Standard Operating Procedures (SOP)
Humanities Faculty Centre for Social Science Research (CSSR) Research Ethics Committee (REC)

Title	Standard Operating Procedures, Humanities Faculty, Centre for Social Science Research (CSSR) Research Ethics Committee (REC)
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Relevant related policies, procedures and guidelines	• Terms of Reference, Humanities Faculty Centre for Social Science Research (CSSR) Research Ethics Committee • UCT Policy for Responsible Conduct of Research • UCT Research Ethics Code for Research Involving Human Participants • Register of Ethics Approvals for Research Conducted under the Auspices of UCT • Code for UCT Research Ethics Committee Members • Appeal to Ethics in Research Committee: Standard Operating Procedure • Conflict of Interest Policy • Policy and Standard Operating Procedure: Ethics Clearance and Permission to Engage UCT Staff and/or Students or their Data in Research • UCT Policy and Procedures for Breach of Research Ethics Codes and Allegations of Misconduct in Research • EiRC Recommendations: Standard criteria for inclusion in research invitations • UCT Guideline for Risk-Based Ethical Review of Research (Human Participants) • EiRC Guidelines and recommendations for the use of generative artificial intelligence (AI) tools in research • UCT Whistleblowing Policy • UCT Research Data Management Policy

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Standard Operating Procedures, Humanities Faculty, Centre for Social Science Research (CSSR) Research Ethics Committee

1. Purpose

To ensure the protection of human rights and the well-being of research participants based on ethical and integrity principles and norms, and compliance with the highest ethical standards in social and scientific research, including matters involving authorship and research misconduct, but excluding experiments involving animals.[1]

2. Delegated authority of the committee

The Humanities Faculty Centre for Social Science Research (CSSR) Research Ethics Committee (REC) has been established to review and take decisions on ethics applications it receives from the CSSR staff and students. The Humanities CSSR REC has been granted this authority by the Humanities Faculty Research Ethics Committee.

Furthermore, the Humanities Faculty Research Ethics Committee recognise the independence of the CSSR Research Ethics Committee REC to make decisions within the scope of its terms of reference, standard operating procedure, institutional policies and international and national laws, with no undue influence or interference placed on the committee.

The CSSR is an inter-disciplinary Research Centre which conducts research across several disciplines, including public health, psychology, social work, sociology and political studies. Each discipline will have its own ethical codes of conduct which we expect researchers to refer to for guidance in relation to their research studies. In line with the Faculty of Humanities Guide to Research Ethics, the purpose of the CSSR REC is not primarily to police research nor to impose unreasonably onerous obligations on researchers. Rather, the purpose is to deliberate over ethics applications received, support researchers to conduct ethically responsible research and to engage in their own deliberbation at appropriate stages of their research. This deliberative process is combined with the process of clearance where ethics applications are reviewed and approved.

3. Ethical, regulatory and legal requirements guiding the work of the committee

The work of the CSSR REC committee is guided by the:

- Declaration of Helsinki,
- National Department of Health (2024) South African Ethics in Health Research Guidelines
- South African National Health Act 61 of 2003,
- Faculty of Humanities, Guide to Research Ethics, Research with Human Participants. and
- the UCT Responsible Conduct of Research Policy

[1] Adapted from the Senate Ethics in Research Committee Terms of Reference (2023, https://uct.ac.za/sites/default/files/content_migration/uct_ac_za/87/files/SENATE_ETHICS_IN_RESEARCH_COMMITTEE_ToR.pdf)

4. Meeting procedures

a. Frequency of meetings

The committee shall meet on an ad hoc basis as required. All other communication will be facilitated via email.

b. Format of meetings

The committee will meet in person where possible, but if not possible online.

c. Declarations of conflicts of interest and/or commitment and confidentiality

Each member and/or reviewer will be asked to sign a conflict of interest and/or commitment and confidentiality agreement before they first review an application for the CSSR REC. The declaration reads as follows:

> As a Humanities Faculty CSSR REC member, proxy or co-opted staff member, or member of UCT staff, I agree to:
> - Maintain the confidentiality of all discussions, deliberations, records, and other information related to the functions of the Humanities Faculty CSSR REC
> - **Not** participate in any case where I have a present or potential personal, professional, or financial conflicting interest or commitment. In such a case, I will be present only to provide information requested by the Humanities Faculty CSSR REC and will recuse myself during the discussion.

The business of a REC is confidential and should remain within the bounds of the committee. Committee members and reviewers are expected to maintain the confidentiality of discussions.

