Faculty of Engineering & the Built Environment

Note: This adjusted version is valid as per Feb 2023, which has improvements made to the visuals. The original and any updated version of these guidelines are in the EBE EiR Handbook that is located on the EBE website at: https://ebe.uct.ac.za/research/ethics-research

EBE Ethics in Research Handbook

Revision 5.1

Last updated 19 March 2018

Enquiries and Contact Information

1. Questions regarding procedures of the application process may be directed to the administrator of the EBE EiRC, Ms Carlyn Hewitson, carlyn.hewitson@uct.ac.za.

2. Questions regarding the substance of applications should be addressed to supervisors in the first instance if the applicant is a student. Otherwise, such questions may be directed to the chair of EBE EiRC, Prof Harro von Blottnitz, harro.vonblottnitz@uct.ac.za.

CONTENTS

OVERVIEW: ETHICS IN RESEARCH FOR UNDERGRADUATES

Why is it necessary to apply for research ethics clearance?

- Good scholarship requires that researchers consider any potential harmful impacts of their research, treat their data sources with respect, and recognise the contributions of other scholars fairly. The research ethics application process is intended to facilitate this.
- All final year research projects in EBE require research ethics clearance. These projects will not be examined without evidence that ethics clearance has been provided.

When should research ethics clearance be applied for?

- Research ethics clearance should be applied for as soon as the research method is clear.
- In the case of research involving human subjects, research ethics application should occur after survey instruments have been designed.

What information is necessary for research ethics applications?

- A covering note that: explains the purpose of the research to a non-expert in the field; identifies possible ethical issues; and describes how these issues will be addressed. Examples of possible ethical issues include: obtaining the informed consent of data sources; ensuring the anonymity of respondents; obtaining permission to use secondary datasets; and storing sensitive information. Guidance on what issues to consider can be found in the *EBE EiR Handbook* (downloadable from http://www.ebe.uct.ac.za/ebe/research/ethics1).
- A research proposal that identifies the research objectives and describes the method to be used in meeting these objectives.
- If human subjects are involved, the list of questions and the means of obtaining informed consent.
- An application form signed by the student and the supervisor. (The form is downloaded during the on-line submission process http://www.ebe.uct.ac.za/ebe/research/ethics1).

How is a research ethics application submitted?

- Follow the on-line submission instructions provided on the EBE EiR webpage http://www.ebe.uct.ac.za/ebe/research/ethics1).

Who provides research ethics clearance?

- For all undergraduate and honours degree research projects, approval is provided by the Head of Department (or delegated nominee).

OVERVIEW: ETHICS IN RESEARCH FOR POSTGRADUATES

Why is it necessary to apply for research ethics clearance?

- Good scholarship requires that researchers consider any potential harmful impacts of their research, treat their data sources with respect, and recognise the contributions of other scholars fairly. The research ethics application process is intended to facilitate this.
- All master and doctoral degree research in EBE requires research ethics clearance. Theses, dissertations and research projects will not be examined without evidence that ethics clearance has been provided.

When should research ethics clearance be applied for?

- Research ethics clearance should be applied for as soon as the research method is clear.
- In the case of research involving human subjects, research ethics application should occur after survey instruments have been designed.

What information is necessary for research ethics applications?

- A covering note that: explains the purpose of the research to a non-expert in the field; identifies possible ethical issues; and describes how these issues will be addressed. Examples of possible ethical issues include: obtaining the informed consent of data sources; ensuring the anonymity of respondents; obtaining permission to use secondary datasets; and storing sensitive information. Guidance on what issues to consider can be found in the *EBE EiR Handbook* (downloadable from http://www.ebe.uct.ac.za/ebe/research/ethics1).
- A research proposal that identifies the research objectives and describes the method to be used in meeting these objectives.
- If human subjects are involved, the list of questions and the means of obtaining informed consent.
- An application form signed by the student and the supervisor. (The form is downloaded during the on-line submission process http://www.ebe.uct.ac.za/ebe/research/ethics1).

How is a research ethics application submitted?

- Follow the on-line submission instructions provided on the EBE EiR webpage http://www.ebe.uct.ac.za/ebe/research/ethics1).

Who provides research ethics clearance?

- For all <120-credit dissertation research, and ≥120-credit dissertation research not involving human subjects, approval is provided by the Head of Department (or delegated nominee).
- For ≥120 credit dissertation research involving human subjects, approval is provided by the Chair of the EBE EiR Committee.
- For all doctoral degree research, approval is provided by the Chair of the EBE EiR Committee.
- Additional approval is required from the Executive Directors of Student Affairs and Human Resources, respectively, when the human subjects in research are UCT students and staff.
- If the research involves clinical tests on humans or animals, approval is provided by the Health Sciences EiR and Animal Ethics Committees.

OVERVIEW: ETHICS IN RESEARCH FOR ACADEMIC STAFF

Why is it necessary to apply for research ethics clearance or declare minimal risk?

- Good scholarship requires that researchers consider any potential harmful impacts of their research, treat their data sources with respect, and recognise the contributions of other scholars fairly. The minimal risk declaration (for research not involving human subjects) and research ethics application process (for research involving human subjects) are intended to facilitate this.
- All research undertaken by academic staff in EBE (as opposed to undertaken by supervised postgraduate students) requires evidence that research ethics issues have been considered.

When should research ethics clearance be applied for, or minimal risk declared?

- In the case of research not involving human subjects, minimal risk should be declared as soon as the research method is clear.
- In the case of research involving human subjects, ethics clearance should be applied for after survey instruments have been designed.

What information is necessary for minimal risk declaration?

- A covering note that: explains the purpose of the research to a non-expert in the field; identifies possible ethical issues; and describes how these issues will be addressed. Guidance on what ethical issues to consider can be found in the *EBE EiR Handbook* (downloadable from http://www.ebe.uct.ac.za/ebe/research/ethics1).

What information is necessary for research ethics applications?

- A covering note that: explains the purpose of the research to a non-expert in the field; identifies possible ethical issues; and describes how these issues will be addressed. Guidance on what ethical issues to consider can be found in the *EBE EiR Handbook* (downloadable from http://www.ebe.uct.ac.za/ebe/research/ethics1).
- A research proposal that identifies the research objectives and describes the method to be used in meeting these objectives.
- The survey instrument and the means of obtaining informed consent.
- An application form signed by the principal investigator. (The form is downloaded during the on-line submission process http://www.ebe.uct.ac.za/ebe/research/ethics1).

How is a research ethics application submitted or minimal risk declared?

- Follow the on-line instructions provided on the EBE EiR webpage http://www.ebe.uct.ac.za/ebe/research/ethics1).

Who provides research ethics clearance?

- For all staff research involving human subjects, approval is provided by the Chair of the EBE EiR Committee.
- Additional approval is required from the Executive Directors of Student Affairs and Human Resources, respectively, when the human subjects in research are UCT students and staff.
- If the research involves clinical tests on humans or animals, approval is provided by the Health Sciences EiR and Animal Ethics Committees.

PART I   RESEARCH ETHICS

Important:

- All research conducted in EBE requires evidence that research ethics issues have been considered

- There is an authorship guideline for EBE

- Conflicts of interest should be declared

- There is provision for expedited review

1   RESEARCH ETHICS

1.1   Ethics clearance procedures

All research must undergo ethics review (See PART II). The Faculty's **Ethics in Research Committee** (EiRC – see 0 Section 3) is responsible for assisting researchers, including students, to ensure that their proposed research meets the highest ethical standards.

1.1.1   Expedited Reviews
Sometimes an application for ethics clearance may be **expedited**.

1.1.2   Undergraduate research
The departmental EiRC representative (as the HOD's nominee) is the final authority for providing ethics clearance for all undergraduate research in a department including Honours or Final Year "capstone" projects. The departmental EiRC representative (as the HOD's nominee) will only consider an application once it has been signed off by the supervisor of the research of that undergraduate student. Supervisors should understand that signing off on an application for ethics clearance indicates taking responsibility for supervising the student in compiling the content of the application. It is critical that a student considers all the items discussed in PART III of this document.

1.1.3   Masters level and PhD students
Masters level and PhD students should complete an application for ethics clearance under the supervisor's guidance and submit it directly to the EiRC.

Masters level research that does not involve human subjects is handled in the same way as undergraduate research.

1.1.4   Enquiries
Questions regarding <u>procedures</u> of the application process may be directed to the administrator of the EBE EiRC. Questions regarding the <u>substance</u> of applications should be addressed to **supervisors** in the first instance if applicant is a student. Otherwise, such questions may be directed to the Chair of the EBE EiRC.

1.1.5   Contract research
Researchers who tender for contract research should note that the application for ethics clearance should be submitted <u>at the same time that the tender is submitted</u>. This practice serves to expedite matters so that unnecessary delays can be avoided.

Application forms must be downloaded at <u>http://www.ebe.uct.ac.za/ebe/research/ethics1</u>

1.2 Application procedure

(a) Proposals are submitted on-line to the EiRC Administrator.

The general requirements for the ethics clearance process include submission of:

- A covering note providing a summary of the research, and the ethical issues that arise from the research and how they are addressed.

- The completed and signed application form

- The research proposal which must address issues raised in PART III of this document. This will include details of methods to be used, and a statement explaining how data or sensitive information will be safely secured.

