University of South Africa

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| FORM 2: 2019  Research ethics application form for conducting research involving secondary data |

If you have any questions about or require assistance with the completion of this form, please contact your supervisor (master’s or doctoral students), or the Research Ethics Administrator/Chair of the ERC (012 4433 9462 or budhrt@unisa.ac.za)

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| **IMPORTANT:**  **IF YOU ANSWERED ‘YES’ PLEASE STOP COMPLETING THIS FORM AND REFER TO APPLICATION FORM 1.** | | |
| The proposed study will involve human participants directly through | **YES** | **NO** |
| * Interaction or intervention with living individuals |  |  |

NOTE: For research, that involves direct human participant involvement or a combination of direct human participant involvement and the collection of secondary information, complete Form 1.

For research, that involves NO human participant involvement, complete Form 3.

|  |  |  |
| --- | --- | --- |
| For applicant use  *\*This section is needed for record keeping.* |  | |
| DATE SUBMITTED TO Ethics Review Committee (ERC) |  | |
| PREVIOUS APPLICATION NUMBER  *(Applicant to indicate a previously allocated application number in case of a resubmission if applicable)* | **Previous Application Number** | **Not applicable** |
|  |  |

***\*This section is for office use only.***

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| --- | --- |
| APPLICATION NUMBER |  |
| DATE PROCESSED (submitted to reviewers) |  |
| RISK LEVEL *(low, medium or high)* |  |
| TYPE OF REVIEW (expedited or full committee review) |  |
| AGENDA DATE  *(For expedited transactions, the agenda date is the date the expedited approval gets reported or ratified at the convened ERC)* |  |
| DECISION OF ERC (approved, referred back, disapproved) |  |
| DATE OF ISSUING APPROVAL CERTIFICATE OR FEEDBACK LETTER |  |
| **Period for which approval is valid**  **(Valid only as long as approved procedures are followed)** |  |

**PRIVACY INFORMATION:**

The personal information you provide on this form is collected for the primary purpose of assessing your research ethics application. This personal information will be entered into a database to assist with administration, correspondence, and statistical analyses. Office bearers of the Ethics Review Committee have access to these records. Records will be made available to authorised third parties should the need arise such as the National Health Research Ethics Council (NHREC) and Unisa structures such as the Unisa Research Ethics Review Committee (URERC). All records will be retained for as long as necessary to achieve the purpose for which it was collected.

**Contents of this application form**

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| **RESEARCHER’S DECLARATION TO ADHERE TO THE UNISA CODE OF CONDUCT REGARDING THE ETHICS OF THE PROPOSED RESEARCH** |

**By signing below, I**        **(full name of the main researcher) declare as follows:**

|  |  |  |
| --- | --- | --- |
| 1. I completed all the sections of this form that are relevant to the proposed research study. |  | Agree |
| 1. I have acquainted myself with UNISA’s code of conduct on research ethics expressed in the UNISA Policy on Research Ethics and the Standard Operating Procedure on Research Ethics Risk Assessment. I shall fully comply with it. |  | Agree |
| 1. I shall conduct the research in strict accordance with the approved proposal. I acknowledge that the approval is valid as long as approved procedures are followed. |  | Agree |
| 1. I shall notify the ERC in writing if any changes to the research are proposed that may affect any of the study-related risks for the research. |  | Agree |
| 1. I shall maintain privacy and the confidentiality of records pertaining to the research. |  | Agree |
| 1. I shall not use the research and information in a manner that is detrimental to individuals or institutions unless it can be scientifically justified. |  | Agree |
| 1. I shall store research data securely and in accordance with the data management measures indicated in my application/proposal. |  | Agree |
| 1. I shall uphold research integrity and refrain from conduct that may taint the integrity of science, including, but not limited to plagiarism, fabrication and falsification of data. |  | Agree |
| 1. I shall refrain from the use of human participant data that was collected without a valid research ethics approval for the purpose of this research (retrospective use of participant data). |  | Agree |
| 1. I shall take the necessary steps to warrant that co-researchers, if applicable, familiarise themselves with the Unisa Policy on Research Ethics. |  | N/A  Agree |
| 1. I accept the privacy information statement set out on page 2. |  | Agree |

**Applicant: Principal Researcher**

Full name in Print:

Signature­­­­­­­­­­­­­:

Date signed:

**Approved by supervisor (if applicable):**

To my knowledge, the student has addressed all aspects in his/her application for research ethics approval set forth in the University of South Africa’s Policy for Research Ethics. I confirm that the form is complete according to Appendix A. I will ensure that the student notifies the committee in writing if any changes to the research are proposed that may affect any of the study-related risks for the research participants such as methodology, sampling, questionnaire, interview schedule, etc. Subsequently, I approve the submission and recommend that approval be granted for the research.