What may be communicated beyond the committee:

i. Outcome decisions on applications.
ii. Summarised discussions related to policies where umbrella bodies, such as the Senate Ethics in Research Committee (EiRC) have mandated faculty consultation on proposed policy revisions. Specific concerns may be communicated provided that explicit permission has been obtained from the party.
iii. Overall challenges and experiences of the committee may be reported to the EiRC at their meetings, to enable and enhance ethics governance and review throughout the institution.
iv. An REC Chair may consult other REC Chairs or the Office of Research Integrity when challenging situations arise or where those involved in the situation may be based in another Faculty.

It is the intention that confidentiality protects the business and independence of an ethics committee and the decisions it is empowered to take. Confidentiality should be seen to extend (as in the examples articulated in points i-iv above) to other RECs, the Officeo of Research Integrity and experts who may be consulted in order to make an informed, balanced and ethically informed decision on a given matter.

If it is necessary to consult an external, independent, expert on a given matter then a confidentiality or non-disclosure agreement should be signed before extensive consultations take place.

5. Review of research project applications

i) When there is a request (via email) for a Research Ethics Review, the committee first confirms that at least one of the investigators has an affiliation with the CSSR (either as a staff member or honorary research associate).

ii) The applicant is then asked to complete the ethics application on the eRA platform, including supporting documentation (study protocol, data collection tools, consent forms, etc).
iii) Once the application is received by the CSSR REC, two reviewers from the CSSR are identified. This can include postdoctoral research fellows, research officers, junior research fellows, or any other researcher with the appropriate scientific and ethics training in the CSSR.
iv) The reviewers are asked to review the application on eRA and to provide feedback within 2-3 weeks. Requests for a shorter turnaround time (1 week) will be considered but need to be strongly motivated for.
v) The reviewers can ask for modifications or accept the application as is.
vi) The Chair or Deputy Chair will then look at the reviewers' feedback, make additions and amendments as needed and send it back to the applicant. If the application is accepted as is the applicant is issued with an approval letter (including a reference number).
vii) If modifications are required, the applicant is requested to make these and to revise and resubmit the application on eRA.
viii) If the changes made are to the satisfaction of the Chair/Deputy Chair an approval letter is issued.
ix) If further amendments are required, the applicant will be asked to revise the application a second time until changes made are to the satisfaction of the Chair/Deputy Chair.

If an application that is submitted to the CSSR REC has one or more of the following elements (as per the IFREC Terms of Reference), the researcher will be asked to submit directly to IFREC:

i) An external funder or collaborator requires ethics approval from an externally registered (NHREC and/or OHRP) REC. (e.g., NIH and all US federal agencies, NRF in some instances).
ii) Collaborating lead investigators are in different UCT faculties (except FHS, where projects involving FHS members must be submitted to the FHS Research Ethics Committee), and where the project does not clearly fall under the ambit of any of the individual faculties they represent; and/or where the project employs a mixed methods approach and would therefore benefit from review by a multi-disciplinary ethics committee.
iii) The investigator is from another institution and wishes to conduct research at UCT involving staff and/or students.
iv) The project involves health research (and is thus subject to the legal requirement of obtaining ethics approval from an NHREC registered and audited REC), and where no member of the research group represents the Faculty of Health Sciences. (FHS).

a. Assigning reviewers

The CSSR keeps an updated list of current researchers who are asked to review research ethics applications. To allow reviewers enough time to adequately review an application alongside their regular duties, they are asked to provide feedback within 2-3 weeks. A roster of applications that have been reviewed by CSSR researchers is kept up to date so as to ensure fair distribution of applications and also equal opportunities to develop skills in review by completing reviews.

Declining an invitation to review

A committee member or reviewer may decline to review a project assigned to them on the following grounds:

- Clear or perceived conflicts of interest or commitment,
- Lack of subject-matter expertise or,
- Inability to meet the review deadline owing to prior commitments.

If a reviewer declines to review an application, then a new reviewer shall be assigned to take on this task.

b. Review principles and criteria

In reviewing ethics applications, the committee and reviewers will be guided by the UCT risk-based review of research guidelines developed by UCT's Office of Research Integrity, the Faculty of Humanities, Guide to Research Ethics, Research with Human Participants, and the IFREC Standard Operating Procedures

The committee and reviewers will consider different categories of risk in its assessment of applications including:

- Risk to participants.
- Risk to researchers, especially inexperienced student researchers or projects taking place in unsafe environments.
- Risk to stakeholders other than participants, including communities from which participants are drawn - this includes risk of stigmatisation or legal risks.

