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INFORMED CONSENT FORM

- 2 Dear Subjects,
- 3 By reading the informed consent form carefully below, you are agreeing that: (1) you have read
- 4 and understood all the information, (2) you know your rights, (3) questions about your
- 5 participation in this study have been answered satisfactorily (if you have any question at any
- 6 time, you can require researchers to explain), (4) you are aware of the potential risks (if any)
- 7 and benefits, and (5) you are willing to take part in this research.
- 8 The project is led by Professor Gordon Liu who works in the National School of Development
- 9 (NSD), Peking University and funded by the National Natural Science Foundation of China.
- 1. Why is this study being conducted?
- 11 Under the national policy of "Health China 2030", one of the top priorities is how to
- 12 effectively promote targeted poverty alleviation. At present, residents are in poverty are
- mainly from bankruptcy through medical bills in Liangshan Yi Autonomous Prefecture.
- 14 Therefore, this study will intervene in residents' health in Liangshan Prefecture based on big
- data, and explore whether improving health can break the vicious cycle of "poverty caused by
- disease and disease caused by poverty" through the method of experimental economics. The
- data will be used to help formulate policies related to health management in poor areas and
- promote the goal of poverty eradication.
- 19 2. Who will be invited to participate in this study?
- 20 Our survey will be conducted in Liangshan Yi Autonomous Prefecture, Sichuan Province. The
- 21 number of randomly selected households is twenty in each village. They are volunteered to
- 22 participate in the study. Exceptionally, all households residing in Liangshan Prefecture for at
- 23 least six months of the year will be included in the study sample.
- 24 3. How many people will participate in the study?
- 25 Those with drinking habits will be invited to participate in urine testing on a voluntary basis,
- and no more than 440 subjects are planned to be enrolled in this project with urine testing.
- 4. What is included in this study?
- 28 The study aims to explore intervention methods to promote the health level of local
- 29 residents through health information interventions in cooperation with local health
- 30 commission, which could reduce the incidence of diseases, improve the health and productivity
- of local populations, and provide scientific suggestions to the government to address poverty
- 32 alleviation due to diseases. The team will design a questionnaire based on the objectives and
- 33 content of the study and provide standardized training to the village doctors and local university
- 34 students. The village doctors and researchers will collect data based on the questionnaire in a
- one-on-one manner, and the researchers will be responsible for urine retention and observation
- of the subjects. The EtG test strips were used for urine alcohol testing, and the cost of urine
- testing was borne by the project team. The five-year study is to collect data in every six months,
- and the content of each follow-up visit will be basically the same except for basic household
- 39 information.
- 40 5. How long will the study last?
- 41 The duration of this alcohol consumption study is three months (including baseline research,

- 42 intervention and 7 follow-up visits), and each questionnaire will take approximately 20-60
- 43 minutes to complete. You may withdraw during the process of the study and your benefits will
- 44 not be affected in any way.
- 45 6. What are the risks of participating in this study?
- 46 This study mainly involves information intervention and health education, mainly to provide
- 47 you with information to improve your health and health behavior and to help you learn more
- 48 about your health, and will not cause you any harm. To ensure that you can fully understand the
- 49 information content of the intervention, the intervention will be conducted through information
- 50 platforms, voice or on-site.
- To achieve the goal of this study, we will regularly collect information about your health and
- 52 other information, which may cause inconvenience to your life if the information is
- 53 inadvertently disclosed. In order to properly control this risk, all information will only be
- 54 collected through local village doctors, and the information collected will only be used for
- research, not for commercial purposes, and the team is committed to not disclose your personal
- information in any papers and reports.
- 7. What are the benefits of participating in this study?
- We will follow up on your health status to fully protect your rights. By participating in this
- 59 program, you are likely to learn more about health and hygiene information. That can help you
- 60 change your bad habits, reduce the incidence of disease, and improve your personal health.
- 8. Is it mandatory to participate in and complete this study?
- Your participation in this study is completely voluntary. If you do not want to, you can refuse
- 63 to participate and this will not have any negative impact on you. Even after you have agreed to
- 64 participate, you may change your mind at any time and tell the investigator to withdraw from
- 65 the study, and your withdrawal will not affect your access to normal medical services. In
- 66 principle, after you have withdrawn, the researchers will keep your information in strict
- 67 confidence and will not use or disclose it further during this period. However, in the following
- 68 circumstances, the researchers can continue to use information about you even after you have
- 69 withdrawn from the study or the study has ended. These circumstances include:
- 70 (1) Removal of your information would affect the scientific validity of the study results or the evaluation of the security of the data.
- 72 (2) Providing some limited information for research, teaching, or other activities (this
- information will not include your name, ID number, or other personal information that
- 74 identifies you).
- 75 (3) If something happened can affect your decision to continue participating in that research,
- we will inform you.
- 9. About the study cost and compensation
- 78 There is no fee involved in participating in this study, and the team mainly collect data by
- visiting the household, and minimize disturbance to farmers as much as possible. Additionally,
- 80 if reasonable costs are incurred due to this study, such as transportation costs incurred by