Full name in Print:

Signature:

Date signed:

**Please complete the rest of the form below**

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| **SECTION 1: RESEARCHER’S DETAILS** |

*\*This section should be fully completed to aid with the issuing of the clearance certificate and for record keeping.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **1.1** | **Details of main researcher (referred to as the applicant)** | | | | |
| Title | Full name & Surname | Staff / student no | Department/Unit where you are currently registered or employed | Contact numbers | Email address |
|  |  |  |  | Mobile:  Work:   |  | | --- | |  | |  |
| Abridged CV of main researcher explicitly providing evidence of: | | * + 1. Experience relevant to the proposed research     2. Qualifications relevant to the proposed research     3. Publications and other research outputs     4. Research Ethics Training done within the past three years | | | |

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| **1.2** | **Supervisor if the application is made by a student** | | | | |
| Title | Full Name & Surname | Staff no | Department/Unit where you are employed | Contact numbers | Email address |
|  |  |  |  | Mobile:  Work: |  |
| Abridged CV of supervisor explicitly providing evidence of: | | * + 1. Experience relevant to the proposed research     2. Qualifications relevant to the proposed research     3. Publications and other research outputs relevant to the study     4. Research Ethics Training done within the past three years | | | |

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| **1.3** | **Co-supervisor if the application is made by a student\***  **\*** if applicable | | | | |
| Title | Full Name & Surname | Staff no | Department/Unit where you are employed | Contact numbers | Email |
|  |  |  |  | Mobile:  Work: |  |
| Abridged CV of co-supervisor | | 1.3.1 Experience relevant to the proposed research  1.3.2 Qualifications relevant to the proposed research  1.3.3 Publications and other research outputs  1.3.4 Research Ethics Training done within the past three years | | | |

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| **1.4** | **Internal and/or External Co-Researcher(s) \***  **\*** if applicable | | | |
| Title | Full Name & Surname | Affiliation/ Organisation/Department | Contact numbers | Email |
|  |  |  | Mobile:  Work: |  |
| Abridged CV of co-researcher | | 1.4.1 Experience relevant to the proposed research  1.4.2 Qualifications relevant to the proposed research  1.4.3 Publications and other research outputs  1.4.4 Research Ethics Training done within the past three years | | |

*\*Please provide information of additional researchers if applicable by inserting additional rows below*

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| **SECTION 2 – DETAILS OF PROPOSED RESEARCH** |

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| 2.1 | Title or provisional title of the research project  *10 - 16 words* | | | | | |
|  | | | | | | |
| 2.2 | Type of application (more than one option may apply)  *Place an ‘x’ in the box [provide details in the space allocated for comments if applicable]* | | | | | |
| a) Research for non-degree purpose (journal articles; conference presentations, etc.) | | | | | |  |
| b) Research for degree purpose | | | | |  | |
| c) Identify the qualification for the project (in the case of research for degree purpose) | | | | | | |
|  | | | | | | |
| d) Collaborative research | |  | e) Community Engaged Research (CER) | | |  |
| f) Health or Health related research[[1]](#footnote-1)  (If you ticked “yes”, stop completing this form and consult the chairperson of the ERC (budhrt@unisa.ac.za; 012 433 9462) | |  | g) Other i.e. Research and Development leave | | |  |
| h) Niche Areas *(Unisa researchers and postgraduate students only)*   1. Knowledge generation and human capital development in response to the needs of South Africa and the African continent | | | |  | | |
| 1. The promotion of democracy, human rights and responsible citizenship | | | |  | | |
| 1. Innovation and capacity building in science and technology | | | |  | | |
| 1. Economic and environmental sustainability | | | |  | | |
| 1. ODL/ODeL | | | |  | | |
| 1. Other | | | |  | | |
| Comments:  Justify why you deem this a CE research project OR collaborative research project OR identify the primary reason for conducting the research if you ticked “Other”. | | | | | | |

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| **2.3** | **Provide a proposal summary in approximately 500 words. [This requirement should be met by all applicants]**  **\*\*Please note that postgraduate student must append a proposal that has received prior approval from a relevant Higher Degrees/Scientific Review Committee to this application\*\***  **\*\*\*If data contains personal identifiable information and is not in the public domain, a full proposal and access to consent letters could be required \*\*\*** | | | |
| **Research problem, aim/objectives, anticipated outcomes, research design, data collection and analysis methods in nontechnical language** | | | | |
| **2.4** | | **Append the letter of proposal acceptance to this application if applicable (this is relevant to all postgraduate degree students)** | | |
| **YES** | | |  |
| **NO** | | |  |
| **Not applicable** | | |  |

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| **SECTION 3 – DETAILS OF THE DATA** |

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| 3.1. | **Identify the nature of the data (Archival sources, statistical data, reports, prior collected research data)** |
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| 3.2 | **What is the origin/source of the research data? For what purpose was the data originally collected?** *This assists the ethics reviewer in determining whether the sources can raise ethical concerns.* |
|  | |
| 3.3 | **Are the sources of the research data in the public domain?**  *Some public sources are obvious, e.g. the internet, World Bank, IMF, stock exchanges, national statistical offices databases, etc. However, for those which are not well-known the researcher must provide evidence.* |
| |  |  | | --- | --- | | **YES** |  | | **NO** |  |   **Provide evidence if applicable (i.e. link to website)** | |