The committee and reviewers will also review applications both administratively and substantively. The administrative review will ensure that all required documents are in place (for example, consent forms, assent forms that include children). The substantive review may take into account the following broad considerations:

- Suitability of research population: for example, targeting of certain groups without adequate justification.
- Adequacy of recruitment material and informed consent information and processes
- Respect for participants throughout the course of the study by ensuring ability to withdraw if requested without consequences;
- that data privacy and security are adequately maintained;
- that additional study-related information is provided if such becomes relevant during the study, adequate debriefing if the study involves partial disclosures, etc.
- Favourable, or at least neutral, balance of risks and potential benefits.
- Researcher competency (or supervision by a competent researcher for the given method).
- Community engagement throughout the course of the project if applicable, including dissemination of project outcomes.
- Review of plans for ongoing ethics reflection by the research team, during the project, if applicable.
- Potential social and scientific value: While this is not the primary concern of an ethics committee it is important to note that projects that have methodological problems or appear to lack scientific rigour (even if harmless) are potentially ethically problematic as they can waste resources, including those of participants, and can result in unreliable information becoming part of the scientific record.

c. Recommended project outcomes

The reviewers make a recommendation to the Chair/Deputy Chair. The Chair/Deputy Chair will review the reviewer's feedback and the researcher's application, may add additional comments/make amendements as needed, and will provide feedback to the researcher. If modifications are required the researcher will be asked to make the necessary changes which will be resubmitted on eRA The application will be approved if the reviewer and Chair/Deputy Chair are satisfied with the modifications made.

d. Recording project outcomes and communicating with applicants

Project outcomes will be recorded on the REC tracker document by the Servicing Officer and communicated to applicants via an approval letter generated by the eRA system. The approval letter will include a reference number that must then be used in all correspondence with the REC, and can be used in publications resulting from the research.

e. Continuing review and ethics approval renewals OR Annual progress reports

The REC tracker document will be kept up to date, and information from this will be captured in an annual progress report which will be shared with the CSSR Director, and be made available to the Faculty of Humanities Research Ethics Committee Chair.

f. Amendments to approved projects

If an amendment to an already approved project needs to be made, the applicant will be asked to update their application and supporting documentation on eRA, clearly indicating the amendment, as well as in an email to the Committee. This will be shared with the reviewer for their input and then follow the same procedure as outlined in point 5 above.

g. Reporting adverse or unanticipated events

If an adverse or unanticipated event is reported to the committee, it will be deliberated internally with the CSSR Director to first establish the severity of the event. If the committee requires additional guidance as to how to respond to the event, it will consult first with the Faculty Research Ethics Committee. If a decision is not reached, UCT's Office of Research Integrity will be approached.

h. Suspension or termination of projects

If a project may need to be suspended or terminated as a result of an adverse event, the committee and CSSR Director will seek guidance the Faculty Research Ethics Committee, and if needed UCT's Office of Research Integrity will be approached.

i. Closure or completion of projects

Researchers will be asked to share papers/outputs arising from their studies with the committee and invited to present at a lunchtime seminar.

j. Reciprocal recognition of prior ethics approvals

The committee will recognise ethics approvals obtained at other institutions that have an established and recognised Research Ethics Committee and will keep a record of this on the REC tracker document. If the applicant has an affiliation with the CSSR they will be required to submit an ethics application to the REC.

k. *Additional ethics clearances (including international research)*

Approval from the CSSR REC does not replace other ethical clearances that may be needed. It is the researcher's responsibility to be aware of and address any additional ethical requirements. For example, research conducted in other countries typically requires in-country approval, and studies taking place in schools or health facilities may require approval from the relevant local authorities. Where external ethics approval is required, the CSSR REC asks that applicants share copies of the approval letter(s) once obtained.

l. Duration of ethics approval and renewal

All ethics approvals are granted for a period of one year. Researchers are responsible for ensuring that approval is renewed before the expiry date should the study continue beyond this period.

6. Informed consent

In considering informed consent, the committee will be guided by the Faculty of Humanities, Guide to Research Ethics, Research with Human Participants (see p. 55). taking into account the following considerations:

- Participants should give informed, voluntary consent to participate in research, where appropriate[2].
- Researchers should provide clear and unambiguous information that explains the aims and implications of the research project, the nature of participation, and any other considerations that might reasonably be expected to influence their willingness to participate. Usually this includes what it involves (how long it will take, participants' roles and rights – including to withdraw without penalty), risks, benefits, costs, payments (even if there is none, it should be stated), and the manner in which their data will be used.
- This information should be provided in a language that is understandable to the potential participants.
- Where participants are minors, a legal guardian should provide consent; and minors provide informed assent, where they are capable of doing so[3].

