



# UNIVERSITY OF ZULULAND

## POLICY AND PROCEDURES

ON

## RESEARCH ETHICS

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### POLICY STATEMENT

This policy provides guidelines and direction to the University regarding the rules and procedures to be followed in ensuring compliance with researchers' ethical obligations when conducting research at or under the auspices of the University.

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# TABLE OF CONTENTS

## SECTION A: POLICY

<b>1</b>	<b>PREAMBLE</b>	<b>6</b>
<b>2</b>	<b>PURPOSE AND OBJECTIVES</b>	<b>6</b>
<b>3</b>	<b>SCOPE</b>	<b>6</b>
<b>4</b>	<b>DEFINITIONS</b>	<b>7</b>
<b>5</b>	<b>GUIDING PROTOCOLS</b>	<b>9</b>
5.1	International Protocols	
5.2	National Protocols	
<b>6</b>	<b>GUIDING PRINCIPLES FOR RESEARCH GENERALLY</b>	<b>10</b>
6.1	General Principles	
6.2	Research on Humans	
6.3	Research on Animals	
6.4	Research on the Environment	
<b>7</b>	<b>RIGHTS AND RESPONSIBILITIES OF THE UNIVERSITY</b>	<b>11</b>
<b>8</b>	<b>RIGHTS AND RESPONSIBILITIES OF RESEARCHERS</b>	<b>12</b>
<b>9</b>	<b>PROTECTION OF RIGHTS AND DIGNITY IN HUMAN, MEDICAL OR CLINICAL RESEARCH AND HUMAN EXPERIMENTATION</b>	<b>13</b>
9.1	Introduction	
9.2	Principles for all human or medical research	
<b>10</b>	<b>PROTECTION OF RIGHTS AND DIGNITY IN ANIMAL CLINICAL RESEARCH AND EXPERIMENTATION</b>	<b>16</b>
10.1	Introduction	
10.2	Principles for animal research	
<b>11</b>	<b>AUTHORSHIP OF RESEARCH OUTPUTS</b>	<b>18</b>
<b>12</b>	<b>PUBLICATION</b>	<b>20</b>
12.1	General principles	
12.2	Multiple outputs	

<b>13</b>	<b>SUPERVISION OF STUDENTS AND RESEARCH TRAINEES</b>	<b>22</b>
<b>14</b>	<b>DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST</b>	<b>22</b>
<b>15</b>	<b>STRUCTURES FOR OVERSEEING COMPLIANCE</b>	<b>24</b>
<b>16</b>	<b>THE UNIVERSITY OF ZULULAND RESEARCH ETHICS COMMITTEE (UZREC)</b>	<b>25</b>
16.1	Introduction	
16.2	Membership	
16.3	Terms of Reference	
16.4	Functions and Responsibilities	
<b>17</b>	<b>FUNCTIONS AND RESPONSIBILITIES OF THE UZREC IN ITS CAPACITY AS THE INSTITUTIONAL ANIMAL RESEARCH ETHICS COMMITTEE (AREC)</b>	<b>29</b>
<b>18</b>	<b>THE FACULTY RESEARCH ETHICS COMMITTEE (FREC)</b>	<b>31</b>
18.1	Introduction	
18.2	Membership	
18.3	Functions and Responsibilities	
<b>19</b>	<b>CONTINUED PROFESSIONAL DEVELOPMENT IN RESPECT OF RESEARCH ETHICS</b>	<b>32</b>
<b>20</b>	<b>INTERPRETERS</b>	<b>32</b>
<b><u>SECTION B: PROCEDURES</u></b>		
<b>21</b>	<b>THE ETHICAL CLEARANCE PROCESS</b>	<b>34</b>
21.1	Introduction	
21.2	The Application Documentation	
21.3	Submission of the Application	
<b>22</b>	<b>FREC MEETINGS AND PROCESSES</b>	<b>36</b>
22.1	FREC Meetings	
22.2	The FREC Processes	
<b>23</b>	<b>UZREC MEETINGS AND PROCESSES</b>	<b>37</b>
23.1	UZREC Meetings	
23.2	The UZREC Processes	
23.3	Review of UZREC Decisions	

<b>24</b>	<b>EXPEDITED ETHICAL CLEARANCE PROCESS</b>	<b>39</b>
24.1	Introduction	
24.2	Process	
<b>25</b>	<b>MONITORING AND REPORTING</b>	<b>40</b>
25.1	Monitoring	
25.2	Reporting	
25.3	Reporting of adverse events	
25.4	Complaints	
25.5	Review	
<b>26</b>	<b>COMPLIANCE REPORTING</b>	<b>42</b>
<b>27</b>	<b>INDEMNITY</b>	<b>43</b>
<b>28</b>	<b>DATA STORAGE AND RETENTION</b>	<b>43</b>
28.1	Research data	
28.2	Research ethics data	
28.3	Confidentiality issues	
<b>29</b>	<b>PROCEDURES FOR DEALING WITH ALLEGATIONS OF RESEARCH MISCONDUCT</b>	<b>45</b>
29.1	Introduction	
29.2	Definition of Research Misconduct	
29.3	Protection of interested parties	
29.4	The investigation	
<b>30</b>	<b>IMPLEMENTATION AND OVERSIGHT RESPONSIBILITIES</b>	<b>47</b>
<b>31</b>	<b>POLICY REVIEW</b>	<b>47</b>
<b>32</b>	<b>ACKNOWLEDGEMENTS AND REFERENCES</b>	<b>47</b>

## **SECTION A: POLICY**

### **1 PREAMBLE**

The University of Zululand (“the University”) is committed to research that is scientifically rigorous, valid and reliable. In addition, it should be conducted with integrity and in a manner that protects the rights of all participants. The University aims to promote a culture of ethical conduct amongst all its stakeholders and, in particular, it wishes to create and maintain a research environment in which the underlying values of human dignity, equality, non-discrimination, social justice and fairness are respected. Staff, students and all other participants in the University’s research endeavours are enjoined to conduct research that is socially and ethically relevant, to pursue truth, intellectual honesty and openness to ideas and to maintain the highest professional and ethical standards.

### **2 PURPOSE AND OBJECTIVES**

The purpose and objectives of this policy are:

- 2.1 To set out principles that inform the University’s quest to conduct research with integrity and respect for others.
- 2.2 To establish an institutional infrastructure that would assist in ensuring that ethical norms and standards, as well as regulatory provisions, are adhered to.
- 2.3 To set out processes and procedures to be followed in implementing the provisions of this policy.

### **3 SCOPE**

This Policy applies to:

- 3.1 All staff and students of the University and its associated entities, as well as any person or organization not affiliated to the University, who conduct research, whether on University premises or off-site, using the University’s infrastructure and/or, data, or the University’s staff, students as participants, or who conduct research in the name of, under the auspices of, or in collaboration with the University and/or its staff and students.
- 3.2 All research and research-related activities, whether in pursuit of an undergraduate or postgraduate degree or for other purposes; and it is not restricted only to activities aimed at human and animal research or the gathering of research information, such as the conduct of surveys or

interviews, the processing and analyses of research data, and the reporting of research findings.

- 3.3 Teaching-related activities such as class projects, assignments or tasks that involve the use of human or animal subjects.

## **4 DEFINITIONS**

### **Associated Entity**

An academic or support structure that the University has established or may establish to supplement, complement and enhance its mainstream academic endeavours, and which forms part of the University in some way and is ultimately accountable to the University's Council.