- A copy of the questionnaire to be used in the research (if the research relies on interviews).

- Consent form (if the research relies on interviews).

- Proof of permission from relevant authorities (if appropriate)

(b) Applications will be checked for completeness and distributed to EiRC members electronically. Incomplete applications will not be distributed.

(c) Complete applications will be considered by assigned members of the EiRC.

(d) At the Committee's discretion, applicants and supervisors will be invited to attend meetings at which proposals will be reviewed. This practice permits an early opportunity to address problems and queries that arise.

(e) Applicants will be advised by email of the Committee's decision.

(f) Applications that need to be re-worked should be re-submitted on-line.

2 RESPONSIBLE RESEARCH CONDUCT

Apart from obtaining research ethics clearance where appropriate, researchers should be mindful of the other aspects of responsible research conduct. When collaborating with colleagues or students, matters relating to ethical conduct should be discussed and clarified before the research work begins. This includes issues of authorship, avoiding plagiarism and other research misconduct.

2.1 Authorship guidelines

EBE has adopted the UCT Authorship Guidelines and these are included in PART VI of this document. Highlights from this policy are included below.

2.1.1 Definition of a publication
A *publication* is any document produced by a member of staff or student in the EBE Faculty, including but not limited to project reports (and interim project reports), monographs, peer-reviewed and non-peer reviewed articles and publication in electronic media.

2.1.2 Authorship and co-authorship
The EBE Faculty defines authorship as *substantial* participation in the writing of a publication. Substantial participation includes:

(a) writing;

(b) analysis *and* interpretation of data;

(c) drafting or revising the article critically for important intellectual content; and/or

(d) in appropriate instances of empirical research, conception and design.

Where substantial contributions (as defined above) are made by several persons to a common project, they will be *joint authors of the product*. Each author should have participated sufficiently in the work to take responsibility for appropriate portions of the content. One or more authors should take responsibility for the integrity of the work as a whole, from inception to published article.

Authors should be able to provide a description of what each contributed. All others who contributed to the work who are not authors should be named in the Acknowledgements, and what they did should be described.

2.1.3 Authorship agreement
Authorship is a matter that should be discussed between colleagues at an early stage in a project and reviewed whenever there are changes in participation. The project leader must initiate this discussion. The agreement must deal with the allocation of financial incentives resulting from publication. The agreement may be altered by mutual consent during the course of the project.

2.1.4   Student – staff-supervisor co-publication
The conditions listed in Section 2.1.2 above apply in the first instance. In the case of a co-authored publication by a student and her/his research supervisor that is substantially based on the student's dissertation or thesis the student will normally be the first author. This condition may be waived if the student plays little or no role in the preparation of the work for publication. In such instance, the student will be the second author.

2.1.5 Exclusions
(a) Participation solely in the acquisition of funding for the collection of data does not justify authorship.

(b) General supervision or leadership of a research group is not by itself sufficient for authorship.

(c) Mere institutional position, such as the Head of Department, does not justify authorship credit. Minor contributions to the research or to the writing for publications are appropriately acknowledged, such as in footnotes or in an introductory statement.

2.1.6 Acknowledgement of contribution to a research product
It is good practice to acknowledge those who contribute to a publication. The Faculty should follow an inclusive principle of acknowledgement as far as is possible. The significance of the contribution of those who are acknowledged should be signalled.

2.1.7 Disputes
Disputes concerning any aspects of authorship described above should in the first instance be resolved between the researchers concerned. Where this is not possible, the head of the department or research centre within which the principal researcher or student is based is responsible for attempting to facilitate a mediated settlement. If this mechanism fails, or where there is a conflict of interest, the matter may be referred to the EBE EiR Committee.

This Committee may:

- recommend the appointment of an independent arbitrator;

- facilitate a mediated settlement; or,

- where there is a conflict of interest, refer the matter to the University's Senate Ethics in Research Committee.

For the UCT **Conflict of Interest Policy** document, see http://www.uct.ac.za/about/policies/

2.2 Plagiarism guidelines

See UCT policies and guidelines regarding avoiding plagiarism at
http://www.uct.ac.za/about/policies/

2.3 Ethical and scholarly misconduct regarding research

Ethical and scholarly misconduct regarding research can take several forms, ranging from fraud and dishonesty (including plagiarism) to failing to adhere to protocols as approved. The University and the EBE Faculty expect impeccable ethical and scholarly standards to be adhered to by all researchers at or connected to the University. Misrepresentation of data constitutes a major breach of contract between a staff member and the University (see Staff Manual Ethical standards in research for staff on UCT conditions of service 1.1.2.2). The primary responsibility for the conduct of research for every project lies with the principal investigator or lead researcher.

The mechanism for handling breaches of research ethics codes and allegations of misconduct in research are stated in PART VII.

2.4 Conflict of interest

Committee members have a responsibility to serve the interests of the university and of the public generally. All decisions are to be made solely on the basis of a desire to promote the best interests of the university and the public and, in the case of research ethics related matters, the interests of research participants and researchers must be protected.

In research ethics a conflict of interest or of commitment may arise. A **conflict of interest** involves not only the direct, personal and pecuniary interests of the individual, but also those of members of his or her immediate family circle. A **conflict of commitment** may involve the time and investment expected from a staff member or student in ordinary university business, including teaching and learning, versus the time and investment available for doing the proposed research properly. Too little of the latter has potentially negative implications for the integrity of the research process and, especially when human participants are involved, can risk causing wrongs by wasting their time if the research cannot be completed properly.

See the UCT Conflict of Interest policy at http://www.uct.ac.za/about/policies/

3 EBE ETHICS IN RESEARCH COMMITTEE

3.1 Composition

- Chair: Appointed by the Dean
- The Dean of the Faculty (ex officio), or nominee
- The Deputy-Deans of the Faculty (ex officio), or nominees
- One representative elected from each academic department in the Faculty
- One representative from each of the EBE Student Council and the Post-Graduate Student Association, respectively
- An invited member with expertise in research ethics.

3.2 Terms of reference

- To take steps to ensure the highest ethical standards in research by members of the Faculty, and to protect human subjects in social and scientific research.

- To raise the consciousness of members of the Faculty regarding ethical standards in research.

- To review, in terms of ethical considerations, research applications (see 0) submitted by members of the Faculty, namely, student research, contract research and research activities undertaken by individual staff members, and to review compliance with approved research protocols.

- To provide assistance, upon request, to Heads of Department within the Faculty on matters relating to ethics in research, in particular, regarding complaints or concerns.

- To further the aims and objectives of the University Ethics in Research Committee insofar as they are applicable to research undertaken within the Faculty

PART II   RESEARCH ETHICS POLICY AND GUIDELINES

Important:

- All research that will involve the collection of data from human participants must be submitted to for review.

- Departmental EiRC representatives (as the HOD's nominee) are the final authority for providing ethics clearance for all undergraduate research in departments.

- The role of the EiRC is to guide and educate.

- No retrospective ethics clearances will be granted.

- Expedited reviews may be considered.

'Policy' is used here to indicate the system of administration of research ethics in the EBE Faculty, while 'Guidelines' means the procedures that should be followed and the matters that require consideration when making application for ethics clearance.

To be read in conjunction with the UCT Research Ethics Policy – Humans[1], the EBE Faculty Ethics in Research Handbook, especially the Frequently Asked Questions[2]

1   EBE FACULTY ETHICS IN RESEARCH POLICY[3]

- All research to be conducted in or under the auspices of the EBE Faculty that proposes to involve the collection of data from human participants must be submitted for review.

- The principal researcher has primary responsibility for ensuring that participants' well-being is considered and safeguarded. In the case of a student researcher, the supervisor is expected to provide guidance. All others involved in the project share this responsibility.

- Applications for ethics clearance should address all the matters stipulated in the application form so that the EiRC is able to understand clearly what is proposed and how it will be achieved.

- The primary role of the Ethics in Research Committee is educative rather than policing, flowing from the EiRC's responsibility for assisting and supporting researchers, including students, to ensure that their proposed research meets the highest ethical standards.

- The EiRC is authorised to review research proposals, to suggest or require amendments, and to decide whether to grant ethics clearance, in accordance with the policy outlined here, the UCT Code for Research involving Human Subjects (see http://www.uct.ac.za/about/policies/) and in accordance with the Ethics Guidelines of the EBE Faculty. In appropriate circumstances, the EiRC may consult with others who are especially qualified to represent the views of a participant population.

- The departmental EiRC representative (as the HOD's nominee) is the final authority for providing ethics clearance for all undergraduate research in a department.

---

[1] Available at http://www.uct.ac.za/about/policies/

[2] Available at http://www.ebe.uct.ac.za/ebe/research/ethics1

[3] Based on and borrowed from the Harvard University Statement of Policies and Procedures Governing the Use of Human Subjects in Research http://www.fas.harvard.edu.

- Members of the EiRC must not participate in the review of projects in which they are involved or have a conflicting interest.

2   EBE ETHICS IN RESEARCH GUIDELINES

- Research conducted in or under the auspices of the EBE Faculty must be submitted for review. **No data collection may begin unless clearance has been granted by the EiRC.**

    - On occasions more than one facultys' EiRC must review research proposals. For example, if research is intended with hospital or clinic patients, then the proposal must be submitted to the Health Sciences Faculty EiRC as well as to the EiRC of the EBE Faculty. This is because the Health Sciences Faculty has primary responsibility for hospital and clinic patients (inpatients and outpatients). It must consider, amongst other things, whether particular patients (e.g. HIV positive patients) may be over-researched, i.e. burdened by frequent requests for research participation. Applications may be submitted simultaneously and should so state.