7. Data

To be read in conjunction with UCT's Research Data Management Policy.

a. Data collection, management and storage

In reviewing applications, the committee and reviewers will consider whether data collection, management, and storage practices protect participants' rights and data integrity. The ethics application will be reviewed with a view to ensuring that personal data are collected and stored securely, with appropriate measures for de-identification and confidentiality. The committee will also review how data will be retained, shared, and disposed of, considering legal, ethical, and institutional requirements. Specifically, data management procedures should be aligned with the requirements of POPIA, including the conditions for cross-border transfer and sharing of data.

b. Secondary use of research data

The Committee supports the ethical and responsible secondary use of research data, whether collected by the same research team, other researchers, or third parties. Researchers should comply with Senate-approved policy on the secondary use of data.

While research involving only the analysis of secondary data – particularly open data or data from a study already approved by an ethics committee - does not usually require the completion of either the eRA pre-screening questionnaire (PSQ) or an application for ethical clearance, researchers are nevertheless encouraged to

a) complete the PSQ for reassurance that there are no ethical complications in their research; and

[2] Depending on the nature and methods of the study, obtaining informed consent may not be possible or warranted. If this is the case, the applicant will need to explain why the research will not obtain informed consent to facilitate deliberation over the ethical considerations involved in not obtaining consent. If there is uncertainty, the CSSR REC will seek advice from the Faculty Ethics Committee.

[3] Again depending on the nature of the study, it may not be possible to obtain consent from a legal guardian. If this is the case, the applicant will need to explain why consent will not be sought from the guardian. It may be necessary to demonstrate to the committee, through community engagement (e.g., with School Governing Bodies as parent representatives) that this is an acceptable approach. If there is uncertainty, the CSSR REC will seek advice from the Faculty Ethics Committee.

b) to complete an application for ethical clearance in order to receive certification and a reference number, in case funders, publishers, or any other legitimately interested party requires this.

Considerations of risk in the use of secondary data include whether uses align with the conditions under which the data were originally collected, including any consent, confidentiality, or data-sharing agreements. Particular attention should be given to privacy protections and the management of identifying information, taking into account whether data are anonymised or sensitive in nature. Where original consent does not explicitly cover the new purpose, researchers should reflect on whether additional permissions, ethical justification, or data governance measures are appropriate. Ethical practice includes proper acknowledgement of data origin, intellectual property rights, and the contributions of original data collectors. The Committee's role is to support proportionate, transparent, and ethically sound reuse of data rather than to limit access or innovation.

8. Privacy and confidentiality

Measures to protect participant privacy and confidentiality will be reviewed by the committee and reviewers, considering the following:

- *How is data being stored and protected*? The committee will review the adequacy of the data protection measures (e.g., encryption, password protection, or access controls, secure storage) to ensure compliance with relevant data protection regulations and institutional standards.
- *How will the research data be kept confidential and when is it deidentified/anonymised?* The committee will consider whether the methods proposed for anonymizing or de-identifying data are sufficient to protect participants' identities (when appropriate)[4].
- *Who has access to the research data?* The committee will consider whether access to research data is limited to authorized personnel who are directly involved in the project, including the use of measures such as data access logs and permissions to monitor who has accessed the data and for what purpose; or whether participants have given permission for de-identified data to be shared with other scientists (e.g., via Open Science Framework, ZivaHub, Zenodo).
- *Are there any participants whose privacy cannot be protected – how will these participants be engaged?* Researchers should carefully consider whether any participants' privacy cannot reasonably be protected, and how these individuals might best be engaged in ways that respect their rights and preferences. The Committee encourages researchers to reflect on the public or private nature of the data, as well as participants' reasonable expectations of privacy. Where anonymity is not possible, researchers are advised to seek explicit agreement from participants for any identifiable information that may be shared. If participants wish to have their identities acknowledged, this decision and any related discussions about potential risks should be clearly documented.

9. Research with vulnerable participants

For research with vulnerable participants (including minors, persons with disabilities, persons with low-education levels etc.), the committee and reviewers will consider whether appropriate, additional precautions have been put into place to ensure adequate protection of their rights and interests. The committee will be guided by the IFREC Standard Operating Procedure and South African Ethics in Health Research Guidelines (NDoH, 2024), focusing on the following:

[4] There may be research studies where data will not be anonymised or de-identified. The committee and reviewers will consider and deliberate the justification for these situations.

