Supplementary Material 5: Consents

## 5.1 Routine Household Telephonic Contact

*Greetings, introduce yourself and the Organisation and state that the calls are being recorded for quality assurance purposes. Thereafter ask the respondent if it is the right time to speak, after the consent has been given also use the Identifiers to confirm if you are speaking with the right person. Explain that we got the consent to contact them from the Physical Data Collection team (fieldworker/s and/tracker/s) when they visited them the previous physical visit.*

We would like to ask you about your household members, residing in your house or elsewhere, and their relationship to the head of the household, as well as any births, deaths or migrations. In addition to these questions we would like to ask you about the impact of COVID-19 on your household or whether any member of your household has encountered someone suffering from COVID-19 or has symptoms of the disease.

The questions will enable us to identify members of your household that should come to a testing point close to your home to be tested for COVID-19. The questions will also enable us to measure the impact of the epidemic on the livelihood of the local community.

All the information collected is kept private and confidential on a secure computer, and only shared with team members linked to AHRI. After we remove any personally identifiable information, we may share the data with other scientists for analysis.

*[Note: at this stage, ask the participant if they understood what you just said. Then ask them if they have any questions.]*

Your taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you have any later questions about the study or wish to withdraw from the study, you can SMS for free to **37001** or call us for free on 0800 203 695.

In agreeing to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part

Do you agree to be part of the study?

## 5.2 Intensive Household Telephonic Contact

*Greetings, introduce yourself and the Organisation and state that the calls are being recorded for quality assurance purposes. Thereafter ask the respondent if it is the right time to speak, after the consent has been given also use the Identifiers to confirm if you are speaking with the right person. Explain that we got the consent to contact them from the Physical Data Collection team (fieldworker/s and/tracker/s) when they visited them the previous physical visit.*

We would like to invite you to take part in a research study, conducted by the Africa Health Research institute, AHRI (formerly the Africa Centre) at Somkhele site; the study is about the COVID-19 epidemic and will help us to assist with the Government response to the epidemic. As you know this epidemic is developing very quickly and we would like to call you every two weeks to ask a few questions.

We would like to ask you about the impact of COVID-19 on your household or whether any member of your household has encountered someone suffering from COVID-19 or has symptoms of the disease. The questions will enable us to identify members of your household that should come to a testing point close to your home to be tested for COVID-19. The questions will also enable us to measure the impact of the epidemic on the livelihood of the local community.

All the information collected is kept private and confidential on a secure computer, and only shared with team members linked to AHRI.

After we remove any personally identifiable information, we may share the data with other scientists for analysis.

We would also like to express our gratitude to you for participating in this survey by offering you an airtime voucher of R10 after answering the questionnaire at each call.

*[Note: at this stage, ask the participant if they understood what you just said. Then ask them if they have any questions.]*

Your taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you have any later questions about the study or wish to withdraw from the study, you can SMS for free to **37001** or call us for free on 0800 203 695.

In agreeing to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part.

Do you agree to 1/ be part of the study and 2/ being called every two weeks to ask you some questions about COVID-19 and its impact on your household?

## 5.3 Intensive Household Social Sub-survey Telephonic Contact

*Greetings, introduce yourself and the Organisation and state that the calls are being recorded for quality assurance purposes. Thereafter ask the respondent if it is the right time to speak, after the consent has been given also use the Identifiers to confirm if you are speaking with the right person. Explain that we got the consent to contact them from the Physical Data Collection team (fieldworker/s and/tracker/s) when they visited them the previous physical visit.*

We would like to invite you to take part in a research study, conducted by the Africa Health Research institute, AHRI (formerly the Africa Centre) at Somkhele site; the study is about the COVID-19 epidemic and will help us to assist with the Government response to the epidemic. As you know this epidemic is developing very quickly and we would like to call you every two weeks to ask a few questions.

We would like to ask you about the impact of COVID-19 on you personally, and how you are interacting with members of your household, family and others. The questions will enable us to measure the impact of the epidemic on the livelihood of the local community.