    - Pilot research, i.e. preliminary work done towards establishing the feasibility of a more developed research project may not require ethics clearance. However, prudence dictates that some discussion with a member of the EiRC may take place to ensure that pilot data collection is not jeopardised in the event that such data is to be used later.

    - The final authority for providing ethics clearance for undergraduate students is devolved by the EiRC to the HOD who in turn delegates the responsibility to the departmental EiRC representative.

- **No retrospective ethics applications will be considered or ethics clearances granted by the EBE EiRC**. Retrospective applications will be handled by the office of the Dean of EBE, and will be treated in accordance with the UCT EBE Policy and Procedures for Breach of Research Ethics Codes (see Part VII of this document). An application will be treated as being retrospective if:

    - **In ALL cases**: The application has been lodged after field work, lab work, interviews, or other substantive research (excluding the research proposal) have been carried out.

    Additionally:

    - **In the case of MSc level research**: The application has been lodged 12 months after the date of registration.

    - **In the case of PhD level research**: the application has been lodged 18 months after the date of registration.

- Some research may be approved by expedited review. Expedited review means that the full review process may be completed by a shortened process so that the time from submission of the application to decision is shortened, e.g. where the research appears to expose participants to no more than minimal risk of harm. The normal application form must be completed and a motivation for expedited review submitted. The decision to expedite ethics clearance is made by the EiRC. Research involving children is not eligible for expedited review.

- The principal researcher has primary responsibility for determining whether the proposed research might expose participants to no more than minimal risk of harm. Possible harm includes foreseeable physical, legal, psychological or social harm, including emotional discomfort and stigmatisation. In making this determination, the researcher may seek advice from the EiRC.

- Sometimes disbursement of funding to support research or the granting of permission by an authority (e.g. government department) is dependent upon ethics clearance for the proposed research. The timing of these various processes can be complicated which means that applications for ethics clearance must be submitted with such time constraints in mind. When tendering for a research contract, it may be advisable that the ethics clearance application is submitted at the same time that the tender is put in to speed things up.

- Students conduct research under the supervision of a member of the Faculty, who must approve the academic merit of the proposal <u>before</u> it is submitted to the EiRC for ethics clearance. Students and staff must therefore anticipate the amount of time needed for this step to be completed.

- Masters and PhD students should complete an application for ethics clearance under the supervisor's guidance. By signing off on an application for ethics clearance, a supervisor takes responsibility for supervising the student(s) in compiling the content of the application.

PART III   GUIDELINES FOR APPLICATION FOR ETHICS CLEARANCE

Important:

- All research conducted at UCT requires ethics consideration

- Conflicts of interest should be declared

- There is provision for expedited review

If your research is making use of human subjects, you need to ensure that the proposal includes a discussion of the ethical issues involved in your proposed research and the measures that you will take to deal with any negative implications of these issues. You need to think through each of the points raised below, identify all potential issues, and deal with each in detail. Note that the application needs to deal with the points raised below. It is important that you read the UCT Code for Research Involving Human Subjects and the EBE Faculty Ethics Guidelines – you will not be able to properly complete your application if you have not carefully read these documents.

Remember that the application needs to be accompanied by your research proposal. The methodological section of the proposal needs to be complete. It is impossible to discuss ethical issues unless you have worked out in full the methodology (including research design and research methods) that will be used in the research.

When preparing your research proposal and ethics application, please do, and/or consider, the following:

1. Outline the proposed research highlighting its aims and objectives. Please include a brief summary of the purpose of the research, using non-technical language. Also include a statement of the research problem and how the project will address it.

2. Outline the research methodology including research design and methods that you propose to use (note that point 5 below asks more detailed questions regarding the sample, recruitment and research methods).

3. Specify the various types of information that will be collected in the course of the research:

   (a) personal and social information collected directly from participants;

   (b) identifiable information about people to be collected from available records;

   (c) anonymous information to be collected from available records;

   (d) literature, documents or archival material to be collected on individuals or groups.

4. How will you explain the research to participants and get their informed consent (this includes obtaining the consent from relevant institutions)? Attach copies of information sheet, consent form or script to be used for verbal consent (see exemplar in Appendix D). If participants are minors or otherwise lack capacity to consent to participation, from whom will you obtain permission (surrogate consent) for their participation? How will you obtain assent from the minors or other incapacitated participants? How will it be made clear to participants that they will participate in research and that they may withdraw at any time without reason?

5. How will you select and recruit research subjects, what methods will you use to engage with and obtain information from them, and what research instruments will you use?

   (a) How and where are participants recruited? Will they participate voluntarily or be selected? Explain how they will be selected and/or who will be asked to volunteer. What inducement is

offered? (Attach copy of letter, poster or advertisement, if any.) <u>Justify the involvement of vulnerable groups.</u>

    (b) Salient characteristics of participants – number who will participate, age range, sex, institutional affiliation, other special criteria. Describe the factors that may increase the vulnerability of participants or increase their susceptibility to harm – e.g. legal or social marginalization, members of hierarchical systems, etc.

    (c) Describe how permission has been or will be obtained from co-operating institution(s) – e.g. government department, school, hospital, corporation, prison, or other relevant organization (attach letters). Is approval of another EiRC required?

    (d) What do participants do or what is done to them or what information is gathered? (Attach copies of instructions, tests, questionnaires or interview guides to be used. <u>If these are not yet designed, then final approval cannot be granted now</u>.) How many times will observations, interviews, tests, etc be conducted with one participant? How long will participation take? Are interviews tape- or video recorded?

6. How will confidentiality and anonymity be ensured? At what stage will identifiers be removed from data? If data must remain linked (i.e. identifiers retained), please explain why.

7. Will the research participants be deliberately deceived in any way? If so, what is the nature of the deception? Is it likely to be significant to the participants? Is there any other way to conduct the research without using deception? If so, why have you elected to use deception? How will you explain to participants – after the research project is completed – that they were deceived?

8. What will be done with the research data on completion of the proposed research? Will research data (written or otherwise recorded) be destroyed at the end of the project? If not, where and in what format and for how long will they be stored? To what uses – research, demonstration, public dissemination, archiving – might they be put in future? How will participants' permission for further use of their data be obtained?

9. Explain in detail any potential harm that could befall the participants as a result of their participation in the research. You need to explain in detail how you propose to avoid, counteract or ameliorate this harm. Describe details of possible risk of harm to participants. What are the possible harms – physical, psychological, legal, professional, and/or social? Are the risks of harm necessary? What measures will be taken to minimize the risk of harm? In the event that harm materializes, what are your plans for addressing the problem? (e.g. training for assistants, referral for counselling etc). If risk of harm is anticipated to be no more than minimal, please state so here and in consent form.

10. What are the benefits of the proposed research for participants? How will participation in this research benefit participants? If participants will be 'debriefed' or receive feedback information about the research after the project's conclusion, how do you ensure the educative value of the process? (Include copies of debriefing or educational materials).

PART IV   EXEMPLAR OF INFORMED CONSENT DOCUMENT

[Heading] **INFORMATION SHEET & CONSENT FORM** – [name target group]

[Title of research project]

[Greeting/Introduction] - e.g.: Hello, my name is...and I am conducting research towards a [master/doctoral] degree at the University of Cape Town. I am researching [brief essentials of project] and would like to invite you to participate in the project.

[Subheading] - What the project is about.

[Explanation] - Briefly and in plain language explain the purpose of the research e.g., I am interested in finding out about ... I want to understand how ... I would like to interview people who...

[Clarify that participation is voluntary] - e.g., Please understand that you do not have to participate, i.e. your participation is voluntary. The choice to participate is yours alone. If you choose not to participate, there will be no negative consequence. If you choose to participate, but wish to withdraw at any time, you will be free to do so without negative consequence. However, I would be grateful if you would assist me by allowing me to interview you.

[Explain what is expected of participants] - Explain what participant would be asked to do; how much time; whether any costs (e.g. transport) involved; whether any payment/reimbursement available, etc. Note if recording of interview is intended, request permission specifically in document for this.

[Explain whether there will be any direct benefits to participant] – note that there hardly ever is.

[Explain the risk of harm to participants] - Explain what risk of harm might ensue, participants should have a reasonable idea about consequences of participation, e.g. discomfort, emotional upset, stigmatisation etc.

[Explain the level of permission required] – If applicable, let the participant state what they will allow to be used in the research.

[Anonymity and Confidentiality] - Explain whether/how anonymity will be preserved; how confidentiality will be maintained – note if focus groups are intended, there is a built-in weakness with regards to confidentiality

[Sharing and use of data] - Explain what will happen with data, whether/how any feedback to participants is possible – note that you *should* try to do this to make participation meaningful

Should you want supplemental information of the kinds of issues that could be considered, see http://www.who.int/rpc/research_ethics/informed_consent/en/, but please note that the exemplar above should be sufficient in most instances.