- adequate justification is provided for the inclusion of vulnerable participants, with protective safeguards and measures explained.
- research participants know they will take part in the research and that the research will be carried out only with appropriate consent
- careful attention is given to the content, language(s) and procedures used to obtain informed consent (i.e. how the research proposes to probe understanding and comprehension of the information for very vulnerable potential participants during consent.)

10. Breach of ethics approval, policy and non-compliance

Where there is a breach of ethics approval, policy or noncompliance the REC committee will follow the UCT Policy and Procedures for Breach of Research Ethics Codes and Allegations of Misconduct in Research

11. Procedures for raising concerns or complaints related to research projects

Concerned parties may raise complaints or issues related to the conduct of the Humanities Faculty CSSR REC or of a project approved by the Humanities Faculty CSSR REC in accordance with the UCT Policy for Breach of Research Ethics Codes and Allegations of Misconduct in Research (colloquially called the Research Misconduct Policy), or the Whistleblowing Policy.

a. Reporting under the research misconduct policy

Annexure 1 (page 8) of the Research Misconduct Policy describes procedures for a complainant:

1.1. A person who suspects research misconduct should take responsible action in terms of this policy and procedure and contact the faculty research integrity advisor (F-RIA) or the ORI, to either seek confidential advice or to indicate that they wish to lodge a complaint.

1.2. In some instances, an informal discussion may be sufficient to resolve the matter. However, the F-RIA must ensure that potentially valid concerns are not dismissed or minimised.

b. Reporting under the whistleblowing policy

Section 7.1. (page 6), of the Whistleblowing Policy describes an internal route for a complaint as follows:
"Any concerns or disclosures shall preferably first be made to the line manager or responsible University official, or their superior, unless the whistleblower is for some reason not comfortable taking this reporting route. As an alternative, a report can be made directly to the UCT Risk, Compliance and Relationship Management Director or the Internal Audit Director. The advantage of internal reporting is that it facilitates effective communication between university officials and the whistleblower, and this in turn enables the efficient and effective investigation and resolution of matters.

In making a report internally, a whistleblower may request that their identity remain confidential amongst only those with a legitimate need for the information. In this case, the whistleblower must equally make every effort to ensure that they do not themselves cause their identity to become common knowledge."

12. Protection of whistleblowers

UCT's Whistleblowing Policy states as follows:
"The University of Cape Town (UCT) intends to maintain a culture of integrity in all its work and dealings. As a large and complex institution that engages and deploys significant resources, unlawful and irregular activity can cause significant harm to the University. This means that the risk of unethical activity to UCT resources and to its reputation must be a cause for ongoing vigilance. More specifically, potential and actual wrongdoing needs to be promptly identified in order for any arising loss to be minimised, and that

measures to deter recurrence can be instituted. This requires that all stakeholders are aware of and able to discharge their duty to bring any suspicions and knowledge of unethical activity to the attention of the University.

Accordingly, UCT has established and maintains channels for the reporting of wrongdoing by all stakeholders, both internal and external. As an employer, the University is committed to enabling its staff and contractors to fulfil their legal obligation to report suspicions or knowledge of fraud, corruption or other malpractice within UCT without fear of retaliation. The effective deterrence, detection and remediation of wrongdoing at UCT is the overriding objective of this Policy. Its implementation plays a key role in ensuring that the University fulfils its obligations in terms of the regulatory framework within which it operates, and in terms of its duties to the communities and society that it serves." (Whistleblowing Policy, page 2)

Should anyone wish to raise concerns about a research project approved by the Humanities Faculty CSSR REC, they may do so in accordance with the whistleblowing policy.

Please consult page 7 of the aforementioned policy for routes to report concerns. **Calls should be made to 0800 650 000, which is toll-free from landlines. Alternatively, an SMS can be sent to 33490 and a whistleblowing hotline information agent will call back.** There are other routes to report concerns described in the policy document.

13. Authorship and acknowledgement

The template document for Faculty Standard Operating Procedures (SOP) was developed by Mrs Paula Saner (Manager, Office of Research Integrity). Each Faculty has permission to edit and adjust the template to suit faculty needs and practices.

The National Health Research Ethics Council (NHREC) Ethics in Health Research Guidelines (2015) provided useful information which has been incorporated into this SOP document.

Thanks go to the internal audit team for recommendations for improving ethics governance structures at UCT through strengthening and harmonising (where possible) documentation and processes.