- farmers in order to cooperate with the research, the project will provide some compensation
- with advance notice.
- 83 10. Do subjects receive compensation for participating in this study?
- No compensation will be paid for participation in this study.
- 85 11. What happens in case of research-related injuries?
- 86 In the event of an accidental injury resulting from the performance of the study, we provide
- the necessary medical treatment, cover the appropriate medical expenses and provide
- 88 appropriate financial compensation in accordance with the relevant laws and regulations of
- 89 China.
- 90 12. Will my information be kept confidential?
- 91 If you decide to participate in this study, your participation in the study and your personal
- 92 information during the study will be confidential. Any information that identifies you will not
- 93 be disclosed to members outside of the research team without your permission. All study
- 94 members and study-related parties will keep your identity confidential as required. Your file
- 95 will be kept securely and will be accessible only to the researcher. To ensure that the research
- 96 is conducted in accordance with regulations, members of the government administration, school
- 97 authorities or ethics committee will have access to your personal information at the research
- unit as required. When the results of this study are published, no personal information about
- 99 you will be disclosed.
- 100 Information about you will only be used for research purposes, and when researchers publish
- public articles or reports, the data will be encrypted and no personal information about you will
- 102 appear.
- 103 13. Who do I contact if I have any question?
- 104 If you have any questions related to this study, please contact Shanshan Li.
- 105 E-mail: lishanshan7@pku.edu.cn
- 106 Tel: 010-62757318
- 108 If you have questions related to the subject's own rights, you may contact the Biomedical Ethics
- 109 Committee of Peking University.
- 110 E-mail: llwyh@bjmu.edu.cn
- 111 Tel: 010-82805751
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Investigator's Statement

I have informed the subject of the background, purpose, risks and benefits of the study, given him/her sufficient time to read the informed consent form, discuss with others, and answered his/her questions about the study; I have informed the subject that he/she could contact Dr. Gordon Liu at any time when he/she encountered problems related to the study and the Biomedical Ethics Committee of Peking University at any time when he/she encountered problems related to his/her rights/rights, and provided accurate contact information; I have informed the subject that he/she could withdraw from the study; I have informed the subject that he/she would be given a copy of this informed consent form, which contains my signature and his/her signatures.

Signature Date

Subject Statement

I have been informed of the background, purpose, risks and benefits of the study. I was given sufficient time and opportunity to ask questions and I was satisfied with the answers to my questions. I was also told who to contact if I had questions, difficulties, concerns, suggestions about the study, or if I wanted further information or help with the study. I have read this informed consent form and agree to participate in this study. I understand that I may withdraw from this study at any time during the study without any reason. I am informed that I will be given a copy of this informed consent form containing my signature and that of the researchers.

Signature Signature

Date

Signature of the legal agent

Date

Relationship to the subject

Subject's signature (10 years old and above)

Date