### **Class Project**

A classroom demonstration or practical laboratory exercise, or a research project assigned by an instructor as part of a teaching-and-learning plan of a module. Research by thesis or dissertation does not fall within this category.

### **Geographical Area**

The area of jurisdiction of the Mhlathuze Local Authority, as set out in the University's Statute (The Institutional Statute of the University of Zululand, GN 843, GG No 35784 of 12 October 2012).

### **Informed Consent**

A voluntarily confirmation by a participant in a research project signifying his or her willingness to participate in that project, after having been informed of all aspects of the project that are relevant to making an informed, rational decision to participate.

### **Mentor**

An academic staff member or a research fellow who guides another person, usually a staff member, a postdoctoral fellow or a student, in the conduct of that person's research activities. A mentor is normally not a supervisor, principal investigator, project leader or co-author.

### **Principal Investigator**

The researcher who is the primary researcher in respect of a research project, thesis or dissertation and who has sole or joint responsibility for the design, conduct, analysis and reporting of the trial or research act.

### **Project Leader**

The person responsible for the administration of a research project and the delegation of responsibilities. The project leader may, but need not be a principal investigator or a supervisor.

**Proposal**

A document that provides the background, rationale and objectives of a research project and describes its design, methodology, organisation and the conditions under which it is to be performed and managed.

**Protocol**

The description of a research project that is submitted for ethical clearance.

**Research Assistant**

Students or other persons authorised by the University, a principal investigator or a project leader to participate in a research project.

**Research Project**

Research activity of whatever nature, including research conducted by undergraduate and postgraduate students, but excluding class projects. All research projects carried out by postgraduate students and/or staff of UNIZULU, or by outside agencies but using UNIZULU-facilities, fall within this category.

**Supervisor**

A person, usually an academic staff member, who is supervising a student engaged in a research project, either solely or jointly with another person.

**Research Ethics**

Research ethics refers to the principles and practices that guide the ethical conduct of research. These should embody respect for the rights of others who are directly or indirectly affected by the research. Such rights include rights of privacy and confidentiality, protection from harm, giving informed consent, access to information pre- and post-research and due acknowledgement. Ethical conduct in research also includes the avoidance of inflicting animal suffering of any kind and protection of the environment.

**Three R's Principle**

The principle of Replacement, Reduction and Refinement which the South African National Standard requires Animal Research Ethics Committees (ARECs) to use when verifying that animal use in a research project is justified.



## 5 GUIDING PROTOCOLS

The following international and national protocols and legislation govern and inform the conduct of research and research-related activity at the University:

### 5.1 International Protocols

- 5.1.1 The World Medical Association's Declaration of Helsinki – Ethical Principles for Medical Research Involving Human Subjects (2002) ([Current version](#)).
- 5.1.2 The Belmont Report, the US Office of Human Research Protections 45 CFR 461 (for non-exempt research with human participants conducted or supported by the US ([The Report](#)).
- 5.1.3 The US Office of Human Research Protections 45 CFR 461 (for non-exempt research with human participants conducted or supported by the US Department of Health and Human Services- (HHS), 21 CFR 50, 21 CFR 56.
- 5.1.4 The International Conference on Harmonization and Technical Requirements for Registration of Pharmaceuticals for Human Use ([ICH Tripartite](#)).
- 5.1.5 The Nuremberg Code ([The Code](#)).
- 5.1.6 The International Ethical Guidelines for Biomedical Research Involving Human Subjects, prepared by the Council for International Organizations of Medical Sciences (CIOMS) in collaboration with the World Health Organization (WHO) (2002). ([The Guidelines](#)).
- 5.1.7 InterAcademy Council Responsible Conduct in the Global Research Enterprise: A Policy Report (2012). ([The Report](#))

### 5.2 National Protocols

- 5.2.1 The Constitution of the Republic of South Africa, 1996. ([The Constitution](#))
- 5.2.2 SA National Health Act No 61 of 2003. ([The Act](#))
- 5.2.3 Animals Protection Act No 71 of 1962. ([The Act](#))
- 5.2.4 The Department of Health *Ethics in Health Research: Principles, Structures and Processes* (2004). ([The Guidelines](#))
- 5.2.5 The principles for animal research are governed by the South African National Standard (SANS 10386:200X, ISBN 978-0-626-22296-3 (2002)).
- 5.2.6 A Good Practice Guide for Quality Management of Research (HEQC), 2005. ([The Guide](#))
- 5.2.7 White Paper on Science and Technology, 1996. ([The White Paper](#))

## **6 GUIDING PRINCIPLES FOR RESEARCH GENERALLY**

The following ethical principles govern the conduct of research and research-related activity at the University and will inform any compliance decisions and processes:

### **6.1 General Principles**

- 6.1.1 Research shall be conducted with scholarly integrity and excellence. Researchers shall disclose any conflict of interest.
- 6.1.2 Research results that have scientific merit shall be published, in a timely and competent manner thereby recognising society's right to have access to research findings and information.
- 6.1.3 Potential benefits resulting from research shall be brought to the attention of participants and/or relevant communities.
- 6.1.4 Compliance standards and procedures shall be transparent and evenly applied.
- 6.1.5 Researchers must only engage in research which falls within the ambit of their expertise and which complies with acceptable ethical standards.
- 6.1.6 Principal investigators must ensure that the design of their projects adheres to ethical guidelines.
- 6.1.7 Principal investigators must ensure the safety of all those associated with the research.
- 6.1.8 Confidentiality must be observed and no confidential data gathered in the research process may be divulged to a third party without appropriate consent. However, parties authorized by the UZREC may scrutinize research data in the execution of their duties, provided that appropriate confidentiality is maintained.
- 6.1.9 Compliance oversight should be conducted in a spirit of promoting research endeavours, and not to hinder research.
- 6.1.10 The authority of regulatory authorities, professional bodies and codes shall be recognised and respected.

### **6.2 Research on Humans**

- 6.2.2 Ethical reviews shall be required from all research projects involving data collected from research participants.
- 6.2.3 The primary concern of research involving human participants shall be respect for the dignity and self-esteem, safety and well-being as well as basic human rights of the participants.
- 6.2.4 Consideration will also be given to culture, language, beliefs, perceptions, customs, age and gender.
- 6.2.5 Written informed consent from participants is a prerequisite for research to begin.

6.2.6 A participant's right to both privacy and confidentiality shall be protected.

### **6.3 Research on Animals**

6.3.2 Researchers shall respect animals and be sensitive to the fact that they experience pain and stress, and may remember such experiences.

6.3.3 Animal experimentation shall be reduced or refined and ideally replaced with alternative testing methods.

6.3.4 All aspects of the Animals Protection Act shall be adhered to.

### **6.4 Research on the Environment**

6.4.2 Researchers shall conduct their research and related activities in a manner consistent with section 24 of the Bill of Rights of the Constitution of South Africa which requires that research should not produce an environment that is harmful to human health or well-being. Instead, researchers must seek the protection of the environment for the benefit of present and future generations.

