**GHANA COMMUNICATION TECHNOLOGY UNIVERSITY**

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**FACULTY OF COMPUTING AND INFORMATION SYSTEMS**

Research ethics application form for conducting research involving secondary data

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **For Committee use only** | | | | |
| Application Number |  | FoCIS REC’s decision | | |
| Submission date |  | Approved | |  |
| Review date |  | Referred back for amendment | |  |
| Approval date |  | Disapproved | |  |
| Approval period | From: To: | | | |
| Name of chairperson |  | Signature |  | |
| Comments |  | | | |

**PRIVACY INFORMATION:**

The personal information you submit on this form is gathered primarily to evaluate your research ethics application. This data will be stored in a database to aid in administration, correspondence, and statistical analysis.

Members of the Ethics Review Committee who handle this application will have access to these records. Authorized third parties may also access the records if required. All records will be kept for as long as needed to fulfil the purpose for which they were collected.

**SECTION 1: RESEARCHER’S DETAILS**

1.1 Researcher’s details

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Name of applicant |  |
| Staff/ Student no |  | Student | Staff |
| Department |  | Institution |  |
| Office phone neo |  | Mobile No |  |
| Email address |  | Address |  |

1.2 Supervisor’s details

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Name |  |
| Department |  | Institution |  |
| Contact No (work) |  | Contact No (Mobile) |  |
| Email address |  | Postal Address |  |

1.3 Co- Supervisor’s details (if applicable)

|  |  |  |  |
| --- | --- | --- | --- |
| Title |  | Name |  |
| Department |  | Institution |  |
| Contact No (work) |  | Contact No (Mobile) |  |
| Email address |  | Postal Address |  |

**SECTION 2: GENERAL PROJECT INFORMATION**

2.1 Project Information

|  |  |  |  |
| --- | --- | --- | --- |
| Title of research project |  | | |
| Area of specialisation |  | Research location |  |
| Start date |  | End date |  |

2.2 Type of Application (more than one option may apply)

|  |  |
| --- | --- |
| Research for non-degree purposes (journal articles; conference presentations, etc.) |  |
| Research for degree purpose |  |
| Research for diploma purpose |  |
| Other |  |
| Identify the primary reason for conducting the research if you ticked “Other”. | |
|  | |
| Identify the qualification for the project (in the case of research for degree/ diploma purpose) | |
|  | |

2.3 Research funding(*to be completed if project is funded*)

|  |  |
| --- | --- |
| Name of funder |  |
| Is this funding likely to inform or impact the design, results, or dissemination of the research in any way? | Yes  No |
| If yes, explain and justify: | |
|  | |

2.4 Conditions and conflicts of interest:

|  |  |
| --- | --- |
| Has any organisation/company that is involved in the study or funding the research imposed any conditions on the research? | Yes  No |
| If yes, please specify what the conditions are: | |
|  | |
| Do you, or anyone else involved in or accountable for the research's design, have any personal, economic, or financial interests (or other possible conflicts of interest) that may be considered relevant to this research project? | Yes  No |
| If yes, please provide full details: | |
|  | |

**SECTION 3: DETAILS OF PROPOSED RESEARCH**

3.1 Explain the problem the research is addressing

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3.2 State the aim and objectives of the study

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| --- |
|  |

3.3 Provide detail on the benefit/contribution of the study

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| --- |
|  |

3.4 In non-technical language, provide a summary of the study design and methodology, data gathering techniques, and analysis methods.

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| --- |
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3.5 Has the proposal being approved by the department?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**SECTION 4: DETAILS OF DATA**

4.1 Identify the nature of the data *(Archival sources, statistical data, reports, prior collected research data)*

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| --- |
|  |

4.2 What is the origin/source of the secondary research data? For what purpose was the data originally collected? (*This assists the ethics reviewer in determining whether the sources can raise ethical concerns.)*

|  |
| --- |
|  |

4.3 Do the secondary research data's sources fall under the public domain?

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

4.4 Some publicly available resources are obvious, such the Internet and government statistics databases *(For those that are less well-known, the researcher must include supporting information, such as a webpage link)*

|  |
| --- |
| Provide evidence if applicable (i.e. link to website) |
|  |

4.5 What are the conditions for accessing data if it is not in the public domain? *Access to data may be restricted, such as data sharing with other researchers, which requires approval. Some data may be purchased or subscribed to for a cost.*

|  |
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4.6 Does the database or secondary data set contain any personal information/identifiers*?**This information relates to the anonymity of data/ confidentiality of the data. Databases such as credit bureaux, utility companies’ databases, raw qualitative data sets etc. contain personal information which might be an ethical concern.*