[**If signed consent is required**] Name of participant ……………………………Date …………..………

[**If signed consent is required**] Signature of participant ……………………………………….………

PART V   ETHICS IN RESEARCH CLEARANCE FAQs

This document is intended as a 'living' document that can be added to or changed as queries or issues arise. If your question does not appear below, please contact the administrator of the EBE EiRC.

There are three sections – Administrative matters, Substantive matters, and Ethics matters. In each section, the questions are listed alphabetically.

1   ADMINISTRATIVE MATTERS

1.1   Clearance from more than one EiRC?

For example, EBE students propose to use MBChB students as participants to test their understanding of human rights. Is ethics clearance from EBE EiRC sufficient?

Yes, but in addition to ethics clearance, permission to recruit students or staff members as research participants is required. (See below under Use of UCT students or staff members as participants.)

1.2   Do students' academic research projects require EiRC approval?

Yes, ethics clearance is required. Each project must have a supervisor who must oversee the completion of the documentation. Undergraduate students receive final clearance from their Departmental EiRC representative (as the HOD's nominee). For explanation of what defines a research project please see Section 2.10.

1.3   Is the ethics review application process onerous?

Not really – if the application is complete and properly explained, there is usually little delay in being able to grant approval. The EiRC does its best to turn applications around as fast as possible. Only rarely is a proposal rejected. In general, queries or requests for substantive detail arise when an application is incomplete or when the researcher has not demonstrated that he or she has considered the ethical implications of the chosen methodology or procedures or particular population.

1.4   What is the role of the EiRC's?

The EiRC is tasked with facilitating the highest ethical standards in research conducted under the auspices of the EBE Faculty.

The EiRC's first role is as a research ethics clearing committee that reviews and grants ethics clearance. The objective is not to delay or prevent research but rather to facilitate high quality research, to ensure adequate protection of participants and researchers, as well as the institution. Engaging with this form of peer review process is part of the enterprise to make us better researchers and to facilitate and sustain excellence in research endeavours.

The EiRC also has an educative role in the Faculty regarding research ethics training and consultations. Researchers are encouraged to consult with a member of the EiRC before submitting a proposal, especially when in doubt about particular aspects. The application process seeks to prompt researchers to consider all the necessary aspects for ethical research when drawing up a research proposal.

1.5   Where do I get the EiR application forms?

They are available from http://www.ebe.uct.ac.za/ebe/research/ethics1. Detailed submission instructions are provided on the site.

1.6   Why is ethics clearance necessary?

Ethics clearance is necessary for legal and moral reasons. The National Health Act requires that all research involving human participants undergoes ethics review. This requirement is frequently viewed with suspicion, especially by social science researchers who do qualitative research and believe that this type of research should not require ethics clearance. Consequently, ethics clearance is regarded as unwarranted interference.

For more on this topic, see Wassenaar & Mamotte 'Ethical issues and ethics reviews in social science research' (2008) *Social Science & Medicine* 1-11 and Mamotte & Wassenaar 'Ethics review in a developing country: a survey of South African social scientists' experiences' (2000) *Journal of Empirical Research on Human Research Ethics* 69-78. See also Terre Blanche, Durrheim & Painter (eds) (2006) *Research in Practice: applied methods for the social sciences* 2nd rev ed. UCT Press.

Additional assistance is available at http://www.hsrc.ac.za in the HSRC Code of Research Ethics which is organized on the basis of four principles: the principle of respect and protection; the principle of transparency; the principle of scientific and academic professionalism; and the principle of accountability.

2   SUBSTANTIVE MATTERS

2.1   What is "minimal harm"?

"Minimal harm" is usually defined as "no more than the risk of harm experienced day to day and routinely". In health care this could be viewed as "routine medical, dental, psychological investigations" and for other contexts, "routine educational activities", etc. The idea is to give the potential participant some indication of whether there is an anticipated risk of harm and if so what sort might be expected – and whether it is unusual, etc.

2.2   Access to government departments or NGOs?

In addition to ethics clearance, access must be negotiated with the department or NGO concerned for permission to access documentation or personnel. Documents that are in the public domain do not require such permission. The department or NGO is entitled to review and approve (or not) the proposed research. To that end, the researcher must supply a clear and explicit explanation of the nature, purpose and intent of the research, including the aims, objectives, methodology, destiny of the findings, etc. In short, the research proposal should be submitted. This process is separate from the ethics clearance process. Usually, it is advantageous to have ethics clearance before submitting the proposal to the department or NGO.

2.3   Can EiR approval be shared with colleagues working on similar projects?

No, approval is specific to particular research projects.

2.4   Can student research involve collecting personal data from other students?

If the informed consent process is satisfactory, confidentiality is adequately protected and EiRC approval is granted (if necessary), then this can happen. But such research should be discouraged when data are collected from peers or from students in the class of a researcher because of the potential for difficulties inherent in revealing personal information to peers and undue pressure.

2.5   What is deceptive research?

This occurs when good research outcomes are unlikely if the participants know what is really being investigated because they are highly likely to adapt their behaviour or responses, etc.

The research design will therefore include information (also in the informed consent documentation) that is not false but does not tell the whole story. It is usually expected that at the end of the research there should be a debriefing if possible to tell the participants that there was some deception, explain why and thank for their helpful participation, etc. See also "Covert" research in this FAQ.

2.6   What is covert research?

Covert research, i.e. research that is conducted without participants' knowledge or informed consent, should be avoided as far as possible because it breaches the rights and interests of human research participants in a blatant and fundamental manner. Nevertheless, in exceptional circumstances, it is possible that gathering particular data is so important and potentially valuable that this consideration outweighs the interests of the participants. In such cases, it is possible that covert methodology may be approved.

The research proposal must justify and explain fully why the design including deception or covert research is desirable. The explanation must put the EiRC in the position to evaluate whether the design is justifiable. For example, it may be thought that obtaining informed consent is practically difficult or nearly impossible. The justification would have to demonstrate that the benefit from the research outweighs the nature and risk of harm to participants caused by the deception. The justification would also have to describe how participants would be harmed if they were to give informed consent; what the risk of harm would be; what risk of harm might exist for the researcher if informed consent is requested. The proposal must also describe how the participants will be debriefed after the period of research and how the researcher will deal with the possibly negative reaction from participants who feel aggrieved at having been deceived.

2.7   How should ethnographic research be treated?

Many researchers complain that the format of the application form precludes adequate description of planned ethnographic research.

On the understanding that the primary data-gathering tool for ethnographers is the relationships forged with the people whose 'life world' is being studied, the description of the research would describe the design and the methods by which their life world is anticipated to be explored and analysed. Thus, it may be that the researcher will observe, tape-record, take notes, take pictures, ask various sorts of questions (many unknown at the start of the research, etc.

From the point of view of the EiRC, the description should include a discussion on how the individual interests of the persons under study would be protected. This discussion should be sufficiently detailed to allow the EiRC to understand what is intended and how ethical obligations will be met. Are systemic harms likely to arise from the findings of the project? How will data be analysed? Is there a theoretical model? Will the community know the research is occurring? I.e., will the researcher 'infiltrate' the community or be there with permission and full co-operation of at least the leadership of the community? Will individuals give permission for tape-recording or photography? Will the researcher explain the destiny of the photographs? If publication is intended, how will the privacy interest of the individual be protected? What measures to protect confidentiality will be in place? Will the findings be made known to the community?

Regarding risks of harm and likelihood of possible direct benefit for individual participants, it may be difficult to anticipate these in detail. However, if the purpose of the study is to understand relationships that involve potentially embarrassing or illegal activities, especially in relation to children, the researcher has an obligation to anticipate how these might be dealt with in the event of their occurrence. For example, there is a legal obligation to report child and sexual abuse. Consequently, no matter what the methodology, the researcher must have a

plan as to how this obligation will be met or dealt with in the course of the research. Note also that harm can include wrongs; i.e. a person may not be harmed by the research but may nevertheless be wronged. Wrongs should be avoided and harms must be minimised.

2.8   Should preliminary work or pilot study receive ethics clearance?

Must preliminary work undergo ethics review prior to being undertaken? In general terms, preliminary work during which a literature review, tentative research plans and contacts with possible participants are made, does not require ethics review. For example, certain disciplines might speak to informants in the preparation phase of putting a proposal together and then use these data to inform the structure of the research project. If in doubt, please consult with a member of the EiRC. A pilot study, on the other hand, may need more careful consideration and review if it could be seen as an independent piece of work that may or not lead to a more extensive research project.

2.9   Can UCT students or staff members be used as participants?

In addition to ethics clearance for the specific project, permission to access UCT student or staff information is required. For students, permission must be sought from the Executive Director: Student Affairs to access students and from the Executive Director: Human Resource for staff members. Thus, ethics clearance and permission for access are separate but interdependent processes.

2.10   What constitutes 'research'?

A systematic investigation designed to develop or to contribute to generalizable knowledge and conducted by means of surveys, interviews, focus groups, ethnographic observations, record reviews, etc.

2.11   What is risk of harm?

Harm can be physical, social or psychological, amongst others. Harm may flow from leaks in confidentiality, stress to participants, stigmatisation or by a participant making a statement that can upset superiors etc.

3   ETHICAL MATTERS

3.1   What if there is a conflict of interest within the EiRC?

In accordance with the UCT Conflicts of Interest: Principles, Policy and Rules document (at http://www.uct.ac.za/downloads/uct.ac.za/about/policies/conflictsofinterest.pdf) the following fundamental principles and requirements serve as guidelines in dealing with conflict of interest issues.

