**CHECKLIST A**

**Research Ethics Checklist for Studies involving Human Participants**

Provide a brief description of the data collection procedure to be undertaken in the research:

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| **Researcher Details** | |
| Lead Researcher |  |
| Members |  |
| CCC email addresses |  |
| Program |  |
| Working Title |  |
| Semester(s) and academic year in which  research project is to be undertaken |  |
| Research Adviser |  |

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| The following should be attached to the checklist: |
| * A copy of the informed consent form to be used in the study. * A copy of the instrument/tool that will be administered to the participants. * If applicable, a copy of the letter seeking permission to collect data from participants who are under the supervision of an agency, institution, department, or office. * If applicable, a copy of the parental consent form for participants below 18 years old. |

***The following items refer to important ethical considerations in the conduct of research with human participants. Provide a check for the appropriate answer to each question.***

**\_\_\_\_\_\_ A. New Data will be collected from Human Participants** (if this applies, please accomplish Checklist B)

Please check all that apply.

\_\_\_\_\_ Experimental Procedures/Intervention/ Treatments

\_\_\_\_\_ Focus Group Discussions

\_\_\_\_\_ Personal Interviews

\_\_\_\_\_ Self-administered questionnaires

\_\_\_\_\_ Internet survey

\_\_\_\_\_ Observation

\_\_\_\_\_ Telephone survey

\_\_\_\_\_ Others, please specify:

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\_\_\_\_\_\_ **B. Pre-existing data from human participants, i.e., from a dataset** (if this applies, please accomplish Checklist C)

**CHECKLIST B**

**For new data to be collected from human participants**

**Lead Researcher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Working Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| **Sampling Details** | |
| Number of Participants/Subjects |  |
| Location where the participants  will be recruited/ where subjects  will be obtained? |  |
| How long will the data collection  take place? |  |
| Who will perform the data  collection? |  |
| Location(s) where data collection  will take place |  |
| What procedures will be  employed to ensure voluntary  consent from participants? |  |
| **Data Retention** | |
| How long will data with  participant identifiers be kept  after the publication of the first  paper from the project? |  |
| How long will anonymized data  be kept after the publication of  the first paper from the project? |  |
| **Procedure for Informed Consent** | |
| How will informed consent be  recorded?  (check all that applies) | **\_\_\_** Written Consent  \_\_\_ Audio-recorded Consent  \_\_\_ Online/Email recorded consent  \_\_\_ Others, please specify:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |



Please put a check mark on the column that represents your answer. If applicable, write the issue/s found in the

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| --- | --- | --- | --- | --- |
| Indicators | Yes | No | NA | Issue |
| 1. Is there an assurance that this study has not been done before? |  |  |  |  |
| 2. Will the study improve existing conditions/practices or increase knowledge? |  |  |  |  |
| 3. Does the research have any implications for the reputation of the institution? |  |  |  |  |
| 4. Do the expected benefits of the research balance against the probable risks to participants? |  |  |  |  |
| 5. Will the participants benefit from the study? |  |  |  |  |
| 6. Will the participants be properly informed of the nature and proceedings of the study? |  |  |  |  |
| 7. Will the participants be assured that their participation is voluntary and that they can refuse or widraw at any time? |  |  |  |  |
| 8. Will the research involve prolonged or repetitive testing of participants? |  |  |  |  |
| 9. Will information/questionnaire be provided in language/dialect other than English? |  |  |  |  |
| 10. Will informed consent be obtained- either verbal or written? |  |  |  |  |
| 11. Does the research involve participants who are considered to be vulnerable or unable to give informed consent (e.g. children, people with learning disabilities, your own students)? |  |  |  |  |
| 12. Will the research involve discussion of sensitive topics (e.g sexual activity, drug use)? |  |  |  |  |
| 13. Will the research involve access to records of personal or confidential information concerning identifiable individuals, either living or recently deceased? |  |  |  |  |
| 14. Will personal information/data be kept in accordance with the Data Privacy Act? |  |  |  |  |
| 15.Will results be presented in a way that does not identify participants? |  |  |  |  |
| 16. Will participants receive feedbacks? |  |  |  |  |
| 17. Will the participants be given compensation for time or reimbursed for expenses incurred? |  |  |  |  |
| 18. Will the researchers secure data that require permission from the appropriate authorities before use? |  |  |  |  |
| 19. Will the researchers in a way protect the interest of the participants from any physical or emotional harm? |  |  |  |  |
| 20. Will the researchers be safe? |  |  |  |  |

**Declaration**

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**Name and Signature of the Lead Researcher Date**

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**Name and Signature of the Research Adviser Date**

**CHECKLIST C**

**For the use of pre-existed data collected from Human Participants**

**Lead Researcher: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Members: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Program: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Working Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

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| Use of Pre-existing Data collected from Human Participants | |
| Indicate the dataset from which the data for the study  will be sourced |  |
| Is the data publicly available,  i.e., the access to which does  not necessitate an approval  process? | \_\_\_YES  Please indicate where the dataset is available |
| \_\_\_NO  Please indicate/attach the approval authority for access |
| Was the original dataset originally collected for the present study’s purpose? | \_\_\_YES  Please attach the Consent Form used in the original  study. |
| \_\_\_NO  Please attach the Information Collection Statement  (i.e., the statement given to informants providing them  with the rationale for the collection of specific  information). |
| Does the original data set contain sensitive data, that is information that an individual would not likely want to be disclosed publicly, e.g., data on sexual activities, substance use? | \_\_\_YES  Please describe the type of sensitive data to be used in the present research: |
| \_\_\_NO |
| Does the original dataset have personal identifiers? | \_\_\_ Yes, specifically:  \_\_\_\_\_\_ Direct (i.e., the participant provided  personal details like name and address)  \_\_\_\_\_ Indirect (i.e., the participant was given  a respondent code to make the participant  identifiable) |
| \_\_\_NO  (This means that neither the researcher nor the participant provided any personal identifiers) |
| Will new data be collected and analyzed along with data from the existing dataset? | \_\_\_YES |
| \_\_\_NO |

**Declaration**

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**Name and Signature of the Lead Researcher Date**

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**Name and Signature of the Research Adviser Date**