PREVALENCE OF RESPIRATORY SYMPTOMS,PREVENTIVE PRACTICES,AND REDUCED LUNG FUNCTIONS AMONG FLOUR MILL WORKERS (DANGOTE),IN CALABAR, CROSS RIVER STATE,NIGERIA.

INFORMATION LETTER/COSENT FORM

This study is conducted to investigate the prevalence of respiratory symptoms, preventive practices, and reduced lung functions among flour mill workers at Dangote in Calabar, Cross River State,Nigeria It is being conducted by **Sadaf** Danish of the department of Public Health Sciences,Faculty of Allied Medical Sciences, University of Calabar, Calabar.

As a participant in this study, you will be asked to respond to a set of questionnaires and take lung function test which will take approximately 5 minutes of your time. There is no anticipated adverse effect to you as a result of your participation in this study. Your participation is voluntary and you are not obligated to answer any question against your will.

All information collected from participants in this study will be aggregated and all identifying information removed. Thus,your name will not appear on any report, publication or presentation resulting from this study. Information will be secured electronically and out of bound of any other person except the researcher.

This project has been reviewed by, and received ethics clearance through the Research Ethics committee, Cross River State Ministry of Health, Calabar, in case you have any comment or concerns resulting from your participation in the study, please contact the chairman CRSH-REC,department of the clinical governance,SERVICOM & E-HEALTH 2nd floor,room 17 Ministry of Health Headquarters, Calabar.

CONSENT FORM

I agree to participate in this study by **Sadaf Danish** of the department of Public Health Sciences, University of Calabar, Calabar. I have made the decision based on the I read in the information letter. As a participant in the study, I realize that I will be asked to complete a set of questions and/or take part in a brief interview. I may also decide to decline answering any question(s), if I so chose. All information which I provide will be held in

confidence and will not be identified in any way in the final report. I understand that I may withdraw this consent at any time by ceasing to respond to or fill the quetionnaire

Participant's Name

Participant's Signature

Researcher's Name/Signature.. ..... 05/08/2024

Supervisor's Name/Contact...DR..E.B. F Sy 08173099010

Supervisor's Signature... ..... 05/08/2024

DEPARTMENT OF PUBLIC HEALTH
FACULTY OF ALLIED MEDICAL SCIENCES
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University of Calabar
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UC/CMS/PUH/034

19th June, 2024.

TO WHOM IT MAY CONCERN

LETTER OF INTRODUCTION: SADAF DANISH
PUH/MPH/21/023

This is to introduce the above-named, who is a MPH student in the Department of Public Health, University of Calabar, Calabar. The bearer is carrying out a research on "PREVALENCE OF RESPIRATORY SYMPTOMS, REDUCED LUNG FUNCTIONS AND PREVENTIVE PRACTICES AMONG FLOUR MILL WORKERS IN CALABAR, CROSS RIVER STATE, NIGERIA." needed information from your establishment.

Kindly assist the bearer with the necessary information needed as all such information will be used purely for academic purposes, and will be treated in strict confidence.

Thank you for understanding.

Dr. Antor Odu Ndep
AG. HEAD OF DEPARTMENT

GOVERNMENT OF CROSS RIVER STATE OF NIGERIA
MINISTRY OF HEALTH,P.M.B.1049, CALABAR
PHONE: +234 8063661598, EMAIL: crsmhethicalresearch@ gmail. Com

CRS/MH/HREC/2024/VOL.2/007 3rd July, 2024

SADAF DANISH
University of Calabar,
Calabar

CERTIFICATE OF ETHICAL APPROVAL

The Cross River State Health Research Ethics Committee (CRS-HREC) have reviewed your application for Ethical Approval of the Research

Title: **PEVELANCE OF RESPIRATORY SYMPTOMS, PREVENTIVE PRACTICES, AND REDUCED LUNG FUCTIONS AMONG FLOUR MILL WORKERS IN CALABAR, CROSS RIVER STATE, NIGERIA.** with **REC No. CRS/MH/HREC/2024/VOL.2/007** and has granted FULL **ETHICAL APPROVAL.**

This approval is valid for **ONE YEAR** from the date of its issuance.

You may proceed with your study in accordance with the protocol. You are requested to abide by every professional and ethical code for the conduct of this research. You have to inform the CRS-HREC of any changes in your protocol in advance before going to the field.

The CR-HREC reserves the right to request an audit of this research at any time during or post implementation. Submit a copy of the completed research (results) to the Department of Clinical Governance ,SERVICOM & E- HEALTH for evidence- based policy and decision making in Cross River State Ministry of Health.

Yours Sincerely,

Dr. Obaji E. O. Akpet
Chairman CR-HREC