Dear all,

First and foremost, I would like to take this opportunity to express my best wishes and deepest appreciation for your nice collaboration. Herewith I am glad to share our first newsletter with updated information about ABACUS study.

On behalf of ABACUS network

Nga Do, OUCRU-Vietnam, ABACUS Regional Coordinator

Features in this issue include:

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- Qualitative work training in Ghana in May 2016
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- Redcap e-database development
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Kick-off meeting in Bangkok, Thailand in January 2016

The first successful Abacus workshop was held in Bangkok, Thailand in January 2016 with active participation from 7 study sites in 6 low and middle income countries (LMICs). The main aim of this workshop was to finalize the study protocol for getting approvals from Oxford Tropical Research Ethics Committee (OxTREC) and local institutional review boards (IRBs). Due to the raised concerns about budget relating to actual work load and supervision required in the study, the amount of work was adjusted by lowering the number of discussions and interviews without compromising main study outcomes. Particularly, the number of discussions was lowered to 6 focus group discussions (FGDs) instead of 8 FGDs. Similarly, the number of in-depth interviews (IDIs) with community members and antibiotic suppliers was adjusted from 20 to 16 IDIs per each subject.

Other main items were revised as below:

- The inclusion criteria were revised, and the minimum number of antibiotic encounters was dropped.
- The study staff will not intervene with antibiotic practices.
- Study information documents include a separate risks and benefits paragraph.
• Exclusively written informed consent. Thumbprint included for households and exiting customers.
• Only if participant is comfortable, report about indication, and inspection of medicines by study staff
• Pilot results can be used for analysis. The customer exit survey will be piloted as well.
• The study sample and content of explanatory qualitative work will be kept open.

Qualitative work training in Ghana in May 2016

From 24-26 May 2016, Ghana successfully hosted the second Abacus workshop which was focus on qualitative work training attended by 16 participants from 7 study sites. The objective of this meeting was to train the participating field workers and data analysts in performing the qualitative study components of the ABACUS study in a harmonized manner. This was also an opportunity to introduce open code computer program for qualitative research which will be used in Qualitative Content Analysis of ABACUS data afterward. Lastly, this workshop was another wonderful opportunity for colleagues from all study sites to connect and collaborate.
The key action points from workshop were summarized as below:

- On-site training for field workers on using qualitative instrument including FGDs and IDIs guide
- The show-cards are constructed to show both the pills themselves and the packaging.
- Each interview and FGD transcript to be summarized in English into a 1-1.5 page document that can be shared with the other sites and investigators.
- It was suggested to provide community feedback with interim findings, in late 2016 or early 2017, to give the community an understanding of the work and their contribution, and also to increase interest in participating in 2017.

Ethic clearances (centrally and locally)

We are happy to be able to inform you that after being officially approved by OxTREC in July, most sites have achieved local ethics approvals including Matlab (Bangladesh), Manhica (Mozambique), Filabavi (Vietnam), Kitampo (Ghana) and Kanchanaburi (Thailand). Agincourt -South Africa is waiting for response from IRB’s reviewers and Dodowa-Ghana remains the approval from Dodowa health research centre to be collected. These are really important achievements as our studies activities are now possible to do by crossing this milestone.

REDcap e-database development

In this study, we will use e-CRFs instead of paper-CRFs. Therefore, REDcap e-database is being developed by Wits University, South Africa for study quantitative instruments. Tablets with developed e-database and training on how to enter data on REDcap is expected to be completed and handed over to sites in December this year. A training programme for centers to use Redcap is being planned with Wits University. Details to follow soon.

Field work implementation status

Some sites where local permission has been achieved are actively preparing and conducting phase 1 and phase 2. Supplier mapping has started at 3 sites: FilaBavi, Kintampo, and Kanchanaburi. In Kanchanaburi, this phase 1 activity now includes only formal suppliers.
In Filabavi, over 500 antibiotic suppliers have been identified and mapped. Due to the knowledge of the local fieldworkers of Bavi, a lot informal suppliers have been identified. This shows the value of the INDEPTH-network in identifying this important channel that has largely been hidden and not investigated. This sensitive finding would not be able to found without existing INDEPTH Health and Demographic Surveillance System (HDSS). In this site, 4 inventories in formal suppliers have also been conducted. There were several obstacles in accessing those suppliers for inventory due to owner’s concern about their income to be disclosed. Therefore, they need field workers who are living near to suppliers and have good relationship to owners to overcome these difficulties. Several FGDs and IDIs with vary community members have also been conducted in this site. These primarily data will be presented in the coming INDEPTH Annual General Meeting in Uganda, November 2016.

Phase 2 preparation activities including show-card design, training for field workers are being intensively conducted in Kanchanaburi, Manhica and Dodowa and even in sites where ethic approval has not been received (Agincourt and Matlab).

Meeting with Filabavi study team in Vietnam, 13rd October 2016

From left to right: Nguyen Thi Kim Chuc (Site PI), Nguyen Hong Hanh (Site coordinator), Duong Hong Diep (Supporter), Tran Khanh Toan (co-investigator), Heiman Wertheim (PI), Do Thi Thuy Nga (regional coordinator in Asia)
Next activities:

- Finalize the position paper to be submitted to Plos Medicine
- Tablets purchasing and delivering to sites with on-site training for field workers and IT specialist in all 7 sites, between end of November to early December, 2016
- Sites tour by regional coordinators to share and learn experience and provide technical support in December, 2016
- Supporting sites to complete local IRB approval, phase 1 & phase 2
- Summarise key points from all FGDs and IDIs transcript in 1-1.5 pages in English to be able to share among site and expert
- Organize a training workshop on qualitative analysis, March, 2017

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