Committee members have a responsibility to serve the interests of the university and of the public generally. All decisions are to be made solely on the basis of a desire to promote the best interests of the university and the public.

Complete integrity of approach and of fairness in procedures is essential. The principles should not just be observed but should be _seen_ to be observed. In many instances, _perceptions_ play an important role in creating the impression of the existence of a dubious conflict of interest. The university's integrity is to be protected at all times.

Transparency in the form of meticulous disclosure, adherence to prescribed procedures and precise recording of proceedings as well as the reason(s) for arriving at decisions is vital. In defining what constitutes a conflict of interest and in evaluating its significance in particular contexts, a balance should be sought between potentially contradictory considerations.

In the context of the EiRC and ethics clearance applications, a conflict of interest or of commitment may arise. A **conflict of interest** involves not only the direct, personal and pecuniary interests of the individual, but also those of members of his or her immediate family circle. A **conflict of commitment** may involve the time and investment expected from a staff member or student in ordinary university business, including teaching and learning, versus the time and investment available for doing the proposed research properly.

How to know whether a conflict of interest exists? It may be useful to ask yourself the following questions about relationships or interests:

- Would I be willing to have the proposed arrangements generally known?

- What would my research participants think about this arrangement?

- What would the public think?

- How would I feel if the relationship was disclosed through the media?

- What would my colleagues think about the arrangement?

When a member of the EiRC has an interest in research proposals before the EiRC, he or she must disclose this fact and recuse him or herself from participating in discussion and decision-making about those proposals.

When a researcher (staff member or student) has an interest in the research over and above the ordinary expected research interest, he or she must disclose this and indicate how he or she plans to manage the conflict of interest.

In all cases and in line with the educative and facilitative role of the committee, the EiRC may invite those persons who have declared a conflict of interest to attend a meeting to answer questions for clarification.

3.2   How should filming or recording be treated?

Consent documents must explain clearly and explicitly that visual or audio recording is desired. Participants must be requested to give permission for this to happen, i.e. not just be told that it will happen. If publication of research data is likely and it can be reasonably foreseen that pictures or other examples of visual media would be included, then this must also be explained and specific permission for such publication should be sought, having explained the possible harms that might flow from such publication.

3.3   How does confidentiality differ from anonymity?

Confidentiality concerns the data that are collected. The privacy interest of the participant must be protected by ensuring that data are kept securely so that persons not involved with the research are not able to find out the participant's identity.

Anonymity is part of research design – nobody can identify the source of the particular data, not even the researcher. **Anonymising**, on the other hand, is the process of removing identifying detail so that data cannot easily be linked to participation. This process is commonly used in research in order to protect the privacy and confidentiality interests of participants. Furthermore, sometimes it may be necessary to retain the means to link data to participants. In instances of anonymising, care must be taken to keep the key to re-linking separately and securely so that 'unauthorised' persons are not able to gain access.

Certain types of data collection methods require good confidentiality measures, including audio recordings, demographic data including descriptions of a small category (e.g. female Deans at UCT), qualitative studies of few participants with highly individual information, and the use of random identity numbers on participants' data with a separate name/number list.

Researchers must protect confidentiality of data gathered during research to protect the integrity of the research, the privacy of the research participants and to protect sensitive information obtained in research, teaching, practice and service. Information obtained in the course of research that may reveal the identity of a participant, is confidential unless the participant agrees to its release. Agreement to release of personal information should be sought only when the participant is properly informed about possible harms that may occur.

Confidential information provided by research participants, employees, clients or others must be treated as confidential even if there is no legal protection or privilege. The obligation to maintain confidentiality extends to members of the research or training teams and collaborating organizations who have access to the information. To ensure that access to confidential information is restricted, the principal researcher is responsible for ensuring that researchers, administrators and other relevant parties adequately trained and instructed to take the steps necessary to protect confidentiality.

When gathering confidential information, long-term uses thereof, including its potential placement in public archives or examination thereof by other researchers or practitioners, must be considered. Some information is permanently embargoed, i.e. it may not be released in public at all; other information is partly embargoed, i.e. the actual data may not be made public but may be indexed or analysed to show trends.

Guarantees of complete confidentiality should not be given lightly. In certain circumstances, statutory obligations to report e.g. child abuse, sexual abuse, etc will override a guarantee of confidentiality.

It cannot be assured that other participants in a focus group will maintain absolute confidentiality. However, confidentiality can be encouraged by requesting focus group participants to sign a pledge of confidentiality as part of the consent process for participation.

Anonymity can be ensured by appropriate design of the project, i.e. data can be collected without identifiers. Research reports can preserve anonymity by properly disguising the identity of participants and their localities.

3.4   What is informed consent?

Participants must give informed consent prior to participating in research as a matter of ethics. Consent does not have to be in writing, but the information given to the prospective participant to help him or her decide whether to participate should be in writing. Exceptions might include an invitation to participate in a simple survey that elicits only a small uncomplicated amount of information.

Prospective participants must be able to choose voluntarily, free from undue influence or subtle pressure, whether to participate. In particular, researchers should recognize the possibility of pressure that may derive from researchers' expertise or authority and should take this into account when designing participant information and consent documentation.

Informed choosing can occur only when researchers explain, in language understandable to the potential participants, the nature of the research and what will be expected of them; that they will participate in research; that they are free to choose to participate or to decline to participate; that if they choose to participate, they are free to withdraw from participation at any time without reason or consequent penalty; what nature and risk of harm are likely to occur, e.g. discomfort, emotional upset or trauma; what limitations on confidentiality might exist, e.g. in focus groups, because of statutory reporting obligations or because of social stigma; what benefit participation is likely to bring to the participants; and any other aspect about which a participant ought to enquire.

The objective is to place the potential participant in a position where he or she can make a responsible choice about whether to participate. The standard for disclosure is one of

reasonableness and fairness so that foreseeable consequences of participation can be discussed before the participant is enrolled. The prospective participant should be permitted sufficient time to consider his or her choice, including time for consultation with others e.g. where the proposed research is sensitive or complicated.

See also: http://www.who.int/rpc/research_ethics/informed_consent/en/ for detailed information (including samples) on how to ensure informed consent is achieved for your research.

3.5   What are mandatory reporting obligations for researchers?

Researchers who work with children must plan to accommodate the mandatory reporting obligation of sexual abuse of children in terms of the Criminal Law (Sexual Offences and Related Matter) Amendment Act of 2007 (Act No 32 of 2007). This act stipulates that when a child or any other person reports the abuse of a child, the relevant person is legally obliged to report the abuse to the police. This obligation replaces previous legislation where reporting to social workers or the police was possible. A report by a child includes disclosure by the child (specific child/specific offender) in the course of research. In appropriate contexts, thus, potential participants must be informed that confidentiality cannot be assured e.g. that there are statutory reporting obligations. This makes research with children about sexual matters difficult as the likelihood of encountering abuse is probably quite high. Researchers must thus consider how the reporting obligation will be handled and devise a standard operating procedure to guide those involved in the research.

3.6   How should minors in research be treated?

In principle, minors cannot give informed consent because they are legally incapacitated. Consequently, parental or guardian permission is required. However, sometimes no parent or guardian exists or is available, but socially relevant and important research is proposed, e.g. with street children or children orphaned by AIDS. Other times, research may be possible only if minors are permitted to agree independently to participate i.e. without the direct and specific permission of a parent or guardian.

If no more than minimal risk of harm is envisaged (i.e. no more than ordinary daily activities might hold out), and some direct benefit to the minor participants can be expected, then it might be possible to grant clearance for the minors to agree independently, especially where survey or questionnaire research is envisaged.

Researchers must explain in the proposal why the research cannot be conducted with adult populations; how the vulnerability of the minors will be protected; what nature and degree of risk of harm might occur; whether the community concerned is sympathetic to the notion that the minors can agree independently. This latter aspect is a question of fact to be established by the researcher in the preparatory phase of research. For example, parents of school-going children, social workers in the community, religious and community leaders can be consulted about whether it would be acceptable to approach minors directly via clinics or schools. Bear in mind that permission from clinic and school authorities would also be required.

3.7   How can I raise concerns?

Anyone who has concerns about research being carried out or planned or who wishes to raise any queries, should communicate with a member of the EiRC. Confidentiality is respected and, where possible, anonymity prevails.

The mechanism for reporting breaches of research ethics codes and allegations of misconduct in research are stated in PART VII.

3.8 What happens if unexpected problems arise during the research?

Ethics clearance is granted on the understanding that any unanticipated problems and risks, changes in the research plan, and any harm (social, psychological or physical) are reported immediately to the Departmental EiRC representative (as the HOD's nominee) who should inform both their HOD as well as the Chair of the EBE EiRC.

3.9 Who must report problems during the research?

The principal investigator (and where appropriate the supervisor or convenor) must report promptly any serious or continuing non-compliance with university policies.

PART VI   UCT AUTHORSHIP PRACTICES POLICY

Adopted and approved by Senate: see PC 01/2011

1   INTRODUCTION

The University of Cape Town is ethically and legally obliged to require of researchers that they publish scholarly and scientific results of research conducted under its auspices. Generally speaking, placing these research results in the public domain is an important facet of being a socially responsive institution. On the one hand, publication of research ensures that the public is informed and can act on such results as appropriate, while, on the other, further research that builds on reported results is made possible. Publication of scholarly and scientific research results means that the results should be made accessible in the manner consistent with the relevant standards of publication.