All the information collected is kept private and confidential on a secure computer, and only shared with team members linked to AHRI. After we remove any personally identifiable information, we may share the data with other scientists for analysis.

We would also like to express our gratitude to you for participating in this survey by offering you an airtime voucher of R10 after answering the questionnaire at each call.

*[Note: at this stage, ask the participant if they understood what you just said. Then ask them if they have any questions.]*

Your taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you have any later questions about the study or wish to withdraw from the study, you can SMS for free to **37001** or call us for free on **0800 203 695**.

In agreeing to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part.

Do you agree to 1/ be part of the study and 2/ being called every two weeks to ask you some questions about COVID-19 and its impact on your household?

## 5.4 Parent/guardian/caregiver consent for minor

*Greetings, introduce yourself and the Organisation and state that the calls are being recorded for quality assurance purposes. Thereafter ask the parent/guardian/caregiver if it is the right time to speak, after the consent has been given also use the Identifiers to confirm if you are speaking with the right person. Explain that we got the consent to contact them from the Physical Data Collection team (fieldworker/s and/tracker/s) when they visited them the previous physical visit.*

We would like to invite your child/ward to take part in a research study, conducted by the Africa Health Research institute, AHRI (formerly the Africa Centre) at Somkhele site; the study is about the COVID-19 epidemic and will help us to assist with the Government response to the epidemic. As you know this epidemic is developing very quickly and we would like to call you every two weeks to ask a few questions.

We would like to ask them about the impact of COVID-19 on them personally, and how they are interacting with members of your household, family and others. The questions will enable us to measure the impact of the epidemic on the livelihood of the local community.

All the information collected is kept private and confidential on a secure computer, and only shared with team members linked to AHRI. After we remove any personally identifiable information, we may share the data with other scientists for analysis.

We would also like to express our gratitude to you for participating in this survey by offering you an airtime voucher of R10 after answering the questionnaire at each call.

*[Note: at this stage, ask the parent/guardian/caregiver if they understood what you just said. Then ask them if they have any questions.]*

Your taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you have any later questions about the study or wish to withdraw from the study, you can SMS for free to **37001** or call us for free on **0800 203 695**.

In agreeing to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part.

Do you agree to your child/ward 1/ being part of the study and 2/ being called every two weeks to ask them some questions about COVID-19 and its impact on your household?

## 5.5 COVID-19 screening and testing at the testing point

*Introduce yourself and the Organisation. Explain that AHRI is supporting the health services for screening people for Coronavirus, and that we will strictly follow the guidelines. Then explain how the process will work, with the following*:

1. First, I will proceed by asking you questions to assess whether you have symptoms and risk factors for Coronavirus infection, such as exposures to someone infected or recent travel to places where Coronavirus has been detected
2. If you do meet criteria as a potential Coronavirus suspect, a nurse will do a clinical assessment for Coronavirus symptoms (cough, heart rate), take vital signs measurements, and ask questions about your medical history.
3. The nurse will then assess whether you are eligible for testing or not. If eligible, a sample will be taken for Coronavirus testing; this is not painful, but you may experience a bit of discomfort. The sample will be sent to a laboratory in Durban for testing and storage. If a point of care test becomes available during this project, we might also use such a test to help diagnose Coronavirus more quickly.
4. Will contact you by SMS or phone call to give you your results back.
5. Before you leave the clinic, you will be given a flyer with good hygiene advices to follow at home, and how-to self-isolate at home if you are suspected to be a Coronavirus case.
6. If the nursing assessment finds that you are in urgent need of health care and you cannot get to health services on your own, AHRI will arrange transport via its private ambulance provider to the local district hospital, Hlabisa. If you are unwell, but not in urgent need of health care or wish to access health care on your own, AHRI will provide you with a referral to the local health service, but will not be responsible for any cost associated with the referral. Once you have been referred to the local health services or hospital, AHRI will not be responsible for any costs or procedures incurred after the referral.
7. We would also like to ask permission to use the data, specimens and test results for further AHRI studies about Coronavirus.

All the information collected is kept private and confidential on a secure computer at AHRI, and only shared with team members linked to AHRI. After we remove any personally identifiable information, we may share the data with other scientists for analysis.