6.4.3 Pollution and ecological degradation must be avoided.

6.4.4 The environment must be protected by promoting conservation.

## **7 RIGHTS AND RESPONSIBILITIES OF THE UNIVERSITY**

7.1 The University has a right to a sound research reputation and to take steps to maintain and promote such reputation.

7.2 While the University has a right to promote, develop and support particular areas of research or research projects, it shall respect the principle of academic freedom and the autonomy of researchers to conduct research of their choice and within the field of their expertise

7.3 The University shall create and maintain an enabling an environment within which researchers are able to conduct ethically-sound research, and which includes but is not limited to:

7.3.2 Providing the resources necessary for the effective implementation of this policy.

7.3.3 Senior management oversight.

7.3.4 Administrative and other infrastructural support for such research ethics committees as may be required or established in accordance with the provisions of this policy.

- 7.3.5 Ensuring that all laboratory facilities and other physical resources used or made available for research at the University are suitable for the conduct of effective and ethical research in a safe and healthy environment and meet applicable regulatory requirements.

## **8 RIGHTS AND RESPONSIBILITIES OF RESEARCHERS**

- 8.1 Researchers have the right to academic freedom, which includes the freedom to conduct scientific research of their choice.
- 8.2 Researchers must ensure that they undertake research work that falls within their fields of expertise and/or competence.
- 8.3 All researchers and related practitioners are responsible for familiarising themselves with any relevant discipline-specific ethical principles and ensuring that their knowledge is up to date.
- 8.4 Researchers are required to show commitment to high standards of ethical and professional conduct and have an obligation to ensure that their research activities and methodologies are scientifically and ethically sound and not harmful to people, animals and the environment generally, and to the Institution's credibility and reputation, in particular.
- 8.5 Primary responsibility for ensuring that these policies and procedures are adhered to rests with the principal researcher and/or project supervisor, or in the case of teaching-related activities, the lecturer setting the class project, assignment or task. In particular:
- 8.5.2 Where collaborative or team research is being conducted, the research project leader or principal investigator is obliged to ensure that members of the research team are aware of the provision of this policy and of any other applicable norms governing the conduct of research.
- 8.5.3 Where the researcher is a student conducting the particular research for academic credit, the supervisor shall be responsible for informing the student of her/his obligations in respect of the ethical conduct of research and ensuring that the student's research is conducted in accordance with the provision of this policy.
- 8.6 Notwithstanding the obligations that any other person might have, every person participating in a research or research-related activity must adhere to the provisions of this policy. Without derogating from the generality of this clause, researchers must refrain from:

- 8.6.2 Pursuing activities that are unsafe and/or do not comply with safety regulations and standards.
  - 8.6.3 Falsifying and fabricating data and/or other material.
  - 8.6.4 Plagiarism.
  - 8.6.5 Misuse of research funds.
  - 8.6.6 Pursuing any other activities that might undermine the University's research integrity.
- 8.7 Notwithstanding the obligations that any other person might have, every person participating in a teaching and learning activity that involves human and/or animal subjects must adhere to the provisions of this policy. In appropriate instances, ethical clearance may be granted in respect of a class activity as a whole. It is incumbent upon lecturers to make student investigators aware of the policy, procedures and ethical guidelines applicable to the use of human and/or animal subjects in academic affairs, to ascertain that they are able to maintain the necessary standards, and to monitor compliance.
- 8.8 Where data of a confidential nature are obtained in the course of research, confidentiality must be observed and researchers must refrain from using such data for their own personal advantage or that of a third party. Although secrecy may be necessary for a limited period in the case of contract research or non-contractual research that is under consideration for patent protection, research results and methods should however be open to scrutiny by colleagues within the Institution and, through appropriate publication, by the profession at large.
- 8.9 Members of the research community must report ethical transgressions to the UZREC.
- 8.10 Nothing in this policy should be interpreted as relieving a researcher, lecturer or research assistant of any obligations imposed upon him or her as a result of membership of a professional association; and conversely, adherence to a professional code of ethics does not in itself override the obligations that this policy imposes on persons.

## **9 PROTECTION OF RIGHTS AND DIGNITY IN HUMAN, MEDICAL OR CLINICAL RESEARCH AND HUMAN EXPERIMENTATION**

### **9.1 Introduction**

- 9.1.2 Research involving humans as subjects is important for the advancement of knowledge in the sphere of human welfare.
- 9.1.3 The general conduct of biomedical studies is guided by statements of internationally-recognized principles of human rights, including the

Nuremberg Code and the World Medical Association's Declaration of Helsinki, as revised (Helsinki IV). These principles also underlie the International Guidelines for Biomedical Research Involving Human Subjects, prepared by CIOMS and the WHO in 2002.

- 9.1.4 These and similar national codes are based on the model of clinical medicine, and often address interests of "patients" or individual "subjects". Epidemiological research concerns groups of people, and the above codes do not adequately cover its special features. Proposals for epidemiological studies should be reviewed independently on ethical grounds.
- 9.1.5 The primary purpose of medical research involving human subjects is to understand the causes, development and effects of diseases and improve preventive, diagnostic and therapeutic interventions (methods, procedures and treatments). Even the best current interventions must be evaluated continually through research for their safety, effectiveness, efficiency, accessibility and quality.

## **9.2 Principles for all human or medical research**

The principles enshrined by the Declaration of Helsinki include:

- 9.2.2 The design and performance of each research study involving human subjects must be clearly described in a research protocol.
- 9.2.3 The research protocol must be submitted for consideration, comment, guidance and approval to a research ethics committee before the study begins. This committee must:
  - 9.2.3.1 be independent of the researcher, the sponsor and any other undue influence.
  - 9.2.3.2 take into consideration the laws and regulations of the country or countries in which the research is to be performed as well as applicable international norms and standards but these must not be allowed to reduce or eliminate any of the protections for research subjects set forth in the Helsinki Declaration.
  - 9.2.3.3 have the right to monitor ongoing studies. The researcher must provide monitoring information to the committee, especially information about any serious adverse events. No change to the protocol may be made without consideration and approval by the committee. Medical research involving human subjects must be conducted only by individuals with the appropriate scientific training and qualifications. Research on patients or healthy volunteers requires the supervision of a competent and appropriately qualified physician or other health care professional. The responsibility for the protection of research subjects must always rest with the physician, researcher or other health care

professional and never the research subjects, even though they have given consent.

- 9.2.4 Medical research involving a disadvantaged or vulnerable population or community is justified only if:
  - 9.2.4.1 the research is responsive to the health needs and priorities of this population or community and
  - 9.2.4.2 there is a reasonable likelihood that this population or community stands to benefit from the results of the research.
- 9.2.5 Every medical research study involving human subjects must be preceded by careful assessment of predictable risks and burdens to the individuals and communities involved in the research in comparison with foreseeable benefits to them and to other individuals or communities affected by the condition under investigation.
- 9.2.6 Every clinical trial must be registered in a publicly-accessible database before recruitment of the first subject.
- 9.2.7 Participation by competent individuals as subjects in medical research must be voluntary. Although it may be appropriate to consult family members or community leaders, no competent individual may be enrolled in a research study unless he or she freely agrees.
- 9.2.8 Every precaution must be taken to protect the privacy of research subjects and the confidentiality of their personal information and to minimize the impact of the study on their physical, mental and social integrity.
- 9.2.9 In medical research involving competent human subjects, each potential subject must be adequately informed of the aims, methods, sources of funding, any possible conflicts of interest, institutional affiliations of the researcher, the anticipated benefits and potential risks of the study and the discomfort it may entail, and any other relevant aspects of the study. The potential subject must be informed of the right to refuse to participate in the study or to withdraw consent to participate at any time without reprisal.
- 9.2.10 Special attention should be given to the specific information needs of individual potential subjects as well as to the methods used to deliver the information. After ensuring that the potential subject has understood the information, the physician or another appropriately qualified individual must then seek the potential subject's freely-given informed consent, preferably in writing. If the consent cannot be expressed in writing, the non-written consent must be formally documented and witnessed.
- 9.2.11 Research involving subjects who are physically or mentally incapable of giving consent, for example, unconscious patients, may be done only if the physical or mental condition that prevents giving informed consent is a necessary characteristic of the research population. In such circumstances the physician or researcher should seek informed

consent from the legally authorized representative. If no such representative is available and if the research cannot be delayed, the study may proceed without informed consent provided that the specific reasons for involving subjects with a condition that renders them unable to give informed consent have been stated in the research protocol and the study has been approved by a research ethics committee. Consent to remain in the research should be obtained as soon as possible from the subject or a legally authorized representative.