Publication must give appropriate credit to all authors for their roles in the research. Authorship allocates credit to those involved in the research and also allocates responsibility for the integrity of the research and its publication. Authorship practices should reflect the integrity of the research process by honestly indicating the actual contributions to the publication. The reputation of both the institution and individual researchers is negatively affected by poor authorship practices. When more than one person is involved in research, an ethical judgment must be made as to who should be included as an author and as to the sequence of names of the authors on the publication.

The distinction between disputes regarding authorship credit and allegations of professional or scientific misconduct, including plagiarism and fraud, must be clearly maintained. Many allegations made under the mantle of misconduct actually stem from and involve disputes over authorship.

There are two main methods of allocating authorship credit: the traditional ways of allocating authorship amongst co-authors, with conventions that may, e.g. vary the sequence of names in particular disciplines, on the one hand, and the Contributor-Guarantor Model, on the other.[4]

Which method is used does not seem to be important, so long as core values are adhered to. However, for the sake of consistency and for maintaining an easily accessible benchmark, the recommendation is for the traditional allocation of authorship credit model to be retained at the University of Cape Town, subject to appropriate variations as demanded by particular disciplines.

2   CORE VALUES

The governing **ethical values** underpinning this guideline are **justice**, made manifest by processes that foster the **principles of fairness, transparency and reasonableness**; and **beneficence**, to be understood as the obligation not to harm anyone and to help others further their important and legitimate interests.

---

[4] The latter method has been adopted increasingly especially in the UK by journals like The Lancet and the British Medical Journal; while the former continues to prevail in USA and elsewhere. Some US journals appear to have adopted a compromise approach, e.g. JAMA and Annals of Internal Medicine. The revised Harvard guidelines also take a combined approach.

3 RESPONSIBILITIES AND EXPECTATIONS

This guideline seeks to offer broad guidance on authorship matters across the university. It is accepted that the guideline can provide only general indications of expected standards of professional conduct rather than rigid rules.

Nevertheless, the guideline is **prescriptive** to the extent that

- It requires researchers, especially principal investigators and research team leaders, to set a positive example by their actions and behaviour;

- It requires researchers to comply with the principles of fairness, transparency and reasonableness; and to be sensitive to social, cultural and ethical issues that have a bearing on their research;

- It requires researchers to strive for the highest levels of integrity and professionalism;

- It requires researchers to take responsibility and act in accordance with that responsibility when conducting or supervising research, including deliberating on matters concerning authorship;

- It requires researchers, including trainees, to familiarize themselves with the principles that govern good research conduct including those that pertain to authorship;

- It requires the senior researcher(s) involved with a research project to take responsibility for anticipating possible disagreements concerning authorship credit and to initiate conversations on the matter before students and other participants are permitted to invest substantial time on the project;

- It places a special obligation on senior staff members to avoid co-authorship on papers generated from independent work by their junior colleagues or students; co-authorship should be allocated only accordance with the eligibility principles for authorship;

- It requires the allocation of responsibilities amongst researchers to be commensurate with their skill and training.

4 PRINCIPLES FOR JUDGING ELIGIBILITY FOR AUTHORSHIP

- Each person who makes a meaningful contribution to the research project should be credited appropriately.

- An author is someone who makes a **significant or substantial contribution** to the production of the publication. The precise meaning of 'significant or substantial contribution' may be discipline-specific but is commonly understood as requiring that **1) each author should have participated in formulating the research problem, or analysing and interpreting the data or have made other substantial scholarly effort or a combination of these; <u>and/or</u> 2) have participated in writing the paper; <u>and</u> 3) should have approved the final version for publication and be prepared to defend the publication against criticisms.**

- The weight accorded to each of these components may vary according to the scholarly discipline or scientific field. Various conventions and customs exist and may be discipline-specific.

- A co-author does not have to be a current member of staff or student in order to retain allocation of or to be allocated authorship credit.

- Co-authors must be informed of and understand the conventions regarding sequence of names and agree in advance, i.e. as early as possible in the research process, to the assignment of names in the sequence.

- In the case of interdisciplinary and inter-institutional research, the senior researcher(s) have a special responsibility to ensure that discussions about authorship matters and possible differences in conventions are initiated early and with all researchers that are involved.

- None of rank, position, patronage, technical assistance, provision of research materials or facilities by itself is a criterion for authorship. Gift authorship, honorary or courtesy authorship is also unacceptable for being inconsistent with the governing values and principles of the guideline.

- Provision of funding alone for a research group is not a criterion for authorship.

- Any person who does not meet the eligibility criteria but who has made other substantial contributions should be acknowledged in the publication. The manner of acknowledgement should occur according to the publication standards of the particular discipline.

5   DISPUTE RESOLUTION MECHANISMS

- Each faculty, department, division, unit or research team (as the case may be) must have a dispute resolution mechanism, described in writing and made easily accessible to all researchers.

- The dispute resolution mechanism must provide for a graduated method of dealing with disputes about authorship; i.e. the first level should be that co-authors are expected to sort the dispute out amongst themselves. Failing resolution at this level, the matter must be referred upwards to the head of the research team, unit, division, department, or faculty (as the case may be) or to the Faculty Research Committee who should use the criteria as outlined in this guideline to attempt to resolve the dispute. Where a disputant is such a head, the matter must be referred upwards. Failing resolution at this level, the matter must be referred upwards to the University Research Committee who likewise should use the criteria as outlined in this guideline to resolve the dispute. Thereafter, if the matter remains unresolved, the University Research Committee must have the power to refer the matter to arbitration. The composition of the arbitration board is to be decided by the University Research Committee in consultation with the Senior Executive Committee of the University. The finding of the arbitration board is final. Any member of the arbitration board involved in attempted resolution of the dispute prior to consideration by the arbitration board will recuse him or herself.

- In addition, each faculty, department, division, unit (as the case may be) must have a complaints process, described in writing and made easily accessible, especially to student and junior staff researchers.

- The complaints process should be used when a student or junior staff member thinks s/he has been unfairly treated insofar as allocation of authorship credit is concerned.

- The complaints process should include protection in the form of utmost confidentiality for the student or junior staff member who lodges a complaint.

- The complaints process should include recourse to someone other than the supervisor of the student, in the event that the complaint concerns conduct of the supervisor.

6   PRACTICAL AND PROCEDURAL CONSIDERATIONS

Clear and careful planning and communication are central to the ethical research process, including the allocation of authorship credit and responsibility.

Most misunderstandings and resultant recriminations can be avoided if clear and fair communication occurs as part of the early stages of the collaborative research process.

It is expected thus that the appropriate practice is to deal with issues of authorship at the earliest practical stage of a research project. This kind of practice allows for early clarification of roles and minimising of (possible) disappointments amongst participants.

Discussion of authorship credit and responsibility should include questions like:

- Who will be named as an author or contributor if the research results are submitted for publication or presentation?

- What sequence of names is envisaged? The decision should be made by the co-authors; if disagreement persists, the senior or lead author must decide.

- What are responsibilities and expectations for each contributor?

- Are there intellectual property (IP) or confidentiality matters that may affect publication?

- When is the next meeting to discuss authorship matters? It is prudent to anticipate that personal circumstances may change e.g. birth, death, divorce, which may necessitate appropriate changes to authorship arrangements.

It should be noted that the question of determining authorship of a publication is completely separate from that of determining inventorship of an invention described or discussed in the publication. A person named as an author in a publication will not necessarily be an inventor for purposes of determining inventorship. Conversely and inventor will not necessarily be an author on a paper describing the invention.

One author must be designated as corresponding, senior or lead author. This role carries the responsibility of vouching for the integrity of the research process and the publication of the research as a whole. The role includes the responsibility for ensuring that all co-authors who meet the eligibility criteria are included and agree to be included; for communicating with the publisher and the other co-authors about the progress of review and publication; about any changes in co-authorship; about ensuring that all listed authors have approved the submitted version of the manuscript.

It is recommended that a written record of the authorship credit discussion and agreement be maintained.

Discipline-specific conventions, professional association and research journal conventions regarding variations to the usual conventions must be dealt with as early as practicable in the research process. **At no time, however, should the conventions be permitted to override the core values of justice and beneficence.**

It is recommended that each faculty, department, division, unit or research team (as the case may be) draws up a set of **processes**, especially in relation to **collaborative staff/student publications**, that will clarify expectations concerning authorship for each student and staff member.

The **duality of the supervisor/researcher role** for staff members should be explicitly dealt with. For example, on the one hand, the staff member is obliged to assist the student to grow academically which would entail encouragement, mentoring and even possible co-authorship; on the other, the staff member has an obligation to present the student honestly and fairly to the research community, which means that a student's skills and abilities must not be misrepresented.

It is strongly recommended that each faculty, department, division, unit or research group (as the case may be) facilitates **regular discussion of hypothetical or real examples of difficult**

cases of authorship credit so that good research practice is fostered and shared understanding of difficult situations is promoted.