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| 3.4 | | **If the data are not in the public domain, what are the conditions for access?**  *Access to data could be restricted, e.g. sharing of data with other researchers, where permission should be obtained. Some data could be purchased or subscribed to by paying a fee.* |
| **Details of obtaining data:** | | |
| 3.5 | | **Does the database or secondary data set contain any personal information/identifiers? [This information relates to the anonymity of data/ confidentiality of the data]**  *Databases such as credit bureaux, utility companies’ databases, raw qualitative data sets etc. contain personal information which might be an ethical concern.* |
| |  |  | | --- | --- | | **YES** |  | | **NO** |  |   If yes, identify the type of personal information/identifiers (first and second names, age, gender, occupation, identity number, student or employee number) | | |
| 3.6 | **If the database or secondary data set does contain personal information, do you have evidence that the data to be provided to you have been anonymised?**  *This question is critical in determining as to whether ethical clearance procedures are warranted.* | |
| |  |  | | --- | --- | | **YES** |  | | **NO** |  | | **Not applicable** |  |   **Comment / justification:** | | |
| 3.7 | | **In the case of a private database or data set, does it contain information on private firms/organisations for which permission is required?**  *Generally, public and listed firms’ information is in the public domain. Private firms normally want to keep their data confidential, the very reason they chose to remain private. Hence, it would be unethical to use their data without permission.* |
| **Please provide evidence of permission:** | | |
| 3.8 | | **Will the shortcomings/incompleteness of the data be reported?** |
| |  |  | | --- | --- | | **YES** |  | | **NO** |  | | | |
| 3.9 | | **If so, how will you report on the data limitations?** |
| 3.10 | | **Are the research methodology and the research design in line with the answers of the preceding questions? Provide a justification for the answer.**  *Researchers may articulate that they will use secondary data analysis but a closer look at their research proposals will point to mixed methods where collection of data involving humans is partly envisaged.* |
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| 3.11 | | **How are the original owners of the data going to be recognised/referenced/ acknowledged/cited if appropriate?** |
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| SECTION 4: ETHICAL CONSIDERATIONS |

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| 4.1 | **Was ethical clearance granted for the original data gathering phase by this or any other research ethics committee?**  *This question is critical in determining as to whether the original data were gathered in an ethical manner.*   |  |  | | --- | --- | | **YES** |  | | **NO** |  | | **UNKNOWN** |  | | **NOT APPLICABLE** |  | | |
| **Comment / justification:** | | |
| 4.2 | **Did the participants provide consent for future use of the data in the original/primary study?**   |  |  | | --- | --- | | **YES** |  | | **NO** |  | | **UNKNOWN** |  | | **NOT APPLICABLE** |  | | |
| **Comment / justification:** | | |
| 4.3 | **Provide details of the safekeeping, de-identification and preservation of data, including the duration of preservation.** | |
| **Comment / justification:** | | |
| 4.4 | | **If the data will not be preserved, indicate how it will be destroyed and after how long.** |
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| SECTION 5 – RISK ASSESSMENT |

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| * 1. **The study presents:** |

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| 5.1.1 Negligible risk |  |
| 5.1.2 Low risk |  |
| 5.1.3 Medium risk |  |
| 5.1.4 High risk |  |

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| **5.2 Briefly justify your choice/classification**   |  | | --- | |  | |
| * 1. **Indicate the potential benefits of the study.** |
| * 1. **Describe the risks relating to the research procedures, previously involved participants (if appropriate), communities or third parties may or will experience.** |
| * 1. **Indicate how the potential risks of harm will be mitigated by explaining the steps that will be taken to minimise the likelihood of the event occurring (i.e. protecting confidential information).** |

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| SECTION 6 – CHECKLIST |

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| **Checklist of Documents** | **YES** | **NO** | **N/A** |
| *Place an ‘x’ in the box provided* | | | |
| a) Proof of proposal approval (Postgraduate students only) |  |  |  |
| b) Proposal approved by a Higher Degrees/Scientific Committee |  |  |  |
| c) Abridged CV’s of the research team confirming their competence to execute the required procedures |  |  |  |
| d) Previous ethics approval certificate if applicable |  |  |  |
| e) Prior obtained informed consent and/or permission documentation if applicable |  |  |  |
| f) Declaration signed by the principal researcher and supervisor |  |  |  |
| g) Are you aware that if you plan to involve Unisa data in the study, permission will have to be sought from the Research Permissions Subcommittee after you have obtained ethics approval, and before fieldwork activities? (please contact RPSC@unisa.ac.za) |  |  |  |

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1. Consult the Policy on Research Ethics for a definition of health research. [↑](#footnote-ref-1)