- 9.2.12 At the conclusion of the study, patients entered into the study are entitled to be informed about the outcome of the study and to share any benefits that result from it, for example, access to interventions identified as beneficial in the study or to other appropriate care or benefits.

## **10 PROTECTION OF RIGHTS AND DIGNITY IN ANIMAL CLINICAL RESEARCH AND EXPERIMENTATION**

### **10.1 Introduction**

- 10.1.2 This section covers basic assessment of experimental animal health and welfare, ethical consideration for the use of animals in scientific research as well as implementing assessment techniques for pain management and humane endpoints.
- 10.1.3 Such research is governed by the South African National Standard which encompasses all aspects of the care and use of, or interaction with, animals for scientific purposes in medicine, biology, agriculture, veterinary and other animal sciences, industry and teaching. It includes their use in research, teaching, field trials, product testing, diagnosis, the production of biological products and environmental studies.
- 10.1.4 The purpose of this policy is to ensure the ethical and humane care of animals used for scientific purposes, including teaching. Its aims are to:
- 10.1.4.1 Emphasise the responsibilities of investigators, teachers and institutions using animals.
  - 10.1.4.2 Ensure that the welfare of animals is always considered.
  - 10.1.4.3 Ensure that the use of animals is justified.
  - 10.1.4.4 Prevent or minimize pain or distress where possible for each animal used in scientific and teaching activities.
  - 10.1.4.5 Ensure minimum uniform national standards of animal care and use.
  - 10.1.4.6 Minimise the number of animals used in projects in such a way that it will not jeopardise the validity of the study.



- 10.1.4.7 Promote the development and use of techniques which refine, reduce or replace animal use in scientific and teaching activities.
- 10.1.5 The South African National Standard requires that Animal Research Ethics Committees (ARECs) verify that animal use in a research project is justified and to ensure adherence to the principle of Replacement, Reduction and Refinement (“the Three R’s”).
- 10.1.6 The ability of an animal to cope with the environmental and exert controls over its life is critical for animal welfare. The overriding ethical and legal constraints on invasive, potentially harmful and exploitative studies on humans sometimes necessitate a limited use of animal subjects, provided that this does not cause unnecessary suffering in the form of deprivation, fear, stress, distress and pain which may endure. Such conditions are addressed by refinement strategies to ameliorate them as far as it is possible to do so.
- 10.1.7 Animal experiments should only be performed when no alternative is available and when the benefit of the experiment outweighs the suffering of the animal. When animals are used, there is a legal and moral obligation to safeguard welfare and minimise discomfort, since this is generally beneficial for both the animal and the experimental outcome. Discomfort and stress both before, and during the experiment can lead to non-specific effects, thus jeopardising results. Where possible, they should be anticipated, and in the event of any observed adverse reaction, animal studies should be terminated at the earliest time so as to avoid unnecessary discomfort or suffering.

## **10.2 Principles for animal research**

- 10.2.2 Researchers who use animals and institutional management should strive for the best regulation of laboratory animal use. They should ensure that animal welfare regulations and operational codes and practices are properly adhered to.
- 10.2.3 The availability to the public of regularly updated and good quality information on what animal experiments are undertaken and why they are undertaken is vital to create circumstances in which the issue of animal experimentation can be productively discussed and debated.
- 10.2.4 It must be recognised that the ethical imperative of the 'replacement' component of the three Rs principle is a primary challenge in every animal use procedure, and forms a critical part of the analysis in the ethical review process.
- 10.2.5 Sensitivity and respect for the sentience of non-human animals demands that they should be treated as organisms fully worthy of moral concern, under the stewardship of institutions and their staff.

- 10.2.6 Animal users should respect the interests of animals and not subject animals to intentions and motives which are not directly concerned with a research or teaching project, its objectives and its methodology.
- 10.2.7 Animal care staff, researchers and educators must be personally and professionally qualified.
- 10.2.8 Researchers and educators who use laboratory animals and the staff who procure, breed and care for them are personally responsible for the proper care and use of these animals. They should uphold professional standards in accordance with their academic training and their professions.
- 10.2.9 Integrity should be promoted by honesty and fairness. In particular, researchers, educators, animal care personnel and AREC members should be honest about their own limitations, competence, belief systems, values and needs, and be prepared to respect views contrary to their own.
- 10.2.10 Sensitivity in animal experimentation requires balancing scientific or teaching interests with general values and norms supporting the interests and welfare of the animal subjects.
- 10.2.11 Special care should be taken not to treat animals as mere objects. Research objectives shall always be subordinate to the humane treatment of animals.
- 10.2.12 Researchers must apply safety rules and guidelines for the preservation and protection of the health and welfare of laboratory animals when hazardous substances, micro-organisms or parasites are being worked with in experimental situations.
- 10.2.13 The responsible researcher, educator and animal care staff are to be appropriately qualified and experienced and to have facilities to ensure that all procedures conducted on laboratory animals will be undertaken with due discretion and precautions to protect the welfare of the animals.
- 10.2.14 Adequate preliminary studies of the literature pertaining to the proposed work should be undertaken to define as far as possible the risks inherent in the animal studies.
- 10.2.15 The users of laboratory animals have a responsibility to their professions, to the animals which they use, and to the public to ensure that an animal experiment is likely to yield information worth knowing, and that such information is well supported by valid experimental data and analysis of that data.

## **11 AUTHORSHIP OF RESEARCH OUTPUTS**

- 11.1 Authorship of a research output should be discussed among researchers at an early stage in a research project, and reviewed whenever there are changes in participation.