It is strongly recommended that each faculty, department, division, unit or research team (as the case may be) undertakes **regular revision of their guidelines and procedures** (at minimum this should happen every three years) to keep them up to date and in line with changing practices.

This policy is indebted in part to authorship policies from the following institutions:

- British Sociological Association;

- Duke University;

- Harvard University;

- Michigan State University;

- Murdoch University, Perth Australia;

- Stanford University;

- University of Pennsylvania;

- University of Pittsburgh;

- Yale University, most of which incorporate authorship principles developed by the International Committee of Medical Journal Editors (ICMJE).

Further assistance was gleaned from:

- Fine, Mark A and Lawrence A Kurdek 'Reflections on Determining Authorship Credit and Authorship Order on faculty-student Collaborations' *American Psychologist* (1993) 11, 1141-1147.

- Gawrylewski, Andrea 'Bringing Order to Authorship: How to resolve authorship disputes – and avoid them altogether' *The Scientist* Vol 21, 91.

- Jones, Anne Hudson 'Can Authorship Policies Help Prevent Scientific Misconduct? What Role for Scientific Societies?' *Science and Engineering Ethics* (2003) **9**, 243-256.

- Murray, Bridget 'The Authorship dilemma: who gets credit for what?' *APA Online* (1998) 29 number 12 http://www.apa.org/monitor/dec98/credit.html [2008/07/23].

PART VII UCT EBE POLICY AND PROCEDURES FOR BREACH OF RESEARCH ETHICS CODES AND ALLEGATIONS OF MISCONDUCT IN RESEARCH

1 INTRODUCTION

The UCT Policy and Procedures for Breach of Research Ethics Codes and Allegations of Misconduct in Research, the UCT Authorship Practices Policy, the UCT Policy on Conflict of Interest, the UCT Research Ethics Code for Research Involving Human Participants and the UCT Research Ethics Code for Use of Animals in Research and Teaching, the UCT Use of Non-Human Primates in Research Policy, the Policy for Avoiding Plagiarism, and the [DRAFT] Whistle-blowing Policy together with the Faculty-level Codes, Policies and Standard Operating Procedures (hereafter all referred to as 'the Codes') describe the principles and practices for encouraging responsible conduct of research at UCT. This document must be read with above Codes.

Misconduct or inappropriate behaviour in research is a serious matter. Its implications have the potential for harm that goes beyond the immediate parties. If proven, misconduct in research has negative implications for the researcher, the institution, funding bodies, journal publishers as well as colleagues, students and human research participants. In the case of misconduct in research involving animals, prosecution in terms of the Animals Protection Act[5] is also possible.

The research enterprise is inherently complex. Consequently, processes and procedures for dealing with allegations of misconduct or inappropriate behaviour must be clear and consistent. Investigation of allegations must take place in accordance with the highest standards of integrity, fairness, due process and reasonableness. Persons who are tasked with investigating allegations must act with utmost integrity and sensitivity.

This Policy and Procedures document[6] applies to all teaching staff, researchers and other staff members of the Faculty as well as students, postdoctoral fellows and research associates, honorary research associates, visiting scholars, Faculty staff on sabbatical leave or on leave without remuneration, and adjunct staff. If the respondent has left UCT, the procedures may nevertheless be used to determine the culpability of the respondent.

The purpose of the policy is:

(a) To provide the basis for uniform procedures for dealing with instances of alleged or apparent misconduct within the Faculty.

---

[5] Act No 71 of 1962

[6] This document has drawn on the Australian Code for the Responsible Conduct of Research Part B © Australian Government 2007 www.nhmrc.gov.au; the University of Michigan Standard Practice Guide: Policy Statement on the Integrity of Scholarship and Procedures for Investigating Allegations of Misconduct in the Pursuit of Scholarship and Research 2009 www.drda.umich.edu/policies/um/integrity.html; Harvard Medical School Principles and Procedures for Dealing with Allegations of Faculty Misconduct www.hms.harvard.edu/public/coi/policy/misconduct.html; Northwestern University Policy for Reviewing Alleged Research Misconduct www.research.northwestern.edu/ori; Keith-Spiegel, Sieber & Koocher *Responding to Research Wrongdoing: a user-friendly guide* 2010 http://www.ethicsresearch.com/freeresources/rrwresearchwrongdoing.html; UK Research Integrity Office http://www.ukrio.org/ukR10htre/UKRIO-Procedure-for-the-Investigation-of-Misconduct-in-Research2.pdf; Research Councils UK 2011 RCUK Policy and Code of Conduct on the Governance of Good Research Conduct 'Integrity, Clarity and Good Management' http://www.rcuk.ac.uk ; Stellenbosch University 2011 'Procedure for the Investigation of Research Misconduct at Stellenbosch University'.

(b) To adhere to University policy and principles relating to the inquiry into and investigation of alleged or apparent misconduct and to inquire into all instances of alleged and apparent misconduct promptly and fairly.

(c) To support the work of the Faculty to ensure that its research is conducted with integrity consistent with high scholarly standards for ethics and behaviour.

2   PRINCIPLES

The Faculty endorses following principles that underpin university policy in regard to allegations of research misconduct or scholarly misbehaviour.

1. The Faculty believes in the importance of **impeccable ethical standards** in teaching, research, and clinical activities to all researchers at UCT and to the entire institution

2. that **reporting** suspected research misconduct is a **shared and serious responsibility** of all members of UCT

3. that the University has a **responsibility to respond** to credible reports of allegations of research misconduct

4. that the integrity of teaching, research and clinical activities at UCT requires that allegations of research misconduct or scholarly misbehaviour must be dealt with **equitably, confidentially and as expeditiously as possible**, taking care to provide opportunities for all interested persons to be heard

5. that the **procedures** for dealing with alleged research misconduct or inappropriate scholarly behaviour must be **accessible, understandable, fair and expeditious**

6. that the University has a **responsibility to protect the rights and reputations of all** individuals, including the person against whom an allegation is made (respondent) and the person who makes the allegation (complainant)

7. that persons who are requested to participate in investigations must do so with integrity, objectivity and without conflict of interest

8. that **proven research misconduct** is dealt with in terms of **existing university procedures**.

3   UNACCEPTABLE CONDUCT

Unacceptable conduct or research misconduct includes but is not limited to:

1. **Fabrication** – deliberate creation of false data, including documentation and participant consent, dishonesty in reporting results, in collecting or analysing data, or omission of conflicting data

2. **Falsification** – deliberate misrepresentation of research including progress in research or inappropriate adjustment and/or selection of data, imagery, results and/or consents, or undisclosed duplication of publication, or inappropriate claims to authorship or attribution of work contrary to the UCT Authorship Practices Policy

3. **Plagiarism** – misappropriation or use of someone else's work, ideas, results, methods or intellectual property without acknowledgement or permission

4. **Abuse of confidentiality** – taking or releasing the ideas or data of others which were shared with the legitimate expectation of confidentiality, e.g. taking ideas from others' grant proposals, award applications, or manuscripts for publication when tasked with reviewing same

5. **Breach of research ethics codes or other regulatory requirements** – failure to obtain required approval(s) or to adhere to research ethics codes and standard operating procedures, including but not limited to

   - the UCT Authorship Practices Policy

   - the UCT Policy on Conflict of Interests

   - the UCT Research Ethics Code for Research Involving Human Participants

   - the UCT Research Ethics Code for Use of Animals in Research and Teaching

   - Guidelines for Use of Recombinant DNA

   - Guidelines for Use of Radioactive Material

   - Guidelines for Use of Hazardous Chemicals or Biologicals

   - Faculty Codes, Policies and Standard Operating Procedures

6. **Deliberate misrepresentation in publication** refers to the situation where a researcher knowingly publishes material that is likely to mislead readers, including undisclosed duplication of publication, or inappropriate claims to authorship, or attribution of work contrary to the UCT Authorship Practices Policy

7. **Improper conduct in peer review** of research proposals or results (including manuscripts submitted for publication), or failure to disclose conflicts of interest, or inadequate disclosure of clearly limited competence

8. **Retaliation** – taking punitive action against a person thought to have reported suspected research misconduct.

4 FRAMEWORK FOR RESPONDING TO ALLEGATIONS OF RESEARCH MISCONDUCT

4.1 Overview of procedures for a complainant

1. A person who suspects research wrongdoing should take action in terms of these procedures.

2. The Faculty Adviser on Research Integrity must be approached in confidence to initiate an informal enquiry.

3. The Faculty Adviser on Research Integrity ("the Adviser") will initiate an informal enquiry in consultation with the Dean and will report back to the Dean at the conclusion of the enquiry. The Dean will, at the end of the meeting with the Adviser, make a recommendation either to not proceed further or to refer the allegation for a formal Faculty investigation.

4. On completion of a formal Faculty investigation a finding will be made regarding the allegation of misconduct. If the complainant is not satisfied with the finding he or she may appeal to the decision for consideration at the University level.

4.2 Preliminary informal enquiry by the faculty adviser

1. The purpose of the **preliminary informal enquiry** is to establish whether, on the face of it, an answerable case can be made out regarding the allegation of misconduct, and whether the allegation should be addressed under this policy or through other policies, procedures, and structures of oversight as exist with respect to, for example, authorship, research with animals, biosafety, research with human beings, etc.