*[Note for the CRA: at this stage, ask the participant if they understood what you just said. Then ask them if they have any questions.]*

This study has been approved by the Biomedical Research Ethics Committee (BREC) of the University of KwaZulu-Natal (REFERENCE NUMBER BE290/16). BREC contact details are on the flyer that we will give you. The Ethics Committee may look at the information from the study to check that procedures are being correctly and safely followed but they will not see your name.

Your taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you ever have questions about this study, or in case you are harmed as a result of participation in the study, you should contact Dr Kobus Herbst (Principal Investigator) or Miss Thobeka N. Mngomezulu (Population Intervention Programme (PIP) Study Coordinator) at the Africa Health Research Institute (AHRI) (035 550 7500) or Ms Nomathamsanqa Majozi the Head: Public Engagement (0800 203 695) toll free at any time. You will find these details on the flyer as well.

In agreeing to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part.

Do you agree to be part of the study?

## 5.6 Parental consent for minor COVID-19 screening and testing at the testing point

*Introduce yourself and the Organisation. Explain that AHRI is supporting the health services for screening people for Coronavirus, and that we will strictly follow the guidelines. Then explain how the process will work, with the following*:

1. First, I will proceed by asking you or your child/ward few more questions to assess whether they have symptoms and risk factors for Coronavirus infection.
2. If your child/ward meets the criteria, a nurse will do a clinical assessment for Coronavirus symptoms (cough, heart rate), take vital signs measurements, and ask questions about medical history.
3. If eligible, the nurse will be taking a swab sample in the nose and in the throat for Coronavirus testing; this is not painful but your child/ward may experience a bit of discomfort. The sample will be sent to a laboratory in Durban for testing and storage.
4. We will contact you by SMS or phone call to give you your child/ward’s results back.
5. Before you leave the clinic, you will be given a flyer with good hygiene advices to follow at home, and how-to self-isolate at home if your child is suspected to be a Coronavirus case.
6. If the nursing assessment finds that your child/ward is in urgent need of health care and you cannot get to health services on your own, AHRI will arrange transport via its private ambulance provider to the local district hospital, Hlabisa. If your child /ward is unwell, but not in urgent need of health care or wish to access health care on your own, AHRI will provide you with a referral to the local health service, but will not be responsible for any cost associated with the referral. Once you have been referred to the local health services or hospital, AHRI will not be responsible for any costs or procedures incurred after the referral.
7. We would also like to ask permission to use your child/ward data, specimens and test results for further AHRI studies about Coronavirus.

All the information collected is kept private and confidential on a secure computer at AHRI, and only shared with team members linked to AHRI. After we remove any personally identifiable information, we may share the data with other scientists for analysis.

*[Note: at this stage, ask the parent/guardian/caregiver if they understood what you just said. Then ask them if they have any questions.]*

This study has been approved by the Biomedical Research Ethics Committee (BREC) of the University of KwaZulu-Natal (REFERENCE NUMBER BE290/16). BREC contact details are on the flyer that we will give your child/ward. The Ethics Committee may look at the information from the study to check that procedures are being correctly and safely followed but they will not see your name.

You are giving to AHRI the permission to approach your child to participate in the study, and to your child to make their own decision about participation.

Your child/ward taking part in this study is entirely voluntary and you are free to withdraw at any time without giving any reason and without any negative consequence.

If you ever have questions about this study, or in case your child/ward is harmed as a result of participation in the study, you should contact Dr Kobus Herbst (Principal Investigator) or Miss Thobeka N. Mngomezulu (Population Intervention Programme (PIP) Study Coordinator) at the Africa Health Research Institute (AHRI) (035 550 7500) or Ms Nomathamsanqa Majozi the Head: Public Engagement (0800 203 695) toll free at any time. You will find these details on the flyer as well.

In agreeing for your child/ward to take part in this study you confirm that you understand this study and have been able to consider and ask questions before taking part.

Do you agree to your child/ward to be part of the study?