- 11.2 Where there is more than one author of a research output, one co-author (by agreement amongst the authors) should be nominated as executive author for the whole research output, and should take responsibility for record-keeping regarding the research output.
- 11.3 Minimum requirement for authorship of a research output (other than a class exercise or project, a dissertation or a thesis) is substantial participation in any one or more of the following aspects:
  - 11.3.2 Conception and design.
  - 11.3.3 Analysis and interpretation of data.
  - 11.3.4 Drafting the research output or revising it critically for important intellectual content.
  - 11.3.5 Final approval of the version to be published.
- 11.4 An author's role in a research output must be sufficient for that person to have taken some responsibility for at least that part of the output in that person's area of expertise of a part of an output critical to its main conclusion.
- 11.5 The following activities do not justify authorship:
  - 11.5.2 General supervision and administration of a research group.
  - 11.5.3 Participation solely in the acquisition of funding.
  - 11.5.4 Participation solely in the acquisition or the collection of data.
  - 11.5.5 Assistance to or mentorship of colleagues or students in publishing their research.
- 11.6 No person who is an author, as envisaged in Clauses 8.3, 8.4 and 8.5 above, may be excluded as an author without his or her permission in writing; and conversely, a person who does not qualify for authorship should not be included.
- 11.7 Research students are authors and own the copyright of their theses, dissertations or projects, in accordance with the relevant policy regulating intellectual property at the University.
- 11.8 Supervisors and co-supervisors of theses, dissertations and/or projects are not authors of such outputs, but may co-author other outputs emanating from or associated with such postgraduate research.
- 11.9 Authors should agree upon the general order of authorship as soon as it is practically possible, along with agreements on how to share data. The order should normally follow the conventions associated with their disciplines. Where

students co-publish with their supervisors, the student shall normally be cited as the first author.

- 11.10 Where the research is published one author must be given principal or corresponding author status with the responsibility for ensuring that all co-authors agree to their inclusion as authors and that no person entitled to authorship, as envisaged in Clauses 8.3, 8.4 and 8.5 above, has been excluded.
- 11.11 The authors must ensure that others who have contributed to the work are recognised in the research output. Courtesy demands that individuals and organisations providing facilities should also be acknowledged.
- 11.12 Should any conflict arise regarding authorship of a particular output, the matter should in the first instance be referred to the Dean of the relevant faculty who shall attempt to conciliate the dispute, failing which that matter shall be referred to the DVC Research and Innovation for a decision on the appropriate course of action.

## **12 PUBLICATION**

### **12.1 General principles**

- 12.1.2 Peer assessment of research outcomes is important in validating research and researchers are expected to subject their research to peer review.
- 12.1.3 It is similarly important that research is communicated to peers and the public at large. While this should ideally occur after peer appraisal, where research is reported in the public media prior to peer review, such reporting should be based on the research data and findings.
- 12.1.4 All reasonable steps must be taken to ensure that published reports, statistics and public statements about research activities and performance are complete, accurate and unambiguous.
- 12.1.5 Publications should normally acknowledge sources of financial support for the research and sponsorship that carries an embargo on such naming of a sponsor should be avoided.
- 12.1.6 University staff and students must indicate their affiliation to the University and acknowledge that the work was carried out at the University.
- 12.1.7 Deliberate inclusion of inaccurate or misleading information relating to research activity in curriculum vitae, grant applications, job applications or public statements, or the failure to provide relevant information, is a form of research misconduct. Accuracy is essential in describing the state of publication (in preparation, submitted, accepted), research

funding (applied for, granted, funding period), and awards conferred, as well as where any of these relate to more than one researcher.

## **12.2 Multiple outputs**

- 12.2.2 Publication of multiple outputs based on the same set(s) or subset(s) of data by the same author could be classified as self-plagiarism and would accordingly be unacceptable; except where there is full cross-referencing within the outputs (for example, in a series of closely-related work, or where a complete work grew out of a preliminary publication such as a thesis or dissertation, or a conference paper, and this is fully acknowledged).
- 12.2.3 An author who submits substantially similar work to more than one publisher must disclose this to the publishers at the time of submission and point out the extent of the overlap.
- 12.2.4 Although not advisable, it is not unethical to submit a previously-delivered conference paper to a journal for publication, since it is accepted academic practice that conference papers constitute work in progress aimed at soliciting comments from one peers in order to clarify and refine issues before a final product is submitted for publication. However, it would be unacceptable to submit a paper that was published in the conference proceedings to another publisher without full disclosure of the prior publication.
- 12.2.5 It is similarly not unethical to deliver a previously-delivered conference paper at another conference, where there is evidence that input received at the previous conference has been incorporated into the subsequently-delivered paper. The document should however indicate that the paper had been delivered elsewhere and has been revised.
- 12.2.6 Where substantially the same paper, without significant revision, were to be delivered more than once a real danger of unethical practices in the form of financial “double dipping” and “CV padding” arises. Such practices should preferably be avoided and are justified only if input is sought from a target audience that is substantially different from the initial audience to avoid mere lip-service being paid to the accepted rationale for duplicate presentations. Where such repeat presentations do occur, steps should be taken to ensure that funding parties are aware of the situation, that any document states clearly that it is a repeat presentation and that CVs and/or similar documents clearly note the repetition and do not represent that different papers have been delivered.

### **13 SUPERVISION OF STUDENTS AND RESEARCH TRAINEES<sup>1</sup>**

- 13.1 Heads of a department or academic entity must ensure that each postgraduate research student and or postdoctoral fellow is assigned a specific, responsible and appropriately-qualified research leader(s), and that the ratio of research students/trainees to supervisor/mentor is appropriate to ensure effective intellectual interaction and oversight of the research at all times.
- 13.2 Supervisors must comply with institutional policies regarding postgraduate supervision and research mentorships.
- 13.3 Supervisors and/or mentors must induct their students/trainees and provide them with written material on applicable national and institutional guidelines for conducting research, including institutional research policies and material covering ethical requirements for studies on human and animal studies, requirements for confidentiality, and occupational health and safety matters.
- 13.4 Supervisors and mentors are obliged to provide guidance regarding good research practice, including discussing with the student/trainee, when appropriate, relevant issues of research conduct, ethics, dissemination of research findings and intellectual property.
- 13.5 Supervisors must ensure, as far as possible, the validity of research data obtained by a student under his/her supervision.

### **14 DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST**

- 14.1 Ethical practice in conducting research requires the disclosure of any actual or potential conflict of interest and all researchers must comply with the statutory and institutional requirements as contained in the University's code of conduct.
- 14.2 Without derogating from the generality of the previous clause, a conflict of interest may arise in the following particular instances:
  - 14.2.2 Where researchers are affiliated with, or have a financial involvement in, any organisation or entity with a direct interest in the research subject-matter or materials.
  - 14.2.3 If any organisation or entity with a direct interest in the subject-matter provides direct benefits to the researchers that are not stipulated in a formal agreement with the University, such as a sponsorship of an investigation.

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<sup>1</sup> This section should be read in conjunction with the University's Postgraduate Guide.

- 14.2.4 If any organisation or entity with a direct interest in the subject-matter provides indirect benefits to researchers that are not stipulated in a formal agreement with the University, such as a gift to a researcher or a relative, the provision of materials or facilities or the support of individuals in the form of travel or accommodation expenses to attend conferences.
  - 14.2.5 Where the terms of a new grant from a funding agency require disclosure of project data from a related project and the terms of the related project grant prevent that disclosure.
  - 14.2.6 Where a researcher (or a family member) has a financial interest (equity, directorship, consultant) in a funding agency or in an agency being paid from the grant funds.
  - 14.2.7 Where a researcher employs, for benefit, a family member or close friend to provide services in connection with the research undertaken.
  - 14.2.8 Where a researcher allocates funds in the form of remuneration or expenses himself or herself out of research or departmental funds.
- 14.3 Researchers have an obligation to disclose to the Chairperson of the UZREC any affiliation with, financial involvement in, and/or any direct or indirect benefit received from any organisation or entity with a direct or indirect interest in the research subject-matter or materials.
- 14.4 When an actual or potential conflict of interest arises at the time of reporting or proposing research, and this conflict of interest has the potential to influence research and investigations, publication and media reports, grant applications, and applications for appointment and promotion, the researcher must disclose the details "in confidence" to the Chairperson of the UZREC, who must decide whether a conflict of interest exists and if so, what further action should be taken.
- 14.5 Before deciding upon the appropriate way forward, the Chairperson of the UZREC must consult with the researcher and may also consult with the funding agency or any other party to ensure that the conflict of interest does not compromise the research or the University's interests.
- 14.6 Without restricting the discretion of the Chairperson of the UZREC to decide upon an appropriate course of action, such action may be to reject or terminate a research project, or to disclose the conflict of interest to the editors of journals or the readers of published work arising from the research.
- 14.7 The provisions of this section apply equally to members of research ethics committees in the conduct of their work.

