

Just for reading  
للقراءة فقط

1 Request to participate in medical research:  
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## 5 Access to oral health care among asylum seekers and refugees in 6 Switzerland (Phase 2: Questionnaire) 7

8  
9 Good day!

10 We are a research team from the Swiss Tropical Public Health institute, a research institute related  
11 to university of Basel.

12 We want to ask if you would like to voluntary participate in a study that focus on oral health care  
13 among asylum seekers and refugees in Switzerland.  
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16 The study is conducted by Prof. Nicole Probst-Hensch and by the doctoral candidate Lujain  
17 Alchalabi under the supervision of Prof. Nicole Probst-Hensch.  
18

19 We will explain you the study information and answer all your questions. You can find at first the  
20 summarized study information and later further detailed information.

### 21 Why are we conducting this research project?

- 22 • Oral health is an important part of our health. Our oral health care behavior is  
23 essential for preventing oral diseases. There are many unknown factors that  
24 affects the oral health care behavior among asylum seekers and refugees.
- 25 • In our study, we want:
  - 26 ○ To explore the things that affect your oral health care behavior (such as  
27 tooth brushing or visiting the dentist)
  - 28 ○ To know how can your oral health care behavior be related to oral health  
29 problems
  - 30 ○ To measure how your oral health problems can affect your daily life (such  
31 as eating and talking to others)

### 32 What do I have to do if I participate? – What will happen to me if I participate?

- 33 • We advise you to discuss your interest in participating with your parents first
- 34 • If you decide to participate, you will be interviewed once by one of our study staff.
- 35 • If you participate, the study staff will ask you to:
  - 36 ○ Suggest a date, time and location for the a 45 minutes interview
  - 37 ○ Answer questions on oral health, your oral care behavior

### 38 What are the benefits and what are the risks involved?

#### 39 Benefit

- 40 • The study results will help to develop tools that might help you to improve your  
41 and your family's oral health

#### 42 Risk and burden

- 43
- There are no risks related to participating in this study.
- 44
- Each interview will last for 45 minutes, and before that you will have 15 minutes
- 45
- time to read the study information and to give us your approval of participating
- 46
- (consent).
- 47

48 **By signing at the end of the document, you confirm that you are participating voluntarily**

49 **(freely) and that you understand the contents of the entire document.**

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51

52 **Detailed information**

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54 **1. Aim and selection**

55 In this information sheet, we call our study a *research project*. If you participate in this research  
56 project, you are a *participant*.

57

58 In this research project we want to explore the connection between your oral health care behavior  
59 and your daily life.

60

61 We are inviting you because:

- 62 - Your age is between 14 – 17 years old
- 63 - You speak Arabic
- 64 - You are an asylum seeker or refugee in Switzerland (with permit N, F or B)

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66 **2. General information**

67 ▪ We have very little information about the oral health care behavior of asylum seekers and  
68 refugees

69 ▪ So we want to know more about your oral health care behavior and oral health problems

70 ▪ If you participate, one of the study staff will interview you

71 ▪ In this study we will interview around 40 adults and teenagers

72 ▪ This study is following the required laws in Switzerland. The responsible ethics committee  
73 reviewed and approved the research project.

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75 **3. Procedure**

76 If you participate, the study staff will interview you once. Each interview will be around 45 minutes,  
77 and before it starts you will get at least 15 minutes to read and understand the study information.

78 We might cancel your participation early, if we noticed any stress or difficulty during the interview.

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80 **4. Benefit**

81 The study results will help us to understand what could help you and your family to improve your  
82 oral health. The study results might help the dentists to give you the best oral health treatments.

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84 **5. Voluntary participation and duties**

85 Your participation is voluntary, that means you are free to participate without any pressure. You do  
86 not have to give reasons if you do not want to participate. You can stop your participation at any  
87 time during the interview without giving a reason.

88

89 If you participate, we wish that you will respect the time that is set for your interview.

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91 **6. Risks and burdens**

92 ▪ Some questions might make you feel stressed. If that happened, please inform Lujain Alchalabi  
93 and you are free not to answer them.

94

95 **7. Alternatives**

96 If you do not want to participate in this study, but you want to participate in other studies in the  
97 future, please inform the study staff.

98

99 **8. Results**

100 There are:

101 1. Individual results are related to you directly: The study staff will inform you about the results  
102 that are related to you directly.

103 2. Individual results are discovered by chance: You will be informed if those results are  
104 important to your health

105 3. Results that we planned to have: The study staff will send you a summary of the results at  
106 the end of the study

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## **9. Confidentiality of Data and Samples**

### **9.1. Data Processing and Encryption**

The information that you will give us during the interview are collected, encrypted and stored with high security. Encryption means that all information that could identify you (name, date of birth, etc.) are deleted and replaced by a code.. Only the study team have can see the connection between those codes and your personal information. You can view your data at any time.