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

4.7 If the database or secondary data set does contain personal information, do you have evidence that the data to be provided to you have been anonymised? *This question is critical in determining as to whether ethical clearance procedures are warranted.*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  | No |  |  | Not applicable |  |

Comment / justification:

|  |
| --- |
|  |

4.8 In the case of a private database or data set, do you have permission to use the data for research? *If yes, include evidence of permission with this application.*

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

4.9 If there are any shortcomings, incompleteness or limitations with respect to the data, how will you report this?

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| --- |
|  |

4.10 How will the original owners of the data or research be recognised, referenced or cited?

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| --- |
|  |

4.11 Was ethical clearance granted for the original data gathering phase by this or any other research ethics committee? (*Please indicate: Yes, No, or Not Applicable AND provide justification/comment*)

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  | No |  |  | Not applicable |  |

Comment/ justification:

|  |
| --- |
|  |

4.12 Did the participants of the original primary study provide consent for future use of the data?*(Please indicate: Yes, No, Unknown or Not Applicable AND provide justification/comment)*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  | No |  |  | Not applicable |  |

Comment/ justification:

|  |
| --- |
|  |

4.13 Your research data should be kept for a minimum period of at least five years in a secure location by arrangement with your supervisor. Please indicate how your research data will be secured, stored and disposed of?

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**SECTION 5: RISK ASSESSMENT**

5.1 The study presents

|  |  |
| --- | --- |
| Negligible risk |  |
| Low risk |  |
| Medium risk |  |
| High risk |  |

5.2 Briefly justify your choice/classification

|  |
| --- |
|  |

5.3 Describe the risks relating to the research procedures, previously involved participants (if appropriate), communities or third parties may or will experience.

|  |
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|  |

5.4 Indicate how the potential risks of harm will be mitigated by explaining the steps that will be taken to minimise the likelihood of the event occurring *(i.e. protecting confidential information).*

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**SECTION 6: DATA MANAGEMENT PLAN**

6.1 Please outline your approach to ensuring the confidentiality of data (that is, that the data will only be accessible to agreed-upon parties and the safeguarding mechanisms you will put in place to achieve this). *You should include details on how and where the data will be stored, and who will have access to it.*

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6.2 Please outline how long the data will be retained for, if it will be destroyed and how it will be destroyed.

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6.3 Will the data be archived for use by other researchers?

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| --- | --- | --- | --- |
| Yes |  | No |  |

\*If yes, please provide details

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| --- |
|  |

**SECTION 7: DECLARATION**

**7.1** **Declaration to be signed by the applicant**

I confirm that this proposal adequately describes the study to be done. I will guarantee that the research follows the procedure that has been established. If major revisions to the protocol are required throughout the course of the research, I will submit them to FoCIS-REC for approval. Furthermore, when appropriate, I shall obtain local ethical approval in the country or countries where the research will be conducted.

Signed by

\_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_ \_

Name of applicant Date

**7.2 Declaration to be signed by the supervisor**

To the best of my knowledge, the student's application for research ethics approval fulfills all of the requirements outlined in the GCTU FoCIS Policy for Research Ethics. I will ensure that the student informs the committee in writing if there are any proposed changes to the research that may impact study-related risks for participants, including modifications to methodology, sampling, questionnaires, interview schedules, and so on. Therefore, I approve the submission and recommend that the application be granted approval.

Signed by

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Name of supervisor Date

**SECTION 8: CHECKLIST**

|  |  |  |  |
| --- | --- | --- | --- |
| CHECKLIST (TO BE COMPLETED BY THE APPLICANT) | | | |
| **PLEASE TICK** | **Yes** | **No** |
| The research proposal /has been approved by the Faculty Research and Higher Degrees Committee or relevant authority |  |  |
| Form has been fully completed and all questions have been answered |  |  |
| Full proposal attached |  |  |
| Approval to use secondary data attached (if applicable) |  |  |
| Previous ethical approval certificate (if applicable) |  |  |
| Signature of applicant |  |  |
| Signature of supervisor |  |  |