

Factors influencing infant feeding choices of PMTCT mothers at St. Barnabas Hospital, Libode, Eastern Cape

by
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8. IDENTIFICATION OF INVESTIGATORS

If you have any questions or concerns about the research, please feel free to contact: Ntombizanele Didiza- Maganga. 0832776183 at St Barnabas Hospital , Dietetics Department, Libode. After hours you can contact me at 0475340047

9. RIGHTS OF RESEARCH SUBJECTS

You may withdraw your consent at any time and discontinue participation without penalty. You are not waiving any legal claims, rights or remedies because of your participation in this research study. If you have questions regarding your rights as a research subject, contact Ms Maléne Fouché [mfouche@sun.ac.za; 021 808 4622] at the Division for Research Development.

SIGNATURE OF RESEARCH SUBJECT OR LEGAL REPRESENTATIVE

The information above was described to *me* by in
Xhosa and *I am* in command of this language or it was satisfactorily translated to *me*. *I* was given the opportunity to ask questions and these questions were answered to *my* satisfaction.

I hereby consent to participate in this study. I have been given a copy of this form.

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Name of Subject/Participant Signature of Subject Date

SIGNATURE OF INVESTIGATOR