### **9.2. Data protection and protection of the samples**

The protection of personal data is strictly regulated by Swiss law. All data protection requirements are strictly observed. We might share your encrypted data for scientific reasons with other researchers.

### **9.3. Rights of access during inspections**

This research project may be reviewed by the responsible ethics committee and by the project management. The investigator must then disclose your data for such checks. All involved must maintain absolute confidentiality.

## **10. Withdrawal**

You can stop your participation at any time. In this case, the data collected up to that point will still be studied in encrypted form.

After the evaluation, your data will be anonymized. That means your personal information (name, date of birth) will be deleted, no one can find out those information came from you. This is primarily for data protection purposes.

## **11. Compensation**

If you participate in this research project, you will receive the following:

- Shopping voucher that worth 30.- CHF
- Manual TRISA toothbrush

We will reimburse you for expenses such as travel expenses that are incurred as a result of participation. You or your health insurance company will not incur any costs as a result of participating.

## **12. Liability**

If you suffer damage as a result of the research project, the Swiss Tropical and Public Health institute that initiated the research project and is responsible for its implementation is liable. The requirements and procedure are regulated by law.

## **13. Financing**

The research project is funded by the Swiss Tropical and Public Health institute's research fund.

## **14. Contact person(s)**

You can ask questions about participating in the project at any time. If you have any doubts that during the research project or afterwards, please contact:

The principal investigator: Prof. Nicole Probst-Hensch  
Telephone: +41 61 284 83 78  
Address: Swiss Tropical Public Health institute, Kreuzstrasse 2, 4123 Alschwil  
Email: Nicole.probst@swisstph.ch

The doctoral candidate: Lujain Alchalabi  
Telephone: +41 79 124 28 84

162 Address:  
163 Email:  
164

Swiss Tropical Public Health institute, Kreuzstrasse 2, 4123 Allschwil  
[Lujain.alchalabi@swisstph.ch](mailto:Lujain.alchalabi@swisstph.ch)

165 **Declaration of consent**

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167 **Written declaration of consent to participate in a research project**

168 Please read this carefully. Please ask if you don't understand or want to know something. Your  
 169 written consent is required for participation.

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<b>BASEC number (after submission) :</b>	2023-00871
<b>Title of research project (scientific and lay language):</b>	Access to oral health care among asylum seekers and refugees in Switzerland
<b>Responsible institution (project management with address):</b>	Swiss Tropical Public Health institute Prof. Nicole Probst-Hensch Kreuzstrasse 2, 4123 Alschwil
<b>Site of study conduct:</b>	Swiss Tropical Public Health institute Kreuzstrasse 2, 4123 Alschwil
<b>Investigator of the research project at the study site:</b> Surname and first name in block letters:	Prof. Nicole Probst-Hensch
<b>Participant:</b>	.....
<ul style="list-style-type: none"> <li>• Surname and first name in block letters:</li> </ul>	.....
<ul style="list-style-type: none"> <li>• Date of birth:</li> </ul>	.....

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- 172 ▪ I was informed verbally and in writing by the undersigned **study staff** about the purpose, the
- 173 course, possible advantages and disadvantages and possible risks of the research project.
- 174 ▪ I voluntary (freely) participate in this study and accept the written information provided about
- 175 the study mentioned above. I had enough time to make my decision.
- 176 ▪ My questions about participation in this study have been answered. I keep the written
- 177 information and receive a copy of my signed declaration of consent.
- 178 ▪ I agree that the responsible experts of the project management and the ethics committee
- 179 responsible for this research project may inspect my unencrypted data for verification and
- 180 control purposes, but with strict observance of confidentiality.
- 181 ▪ I will be informed of any results that directly affect my health. If I do not want this, I will inform
- 182 the undersigned **study staff**.
- 183 ▪ I may stop my participation at any time and without giving reasons. The data collected up to
- 184 that point will still be used for the evaluation study.
- 185 ▪ I am aware that the obligations stated in the participant information must be complied with. In
- 186 the interest of my health, the investigator can exclude me at any time.

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Place and date	Signature of participant
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Thumbprint (only for participants who cannot read):

Signature of witness (needed only for participants who cannot read):

Relationship of the witness to the study team:

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**Investigator's confirmation (the person taking the consent):** I hereby confirm that I have explained the nature, importance and scope of the research project to this participant. I assure that I will fulfill all obligations in connection with this research project according to the law applicable in Switzerland. If, in the course of the research project, I learn of aspects that could influence the willingness of the participant to take part in the research project, I will inform him/her immediately.

Place and date

.....

Surname and name of the person taking the consent in block letters

.....

Signature of the person taking the consent

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