## **15 STRUCTURES FOR OVERSEEING COMPLIANCE**

- 15.1 Senate has overall oversight in respect of research ethics, but has delegated this function, in terms of this policy, to the Research Ethics Committee and other committees that are accountable to that Committee.
- 15.2 The University's research ethics compliance structures consist of the following:
- 15.2.2 The University of Zululand Research Ethics Committee (UZREC).
  - 15.2.3 Faculty Research Ethics Committees (FRECs).
- 15.3 The structures mentioned in Clause 9.2 operate as a collective and the UZREC may, without derogating from its overall responsibilities, perform certain of its functions and obligations through one of the other committees. In due course, should the need arise, the University may consider establishing a separate Animal Research Ethics Committee (AREC) and/or a Health Research Ethics Committee (HREC).
- 15.4 The committees established to implement this policy have discretion to deviate from strict application of the relevant ethical guidelines where exceptional circumstances or common sense dictate, provided that the basic principles underlying this policy are not compromised.
- 15.5 To be recognised by the relevant regulatory authorities, the University's research ethics compliance structures must
- 15.5.2 In matters involving human health:
    - 15.5.2.1 Be equipped to address all relevant issues arising from the categories of research likely to be submitted to it.
    - 15.5.2.2 Be representative of the communities in which the University is located and reflect the demographic profile of the South Africa's population.
    - 15.5.2.3 Have at least nine members, with 60% constituting a quorum.
    - 15.5.2.4 Include members of both sexes, although not more than 70% should be either male or female.
    - 15.5.2.5 Include at least two lay persons who have no affiliation to the institution, preferably from the community in which the research is to take place, and who are not currently involved in medical, scientific or legal work.
    - 15.5.2.6 Include at least one member with knowledge of, and current experience in, areas of research that are likely to be regularly considered by the ethics committee.



- 15.5.2.7 Include at least one member with knowledge of, and current experience in, the professional care, counselling or treatment of people.<sup>2</sup>
- 15.5.2.8 Include at least one member who has professional training in both qualitative and quantitative research methodologies.
- 15.5.2.9 Include at least one member who is legally trained.
- 15.5.3 In matters involving animals:
  - 15.5.3.1 Include a person with qualifications in veterinary science, or with qualifications and experience to provide comparable expertise.
  - 15.5.3.2 Include a person with demonstrable commitment to, and established experience in, furthering the welfare of animals, who is not employed by or otherwise associated with the Institution, and who is not involved in the care and use of animals for scientific purposes. The person should where possible be selected on the basis of active membership of and/or nomination by, an animal welfare organisation. When choosing this member a minimum of two nominees, nominated by separate animal welfare organizations, should be considered.

## **16 THE UNIVERSITY OF ZULULAND RESEARCH ETHICS COMMITTEE (UZREC)**

### **16.1 Introduction**

- 16.1.2 The University of Zululand Research Ethics Committee (UZREC) is a standing committee of the Senate charged with oversight of research ethics matters.
- 16.1.3 The UZREC is registered with the National Health Research Ethics Council (NHREC)<sup>3</sup> and until such time as a separate Health Research Ethics Committee (HREC) becomes necessary, shall function in that capacity.
- 16.1.4 Until such time as a separate Animal Research Ethics Committee (AREC) is warranted, the UZREC shall function in that capacity.
- 16.1.5 The primary purpose of the UZREC is to protect the dignity, rights, safety and wellbeing of human participants in research; to protect the health and welfare of animals used in scientific research and teaching; and to monitor the ethical conduct of research and teaching undertaken by and within the University, particularly in respect of:
  - (a) animals used for teaching and experimentation.

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<sup>2</sup> The guidelines indicate that such a member might be a medical practitioner, psychologist, social worker or nurse.

<sup>3</sup> Registration identity: REC-171110-030.

- (b) human subjects in research as individuals, groups or communities.
  - (c) biotechnology and genetic engineering.
  - (d) occupational hazards including biohazards which may have an effect on animals, plants and humans as well as the environment.
- 16.1.6 In addition, the UZREC will:
- (a) consider all ethical matters pertaining to research at the University including, but not limited to, conflicts of interest, authorship, relationships between researchers, and the role of the scientist in society.
  - (b) deal with any ethical issues brought to the attention of the UZREC.
  - (c) screen and approve, or otherwise, research protocols that impact on humans, animals or the environment, conducted by the University staff, students or outside affiliates, who may approach the Committee from time to time.
- 16.1.7 Members of research ethics committees will not be remunerated for work done in that capacity, but, where appropriate, ad hoc external experts may be compensated at professional rates.

## **16.2 Membership**

- 16.2.2 The UZREC comprises the following members:
- 16.2.2.1 The Deputy Vice-Chancellor Research and Innovation (Chairperson).
  - 16.2.2.2 The Deans of Faculty or their nominees.
  - 16.2.2.3 At least three, but no more than five, persons appointed by Senate, after having considered the regulatory compliance requirements stipulated in Clause 9 above.
  - 16.2.2.4 A staff member who has knowledge of and experience in professional care, counselling or treatment of people; alternatively, someone with such knowledge and experience who is not a staff member.
  - 16.2.2.5 Two members who are not researchers, drawn from the communities in which the University is located or conducts its research and who are not currently involved in medical, scientific or legal work.
  - 16.2.2.6 Any ad hoc co-opted members for dealing with particular protocols. Without derogating from the generality of this clause, and in the absence of the required expertise among standing members, the following persons shall be co-opted when any matter involving animals is being considered:

- 16.2.2.6.1 A person (who may be a staff member) with qualifications in veterinary science, or with qualifications and experience to provide comparable expertise.
- 16.2.2.6.2 A person with substantial recent experience in the use of animals in scientific or teaching activities.
- 16.2.2.6.3 A member of an animal welfare organization, appointed by the Chairperson of the UZREC after having solicited nominations from animal welfare organizations within the University's geographic area.
- 16.2.2.7 Two staff members from the Research Office tasked with the administration of this policy (in attendance).
- 16.2.3 Ordinary membership of the UZREC will be for an initial three-year term, but members may be re-appointed for one additional three-year period. The provisions of this clause may be waived where a person serves on the UZREC in order to fulfill regulatory requirements.
- 16.2.4 All committee members will be required to sign a confidentiality agreement as part of their appointment process.
- 16.2.5 The University will indemnify all committee members in respect of any legal consequences arising from bona fide decisions made as committee members.