2. The informal enquiry should be prompt, discreet and effective. On receiving an allegation the Faculty Adviser on Research Integrity ("the Adviser") must within five (5) working days convene a meeting with the Dean. The meeting will agree on a procedure for an informal enquiry by the Adviser; this may include a plan for contacting the person alleged to have engaged in misconduct, minimally to inform the individual of the complaint, and to instruct the individual in regard to non-interference with the enquiry, as appropriate. Thereafter the Adviser will conduct an informal enquiry that will be completed within ten (10) working days of the meeting with the Dean. The Adviser must convene another meeting with the Dean at which he/she will report on the findings of the enquiry. The meeting will result in a recommendation that the complainant either 1) not proceed further with the matter, or 2) escalate the complaint to a formal Faculty investigation, or recommend an alternative route for the resolution of the complaint. The recommendation must be supported by criteria consistent with Section 2 (above). The Adviser and/or Dean may recommend other remedial actions including, for example improvements or enhancements of procedures, methodologies, record-keeping, etc.

3. The complainant is not obliged to follow the recommendation of the committee but is strongly encouraged to do so.

4. If the committee recommends that no further action should be taken and this is accepted by the complainant, the Faculty Adviser writes a report for the record and the matter is closed[7]. It can be referred elsewhere or dealt with in some other manner.

5. If the meeting escalated that matter for a formal Faculty investigation the Adviser must retain any suspect data and sufficiently detailed notes and other documentation for submission to the formal investigation.

4.3 Formal investigation: Faculty-level procedures

1. When a matter is referred for a formal Faculty investigation, the Adviser must prepare a written report[8] that includes a statement of the allegation, a description of the evidence reviewed as well as any suspect data and any other documentation, summaries of relevant interviews, and the conclusions reached.

2. The respondent and the complainant must be afforded the chance to comment on the report, which comments become part of the report

3. The Dean appoints a committee that comprises two senior academics in the Faculty and one from another faculty of the University. The appointment of a chair and members of this committee should aim at avoiding the potential for conflict of interest, bias or unfairness. The committee will be known as the Research Misconduct Investigation Committee (RMIC).

---

[7] To have a record in case e.g. a complainant makes a habit of lodging vexatious complaints.
[8] This report is prepared either by the Faculty-based Adviser on Research Integrity or by the Chair of the fact-finding inquiry committee (see 5.1)

4. The RMIC must gather and evaluate evidence promptly (usually within 45 days of appointment).

5. During the investigation, all reasonable efforts must be made to protect the identity of the respondent and the complainant from third parties. However, the complainant should note that the respondent is permitted to know the identity of witnesses, especially when the allegation rests on personal observation of misconduct. This means that the complainant cannot remain anonymous if he or she must give evidence of the observation.

6. The respondent is entitled to be present during fact-finding meetings of the RMIC but not during its deliberative meetings.

7. At the conclusion of the formal investigation the RMIC must determine whether research misconduct has occurred and whether the respondent is culpable and, if so, include recommendations of sanctions for resolution of the matter.

8. In the event that the recommendation at the conclusion of the informal enquiry was to not proceed with the matter or to pursue it through an alternative route but the complainant insisted on escalating it to a formal investigation, and it is found that the allegation is lacking in good faith, disciplinary action against the complainant may be recommended.

9. Suspect data and sufficiently detailed notes and other documentation must be retained in case there is an appeal.

10. Summaries of interviews conducted must be prepared and interviewees given the opportunity to comment on and revise them. The summaries become part of the record.

11. A written report must be prepared that records the results of the investigation and the recommendations regarding outcome.

12. The respondent must be afforded the opportunity to comment on the report, such comment becoming part of the record. The complainant must have the opportunity to comment on those parts of the report that describe his or her role and opinions in the investigation.

4.4 Appeal to the University level

1. If the complainant or the person against whom the allegation has been made is not satisfied with the determination of the RMIC, he/she may appeal to the University level. The appeal is made in writing to the Dean, who refers it to the DVC responsible for research together with the written finding of the RMIC and the record of the formal Faculty investigation.

2. The DVC responsible for research appoints a Special Investigating Committee (SIC) to conduct an investigation.

3. Membership of this SIC must include a person who is an expert in the general academic field of the respondent. If necessary, to avoid conflicts of interest, this person may be appointed from outside the university. Membership must also include a member of SEiRC or SAEC and the faculty's REC or AEC, as the case may be.

4. The DVC responsible for research must inform the respondent of the SIC, its composition and the charges being brought.

5. The SIC must gather and evaluate the evidence promptly (usually within 90 days of appointment) and determine whether research misconduct has occurred and whether the respondent is culpable and, if so, include recommendations of sanctions for resolution of the matter.

6. During the investigation, all reasonable efforts must be made to protect the identity of the respondent and the complainant from third parties. However, the complainant should note that the respondent is permitted to know the identity of witnesses, especially when the

allegation rests on personal observation of misconduct. This means that the complainant cannot remain anonymous if he or she must give evidence of the observation.

7. The respondent is entitled to be present during fact-finding meetings of the SIC but not during its deliberative meetings

8. The ORI provides administrative support to ensure a thorough and authoritative investigation.

4.5   Formal findings

1. Suspect data and sufficiently detailed notes and other documentation must be retained to permit later assessment of the adequacy of the investigation.

2. Summaries of interviews conducted must be prepared and interviewees given the opportunity to comment on and revise them. The summaries become part of the record.

3. A written report must be prepared that records the results of the investigation and the recommendations regarding outcome.

4. The respondent must be afforded the opportunity to comment on the report, such comment becoming part of the record. The complainant must have the opportunity to comment on those parts of the report that describe his or her role and opinions in the investigation.

4.6   Resolution and outcome

1. The report and the record are forwarded to the DVC responsible for research, who decides what action to take in light of the report. The DVC notifies the respondent, the Dean and the Registrar of the decision.

2. If disciplinary action is to be instituted, the set procedures for disciplinary action must be followed.

3. If appropriate, after appeal avenues have been exhausted, the Registrar must inform relevant sponsors, journal editors, previous affiliations of the respondent, and decide whether a public statement should be made.

4. If the allegations of research misconduct are dismissed, DVC responsible for research, together with the Registrar, must make all reasonable efforts to restore the reputations of the respondent and also to protect the complainant and witnesses who in good faith made the allegation and assisted the investigation.

5   DEFINITIONS

Abuse of confidentiality – taking or releasing the ideas or data of others which were shared with the legitimate expectation of confidentiality, e.g. taking ideas from others' grant proposals, award applications, or manuscripts for publication, when tasked with reviewing same (see also Improper conduct in peer review).

Adviser on research integrity - refers to a faculty-based person who can advise whether and how a suspected misconduct complaint should be lodged; this person should not have conflicts of interest and must be independent of other research-related bodies like RECs or Research Committees. The adviser should be appointed by a Dean or his/designee (such as a deputy dean or director of research) for a term such as a renewable, multi-year term. A retired person or someone who is approaching retirement could be requested to perform this role, satisfying the objective involve to a senior, respected person who knows the university processes and structures well.

Allegation is a written or oral statement or other indication of possible research misconduct made to the Adviser in research integrity.

Complainant is the individual who makes an allegation of possible research misconduct.

Conflict of interest refers to the situation where a member of UCT's interests and his or her professional obligations to UCT diverge so that an independent third party might reasonably question whether the member's professional actions or decisions are determined by considerations other than the maintenance of high ethical standards in research.

Deliberate violation of the Codes refers to the situation where a researcher fails to adhere to the Codes.

Deliberate misrepresentation in publication refers to the situation where a researcher knowingly publishes material that is likely to mislead readers, including undisclosed duplication of publication or inappropriate claims to authorship or attribution of work contrary to the UCT Authorship Practices Policy.

Fabrication refers to deliberate creation of false data, including documentation (including information regarding animal welfare monitoring records) and participant consent, dishonesty in reporting results, in collecting or analysing data, or omission of conflicting data.

Failure to report violations of the Codes refers to the situation where a researcher covers up or otherwise fails to report a violation observed by him or her.

Falsification refers to deliberate misrepresentation of research including progress in research or inappropriate adjustment and/or selection of data, imagery, results and/or consents.

Improper conduct in peer review – refers to failure to disclose or to manage conflicts of interest, or inadequate disclosure of clearly limited competence (see also **Abuse of confidentiality**).

Plagiarism refers to misappropriation of use of someone else's work, ideas, results, methods, or intellectual property without acknowledgement or permission.

Property violations refer to the situation where a researcher disposes of, tampers with or destroys the property of others, e.g. equipment, research papers and records, supplies, or products of research or scholarship.

Research misconduct may include the following: fabrication; plagiarism; abuse of confidentiality; falsification; deliberate misrepresentation in publication; deliberate violation of the Codes; property violations; knowingly exposing persons or animals to a biohazard; failure to report violations of the Codes; improper conduct in peer review; retaliation against persons who report alleged violations of the Codes. Research misconduct does not include honest error or honest differences in judgement in the management of a research project. Where breaches or violations of the Codes have occurred in error or because of differences in judgement or opinion, these must be dealt with appropriately by supervisors and responsible officers of UCT, including SEiRC and SAEC so that clarity and consistency are achieved. Workshops and training opportunities must be provided to achieve the goals of responsible conduct of research.

Respondent is the individual(s) against whom an allegation is made or whose actions are the subject of the inquiry or investigation.