This means ensuring that during the interaction they will not be overheard (if using audio only) or seen (if using video or instant messaging).



4. RECORDING AND STORING DATA:

For online or short text interviews, the consent affirmation should come as a data element within the synchronized data received at our servers. This data item needs to be removed from the analysis data file and kept confidentially in a file with all the other identifying information of each participant. It should be under 'lock and key'. For audio/video interviews, the recording of affirmation by the participant and confirmation by the field interviewer, need to be stored in a secure server and deleted from all devices used for recording the interview. All consent information needs to be kept for a period of at least five (5) years. The Project Manager and Principal Investigator are responsible for ensuring this happens.

5. WAIVING DOCUMENTATION OF INFORMED CONSENT:

In the strict sense of documentation, the proposed procedures above are necessary but not sufficient to certain studies, especially for research where the procedures carry substantial risks to the participants. In such cases, necessary amendments will need to be discussed on a case by case basis where plans for obtaining physical signatures can be discussed and arranged. Proposals to be submitted to ERC should consider adding a statement asking for waiver of consent documentation (physical signing on paper or screen using stylus, or scanned copies).



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