# Guideline for Ethical approval for conducting research

The Institute of Disaster Management and Vulnerability Studies, University of Dhaka, Bangladesh (IDMVS) Research Ethics Committee (IDMVS-REC) is to oversee all research ethics matters concerning research conducted by the faculty and students of the Institute.

Applications for ethical clearance that involve human participants and their data or sensitive/intrusive topics will be subjected to a **complete review** by the at least two ethical committee members who have 2 to 3 weeks to consider the applications. Applications for ethical clearance that involve less sensitive/intrusive topics will be subjected to an **accelerated review**, which implies that the application will not be reviewed by two peer reviewers, but will be discussed during a meeting of the IDMVS Research Ethics Committee for an immediate decision. If the members decide that said application will be better served by a complete review, the Research Ethics Committee retains its right to send the application out for review.

All researchers, including Bachelor of Disaster Management (BDM) and Masters of Disaster Management (MDM) students and Mphil and Ph.D researchers, faculty members of the Institute have to **submit an application according to the structured form** for ethical clearance when their research involves the participation of human respondents. Applications for ethical clearance must be submitted prior to conducting any field research. Checking plagiarism is mandatory for all kinds of research report

**Note to Applicants:** It is important for you to include all relevant information about your research in this application form as your ethical approval will be based on this form. Therefore anything not included will not be part of any ethical approval.

**Application For Ethical Review: Low Risk☐ Moderate Risk☐ High Risk☐**

| Section A:Application details | | |
|---|---|---|
| 1 | **Title of Project** | |
| 2 | **Proposed data collection start date** | |
| 3 | **Proposed data collection end date** | |
| 4 | **Project Ethics Identification Number (if any)** | |
| 5 | **Principal Investigator**<br>**(*for student projects, your supervisor should be identified as the PI)** | |
| 6 | **Position held** | |
| 7 | **Faculty/Department/Institute** | |
| 8 | **Contact Details**<br>Email:<br>Phone: | |

| 9 | **If the project is funded *(this includes non-monetary awards such as laboratory facilities)*** |
|---|---|
| Name of Funder | |
| Is the funding confirmed? | |

| 10 | **If this is a student project** |
|---|---|
| Name | |
| Institute | |
| Position Held (please tick) | ☐ Undergraduate/Bachelor project (if so, provide course title/number: _____<br>☐ Master's project (if so, provide course title/number: _____<br>☐ PhD<br>☐ staff led research project which may involve one or more students |
| Contact details | |

## Section B:Project details

The following questions relate to the objectives, methods, methodology and location of the study. Please ensure that you answer each question in lay language.

| 11 | **Provide a *brief*(300 words max)background to the project, including its intended aims.** |
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| 12 | **Methodology & Methods** (tick all that apply) | |
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| | ☐ Interviews*<br>☐ Focusgroups*<br>☐ Questionnaires (including oral questions)*<br>☐ ActionResearch<br>☐ Observation<br>Participant Observation<br>☐ Documentary analysis (including useofpersonalrecords)<br>☐ Audio/visual recordings (including | ☐ Collection/use of sensor or locational data<br>☐ Systematic review<br>☐ Secondary data analysis – ***(See Section D)***<br>☐ Advisory/consultation groups<br>☐ Other, give details: |

| 13 | **Provide – <u>in lay person's language</u> - an overview of the project;** focusing on your methodologyand including information on what data/samples will be taken (including a description of the topics/questions to be asked), how data collection will occur and what (if relevant) participants will be asked to do. This should include a justification for the methods chosen.**(500 words max)** |
|---|---|
| 14 | **Attachments**<br>If applicable, please attach a copy of any interview questions/workshop topic guides/questionnaires/test (such as psychometric), etc. and state whether they are in final or draft form. |

| **Location of Research** | |
|---|---|
| 15 | **Please indicate where this research is taking place.**<br>☐Bangladesh only (Skip to 'location of fieldwork')<br>☐ Overseas only<br>☐Bangladesh& overseas |

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| 16 | **State the location(s) where the research will be conducted and data collected. For example public spaces, schools, private company, using online methods, postal mail or telephone communications.** |
| 17 | **Does the research location require any additional permissions (e.g. obtaining access to schools, hospitals, private property, etc.)?**<br>Yes ☐ No ☐ |
| 18 | **Have the above approvals been obtained?** Yes ☐No ☐<br>**If yes,** please attach a copy of the approval correspondence.<br>**If not,** confirm they will be obtained prior to data collection. Yes ☐No ☐ |

## Section C:Details of Participants

In this form 'participants' means human participants/respondents and their data (including sensor/locational data, observational notes/images,Socio-economic data, as well as data about disaster).