### **16.3 Terms of Reference**

- 16.3.2 Being a committee of Senate, the UZREC's mandate stems from Senate and is subject to Senate's overarching authority.
- 16.3.3 The UZREC shall promote an environment in which researchers strive to comply with universal standards regarding ethical research and, when and where appropriate, shall advise Senate on matters involving research ethics.
- 16.3.4 The UZREC shall protect the dignity, rights, safety, and wellbeing of all participants in research and research-related activities through independent ethics-focused review of proposals and research methods, and the monitoring of all research projects within or related to the University.
- 16.3.5 The UZREC may accept for review research protocols submitted to it by researchers from institutions that are not affiliated to the University.
- 16.3.6 The UZREC shall ensure that the provisions of this policy are implemented and adhered to.
- 16.3.7 The UZREC shall have the power to co-opt ad hoc members to deal with particular protocols.
- 16.3.8 The UZREC shall have the power to assign some of its review tasks to specialist committees established in terms of this policy, but shall at no time abrogate its responsibility to ensure ethical compliance and shall,

in particular, not abrogate its responsibility to make the final decision regarding ethical clearance and compliance in any matter.

- 16.3.9 The UZREC shall oversee the activities and decisions of all Ethics Committees.
- 16.3.10 The UZREC may recommend disciplinary measures where ethical rules and principles are violated.
- 16.3.11 When strict compliance with the letter of a particular ethical requirement or guideline is not possible, the UZREC shall ensure that the proposed research is nonetheless in keeping with the spirit of the relevant requirement or guideline and the provisions of this policy.

#### **16.4 Functions and Responsibilities**

- 16.4.2 The UZREC is responsible for implementing ethics policy and procedures and will, where necessary, clarify and interpret policy, procedures and ethical guidelines and provide information to staff.
- 16.4.3 The UZREC assesses protocols submitted for research projects and class projects and, if approved, issues an ethical clearance certificate under the signature of the Chairperson of the UZREC. A certificate constitutes confirmation that the University is satisfied that the proposed research and research methods meet the ethical standards that the University requires.
- 16.4.4 The UZREC may require a project to be monitored in such manner as it deems appropriate.
- 16.4.5 The UZREC monitors the implementation of the policy in respect of all projects that it has approved and may amend the ethical clearance certificate in light of new information at its disposal.
- 16.4.6 The UZREC considers annual reports and reports submitted at the end of projects for ethical compliance in respect of the completed research and, if satisfied that the research had been conducted in an ethically sound manner, issues a Certificate of Ethical Compliance in respect of the research under the signature of the Chairperson of the UZREC.
- 16.4.7 The UZREC will investigate, and attempt to satisfy, objections concerning ethical standards in any ongoing or completed project which was subject to review by that UZREC. Where a dispute cannot be resolved the UZREC will refer the matter to Senate.
- 16.4.8 The UZREC must refer the matter to Senate where:
  - 16.4.8.1 The project supervisor is not prepared to alter the research protocol in order to conform to the suggestions of the UZREC, and the project supervisor wishes the decision of the UZREC to be reviewed.
  - 16.4.8.2 A minority of consisting of at least 30% of the UZREC members participating in the decision at a meeting of the UZREC registers dissent from a majority decision.

## **17 FUNCTIONS AND RESPONSIBILITIES OF THE UZREC IN ITS CAPACITY AS THE INSTITUTIONAL ANIMAL RESEARCH ETHICS COMMITTEE (AREC)<sup>4</sup>**

The following functions and responsibilities provide guidelines towards the operational requirements of an Animal Research Ethics Committee (AREC) and to which the UZREC, until such time as a separate AREC is warranted, must adhere:

- 17.1 Written proposals accompanied by the appropriate AREC protocol form, fully completed, should place before the AREC sufficient information to satisfy the AREC that the proposed use of animals is justified and complies with the Three R's principle.
- 17.2 Meetings should be scheduled as frequently as the volume of business demands, but not less than quarterly.
- 17.3 The process by which decisions are made shall be fair, consistent and transparent to investigators and teachers, and acceptable to all AREC members.
- 17.4 Irreconcilable differences between the AREC and an investigator or teacher shall be referred to the governing body of the institution for review.
- 17.5 AREC membership should be such that absenteeism will not result in failure to reach a quorum or lack of balance within the Committee.
- 17.6 The AREC might need to put in place procedures to deal with the immediate use of animals for the diagnosis of unexplained and severe disease outbreaks.
- 17.7 Only those scientific or teaching proposals that conform to the requirements of all relevant sections of this policy and of legislation may be approved.
- 17.8 Proposals shall be considered and approved only at meetings of the AREC and, where possible, by consensus.
- 17.9 Investigators and teachers shall be informed of decisions in writing.
- 17.10 A record of all approved projects shall be maintained.

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<sup>4</sup> For a complete discussion of the functions and responsibilities of an AREC see the South African National Standard.

- 17.11 Scientific or teaching activities involving the use of animals shall not start before written approval is given. Failure to obtain such permission shall result in projects not being recognized.
- 17.12 Pilot studies could be integral to an overall project. These enable the assessment of the feasibility and value of the project, and the potential for Refinement and Reduction.
- 17.13 AREC shall ensure through monitoring that adequate records are kept on the acquisition, breeding, health, care, housing, use and disposal of animals.
- 17.14 With due consideration of bio-safety requirements, announced and unannounced inspections of all animal housing and laboratory areas shall be conducted regularly by members of the AREC and appropriate records shall be maintained to ensure compliance with the Code17.
- 17.15 AREC shall ensure that any activity that constitutes a major breach of this policy (i.e. a breach that has immediate negative implications for animal welfare) ceases immediately and appropriate action is taken. This may include referral to the Deputy Vice-Chancellor Research and Innovation or the Vice-Chancellor. For non-compliance that has infrastructural dimensions, a reasonable time shall be given for correction, but the AREC shall be assured and kept informed that the problem is being addressed. The AREC shall initiate investigation into any suspected or alleged non-compliance with this policy, institutional policies or the Animals Protection Act, Act 71 of 1962.
- 17.16 Approved projects of long duration and the long-term continuing use of individual animals shall be reviewed at least annually by the AREC or more frequently if considered desirable.
- 17.17 Any project can be reviewed if warranted by the emergence of new information (whether scientific or pertaining to the scientific or teaching activities or investigator.)
- 17.18 The AREC shall make provisions to audit scientific and teaching activities in relation to an investigator's or teacher's compliance with a submitted protocol.
- 17.19 Where two or more members oppose a proposal, it should not be approved until the AREC has explored ways of modifying the project that might lead to consensus.
- 17.20 The AREC shall report in writing at least annually to the UZREC as Senate Committee of the University which will report to the Senate of the University.