## 5.7 Assent for minors that are ≥12 years old for COVID-19 screening and testing at the testing point

*Introduce yourself and the Organisation. Explain that AHRI is supporting the health services for screening people for Coronavirus, and that we will strictly follow the guidelines. Mention that AHRI has already asked consent to their parents, but that you will explain how the process will work, with the following*:

1. First, I will ask you some questions about your health and if you had been in a situation where you may have been exposed to the Coronavirus.
2. If you have symptoms that resemble those of Coronavirus, a nurse will do a clinical check-up for Coronavirus symptoms and ask questions about your health.
3. The nurse will then decide if you should be tested or not. If so, she will use a small piece of cotton wool fixed on a stick to take a sample from the nose and/or from the mouth; this is not painful, but you may experience a bit of discomfort because these are sensitive areas and we are not used to something touching them.
4. The first swab will go in through your nose, then pushed to the back of your throat.
5. For the second swab, the nurse will ask you to open widely your mouth to see the back of throat. If it cannot be seen properly, your tongue will be pressed down with a flat wooden stick to provide a better view. The swab will be lightly brushed over the back of your throat and over the tonsils. The test will be done in our laboratory in Durban.
6. We will contact your parent or legal guardian, by SMS or phone call, to give the result of the test.
7. Before you leave the clinic, you will be given a flyer with good hygiene advice to follow at home; you can give it to your parents or legal guardians. If the nurse determines that you are unwell after the examination, they may also refer you to a clinic for additional care.
8. All the information we will get from you today may be used for future studies on the Coronavirus to better understand how this microbe works, and we would also like to ask your permission for that.

All the information collected as part of this study is kept private and confidential on a secure computer at AHRI; and scientists who may use this information will not know who you are.

Research committees at the University of KZN have approved the study we are doing and their role is to make sure that the risks being involved in the study are not too great.

Your parents / guardians / caregivers have given permission for you to be approached by us. You can decide now whether you want to take part of this study or not: you are free not to participate, and this will not have any consequence on any testing or care you receive today of in the future.

If you or your parents or legal guardians have any questions, there are several phone numbers that they can call; they are on the flyer we will give you.

*[Note for the CRA: at this stage, ask the minor what they learned today about this study. Then ask them if they have any questions.]*

Do you agree to be part of the study?

## 5.8 Assent for minors that are 6-11 years old for COVID-19 screening and testing at the testing point

*Introduce yourself and the Organisation. Explain that AHRI helps the health services to see if people have Coronavirus in their body. Mention that AHRI has already asked permission to their parents, but that you will explain how the process will work, with the following*:

1. First, I will ask you some questions to see if you have been feeling sick lately.
2. If you have been feeling sick, a nurse will see you and ask you or your parent or legal guardian more questions about this.
3. The nurse will then decide if you should be tested or not for the Coronavirus meaning that we will look for the virus in your body using a sample from your nose and/or your mouth. The nurse will use a small piece of cotton wool fixed on a stick to take the sample; this is not going to hurt, but it may feel a bit uncomfortable, like if something was scratching your throat:
   1. The first swab will go in your nose and the nurse will push a little bit inside, and then
   2. The second swab will go in your mouth; the nurse will ask you to open widely your mouth to see the back of your throat.
4. We will test the sample in our laboratory, when we know if the Coronavirus is in your body or not, we will let your parent or legal guardian know.
5. Before you leave the clinic, we will give a pamphlet to your parent or legal guardian that explains how to protect yourself from the virus by cleaning your hands properly, wearing a mask and how to cough in your elbow etc.
6. All the information we will get from you today may be used later to better understand how this Coronavirus works.

All the information we will get today will be kept safely in a computer and scientists will study this information but they will not know who you are.

Your parents or legal guardians have given us permission to approach you. You can decide now whether you want to participate or not: you can decide not to, and this will not have any impact on how we will take care of you and your health today or later.

If you have any questions, there are several phone numbers that they can call; they are on the flyer we will give you.

*[Note for the CRA: at this stage, ask the minor what they learned today about this study. Then ask them if they have any questions.]*

Do you agree to participate?