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| 19 | **Does the project involve the recruitment of participants/respondents?**<br>Yes ☐No ☐ |

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|---|---|
| **Participant Details** | |
| 20 | Approximate maximum number of participants required:<br>Approximate upper age limit: Lower age limit:<br>Justification for the age range and sample size: |
| **Recruitment/Sampling** | |
| 21 | Describe how potential participants/respondents will be recruited into the study.<br>**Note:** This should include reference to how you will identify and approach participants. For example, will participants self-identify themselves by responding to an advert for the study or will you approach them directly (such as in person or via email)? |
| **Informed Consent** | |
| 22 | Describe the process you will use when seeking to obtain consent.<br>**Note:** This should include reference to what participants are being asked to consent to, such as whether their contribution will be identifiable/anonymous, limits to confidentiality and whether their data can be withdrawn at a later date. |

## SectionD:Ethical Issues

| Ethical Issues | |
|---|---|
| **23** | Please address clearly any ethical issues that may arise in the course of this research and how they will be addressed. (see the WHO guidelines and WMA Declaration of Helsinki[1-2])[1]<br><br>**Note:** All ethical issues should be addressed - **do not leave this section blank**. All projects give rise to ethical issues. If you think there are no ethical issues, you need to provide an explanation as to why. |

| Risks & Benefits | |
|---|---|
| **24** | Please state any *benefits* to participants in taking part in the study (this includes feedback, access to services or incentives), |
| **25** | Do you intend to offer incentives or compensation, including access to free services)?<br><br>Yes ☐ No ☐<br><br>**If yes,** specify the amount to be paid and/or service to be offered **as well as a justification for this**. |
| **26** | Please state any *risks* to participants and how these risks will be managed. |
| **27** | Please state any *risks* to you or your research team and how these risks will be managed. |

## SectionE:Appropriate Safeguards, Data Storage & Security

Please ensure that you answer each question and include all hard and electronic data.

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| **27** | **Will the research involve the collection and/or use of personal data?**<br><br>Yes ☐ No ☐<br><br>***Personal data*** *is data which relates to a living individual who can be identified from that data OR from the data and other information that is either currently held, or will be held* |

[1] 1. Coleman C, World Health Organization. Research Ethics Committees: Basic Concepts for Capacity-Building. Geneva: Printed by the Document Production Services; 2009.
2. WMA Declaration of Helsinki – Ethical Principles for Medical Research Involving Human Subjects – WMA – The World Medical Association. https://www.wma.net/policies-post/wma-declaration-of-helsinki-ethical-principles-for-medical-research-involving-human-subjects/. Accessed August 22, 2019.

| | |
|---|---|
| | *by the data controller (the researcher).*<br><br>*This includes:*<br>– *any expression of opinion about the individual and any intentions of the data controller or any other person toward the individual.*<br>– *sensor, location or visual data which may reveal information that enables the identification of a face, address, etc. (some postcodes cover only one property).*<br>– *combinations of data which may reveal identifiable data, such as names, email/postal addresses, date of birth, ethnicity, descriptions of health diagnosis or conditions, computer IP address (if relating to a device with a single user).* |
| **28** | **Is the research collecting or using**<br>– special category data as defined by the General Data Protection Regulation and/or<br>Yes ☐ No ☐<br>– data which might be considered sensitive in some countries, cultures or contexts.<br>Yes ☐ No ☐<br>**If yes,** state whether explicit consent will be sought for its use and what data management measures are in place to adequately manage and protect the data. |

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| **29** | **All research projects using personal data must be registered with Legal Services before the data is collected, please provide the Data Protection Registration Number:**<br>If you do not have a registration number from Legal Services, please clarify why not: |

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| **During the project** *(including the write up and dissemination period)* | |
| **30** | **State what types of data will be generated from this project** (i.e. transcripts, videos, photos, audio tapes, field notes, etc.):<br><br>**How will data be stored, including where and for how long?** This includes all hard copy and electronic data on laptops, share drives, usb/mobile devices. |
| **31** | **Do you confirm that all personal data will be stored and processed in compliance with the General Data Protection Regulation?**<br>Yes ☐ No ☐<br>**If not,** please clarify why. |

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| **After the project** | |
| **32** | **What data will be stored and how will you keep it secure?**<br><br>**Where will the data be stored and who will have access?** |

| | | |
|---|---|---|
| | **Will the data be securely deleted?** Yes ☐ No ☐<br>**If yes,** please state when this will occur: | |
| **33** | **Will the data be archived for use by other researchers?** Yes ☐ No ☐ | |

| **Section F: Declaration to be Signed by the Principal Researcher**<br>**I confirm that the information in this form is accurate to the best of my knowledge.** | |
|---|---|
| ***For staff project:***<br>Signature | |
| Date | |
| ***For student project:***<br>**I have met with and advised the student on the ethical aspects of this project design.** | |
| Signature | |
| Date: | |

| **Signature of your Director/Head of Institute/ Department** | |
|---|---|
| **Part A**<br>Ihave read the 'criteria of minimal risk' and I recommend that this application be considered by the Chair and team of the IDMVS REC.<br>Yes ☐ No ☐ | |
| **Part B**<br>**I have discussed this project with the principal researcher who is suitably qualified to carry out this research and I approve it.**<br>Yes ☐ No ☐ | |
| Name: | |
| Signature: | |
| Date: | |

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