University of South Africa

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| FORM 2: 2021  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 of the UNISA-CAES Health Research Ethics Committee (011-471-2862 or vwykmj@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.

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| 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.***

|  |  |
| --- | --- |
| 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)** |  |

**Contents of this application form**

|  |  |
| --- | --- |
| **Item** | **Page no** |
| **RESEARCHER’S DECLARATION** | 3-4 |
| **Section 1 – Researcher(s) details** | 5 |
| Section 2 – Details of proposed research | 7 |
| Section 3 – Details of The Data | 8 |
| Section 4– Ethical considerations | 10 |
| Section 5 – Risk Assessment | 11 |
| **Section 6 - Checklist** | 12 |

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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**

**CONSENT IN TERMS OF THE PROTECTION OF PERSONAL INFORMATION ACT NO 4. OF 2013**

1. I declare that all the information furnished by me on this form is true and correct and undertake to inform Unisa of any changes in my personal information.

2. I undertake to comply with all the rules, regulations and decisions of the university and any amendments to it and I have taken note of advice which may be applicable to Unisa researchers, non-Unisa researchers and postgraduate supervisors.

3. I, as a researcher and/or postgraduate supervisor, hereby consent that Unisa may collect, use, distribute, process and communicate my personal information for all required research ethics processes about my participation in Unisa research ethics activities, which may include, but is not limited to:

3.1 assessment of research ethics application;

3.2 internal administrative processing;

3.3 assessment of complaints and investigations of alleged violations of norms and standards for the ethical conduct of research; and

3.4 institutional and scholarly research.

4. I also consent that Unisa may share my personal information with other Universities of South Africa, third parties rendering database management facility on behalf of the university, the Department of Higher Education and Training, the National Health Research Ethics Council, Internal and External Auditors, and for the purpose of legislative requirements.

5. I understand that in terms of the Protection of Personal Information Act (POPIA) and other laws of the country, there are instances where my express consent is not necessary to permit the processing of personal information, which may be related to investigations, litigation or when personal information is publicly available.

6. I will not hold the university responsible for any improper or unauthorised use of personal information that is beyond its reasonable control.

7. I confirm that I have read the notice and understand the contents thereof.

**Note:** The nature of personal information collected can be viewed in the Personal Information Inventory Lists published on the Unisa webpage at [www.unisa.ac.za](http://www.unisa.ac.za)

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 (checklist). 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 is 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 HREC ([antwima@unisa.ac.za](mailto:antwima@unisa.ac.za); 011-670-9391) | |  | 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)