- 17.21 Regardless of the duration of the approval, the continuation of all projects shall be subject to the receipt of written annual reports that should advise on:
- 17.21.2 What progress has been achieved.
  - 17.21.3 Problems that may have interfered with project progress.
  - 17.21.4 Number of animals used to date or in total.
  - 17.21.5 The wellbeing and animal welfare status of all animals during the study.
  - 17.21.6 Unexpected mortalities.
  - 17.21.7 Envisaged modifications, amendments, or additions.
  - 17.21.8 Whether the project has, or will be able to, achieve the stated objectives.
  - 17.21.9 Whether the project is continuing, has been completed, or discontinued.
  - 17.21.10 What publications have been produced.
- 17.22 Following a review of the annual report, the AREC may determine, on the basis of the report and further consultation with the researcher that a project may continue, be suspended, require modification or terminated.
- 17.23 The AREC shall adopt or develop a system to categorise proposals, to help identify areas of special concern.
- 17.24 Where projects are to be conducted at more than one institution, AREC approval should be sought from each institution unless responsibility has been formally delegated to one AREC.
- 17.25 When responsibility has been formally delegated to another institution, the investigator should notify the AREC in writing at his/her own institution that there is approval elsewhere for a project.
- 17.26 AREC may be approached by individuals, or organisations, which do not have direct access to an institutional AREC, yet require AREC approval before proceeding to use animals for scientific purposes.
- 17.27 The AREC shall decide, on an individual case basis, whether it is prepared to assess the proposal and oversee the project. In such cases proposals for non-institutional applicants shall clearly address the points below, in addition to all information normally required by the AREC. This arrangement should enable the institution to withdraw from the agreement if the non-institutional applicant fails to comply with directions of the AREC.

## **18 THE FACULTY RESEARCH ETHICS COMMITTEE (FREC)**

### **18.1 Introduction**

- 18.1.1 Each Faculty Board must establish a Faculty Research Ethics Committee (FREC), which shall be a sub-committee of the Faculty Board, charged with ensuring and expediting ethical compliance of research projects within the faculty, and which shall make recommendations regarding ethics applications direct to the UZREC.
- 18.1.2 The FREC shall function in accordance with the framework set out in this policy.

### **18.2 Membership**

- 18.2.1 The FREC comprises the following members:
  - 18.2.2.1 The Dean (ex officio).
  - 18.2.2.2 A person designated by Faculty (Chairperson).
  - 18.2.2.3 At least four academic staff members, appointed by Faculty, who shall normally be experienced researchers representative of the type of research conducted within the Faculty.
  - 18.2.2.4 Such ad hoc members as may be appointed by the FREC to deal with particular protocols.
- 18.2.2 Membership of the FREC will be for an initial three-year term, but members may be re-appointed for one additional three-year period.

### **18.3 Functions and Responsibilities**

- 18.3.1 The FREC reports to the UZREC and makes recommendations regarding the issuing or non-issuing of a research clearance certificate for a particular research project, or the manner in which the project should be monitored.
- 18.3.2 The FREC is responsible for promoting compliance with research ethics policy and procedures within its faculty and will, where necessary, clarify and interpret policy, procedures and ethical guidelines and provide information to staff.
- 18.3.3 The FREC serves as an initial clearing house for research ethics clearance applications emanating from its faculty and ensures that applications contain the information necessary for making an informed decision.



## **19 CONTINUED PROFESSIONAL DEVELOPMENT IN RESPECT OF RESEARCH ETHICS**

- 19.2 The Research Office shall ensure that provision is made for research ethics training for all members of the University's research community, including academic and administrative staff involved in research, undergraduate and postgraduate students and members of research ethics committees; and where appropriate, among other stakeholders.
- 19.3 All research ethics committee members shall receive the training necessary for them to execute their duties.
- 19.4 All members of research ethics committees shall engage in continuous professional development, especially after regulatory changes are made, whether in the form of special training events or presentations and discussions at committee meetings.
- 19.5 The Research Office shall prepare and disseminate accessible educational material to the University's research community.
- 19.6 The Research Office shall keep records of all formal and informal training activities undertaken.

## **20 INTERPRETERS**

- 20.2 To ensure that research is conducted with full knowledge and informed consent, data collection and related instruments must be available in a participant's home language or a language in which a participant is fully conversant.
- 20.3 Where participants are insufficiently familiar with the language in which research is to be conducted, principal investigators must ensure that:
- 20.3.1 Participant information sheets have been translated into the participant's mother tongue.
  - 20.3.2 Reputable interpreters are used to ensure the participants understand the relevant research instruments.
  - 20.3.3 Reputable interpreters are present during discussions with the participants.
  - 20.3.4 Interpreters are independent; provided that in low-risk incidences, a family member or friend of the participant may be used.

## **SECTION B: PROCEDURES**

### **21 THE ETHICAL CLEARANCE PROCESS**

#### **21.2 Introduction**

- 21.2.1 All research conducted at the University shall be approved either by the Research Committee or by the Higher Degrees Committee of Senate.
- 21.2.2 In those instances where an ethical clearance certificate is not submitted together with the research proposal documentation, such approval will be conditional upon ethical clearance for the research having been obtained.
- 21.2.3 No experimental research, empirical research or data collection by any staff member or student affiliated to the University, or at the University, in its name, or associated with the University in any way, may commence without a UZREC ethical clearance certificate indicating that such research may commence. This clause does not prevent the undertaking of preliminary research for proposal or research instrument development or literary reviews from being conducted.
- 21.2.4 The UZREC will normally not consider projects for approval where the data has already been collected. Exception may include instances where a researcher has relocated to the University subsequent to the collection of data or where data was collected prior to the establishment of a fully-functional ethics regime within the Institution.
- 21.2.5 While decision-making processes are to be transparent, it is also imperative that all research ethics committee members adhere to the necessary confidentiality and privacy requirements that might be associated with particular research projects.

#### **21.3 The Application Documentation**

- 21.3.1 The person seeking ethical approval for proposed research shall prepare the following documentation, as appropriate:
  - (a) A completed Research Ethics Protocol/Application form.
  - (b) A fully-motivated project/research proposal stating and/or containing:
    - (i) A description of the research, including a clear statement on whether or not the research involves any of the following: human health, animals, vulnerable people, therapeutic research involving children and/or sensitive issues regarding

rights, beliefs, perceptions, customs and cultural heritage issues.

- (ii) The research method adopted, why it is preferable over alternative methods.
  - (iii) Plans for consulting participants and/or communities on their involvement, for keeping them informed.
  - (iv) How the research will be published and the nature of the report backs to participants and/or communities on the results of the research.
  - (v) Whether there are any special health and safety considerations that need to be considered, for participants as well as researchers.
- (c) A participant's informed consent form.
  - (d) Informed consent from parent/guardian form.
  - (e) All data collection/survey instruments, e.g. questionnaires, with translation into the appropriate language(s).
  - (f) A description of any other research material that will be used, with copies/examples, e.g. information sheets, advertisements and letters.
  - (g) Copyright clearance or permission to use survey instruments.
  - (h) Proof of permission to access sites/information/participants.
  - (i) Conflict of interest form, whether in respect of researchers, funders, or participants.

21.3.2 Application documentation must be prepared in both electronic and hard copy formats.

## **21.4 Submission of the Application**

21.4.1 A hard copy and an electronic version of all applications for ethical clearance shall be submitted to the Research Office in the first instance. This is a compulsory requirement and an application will not be processed if this requirement is not met.

21.4.2 Research Office staff shall:

- (a) record the date on which the application is lodged.
- (b) determine the nature of the research involved and the process to be followed.
- (c) allocate a reference number to the application.
- (d) record both versions of the documentation in the Office's filing system.

21.4.3 Where the nature of the research is such that an expedited process can be followed, the Research Office staff shall immediately distribute the electronic version to the relevant FREC for a recommendation.

21.4.4 Once a month, on a stipulated date, Research Office staff shall assess the remaining electronic applications and report on each faculty's

applications to the respective FREC Chairpersons so that they can consider whether or not any extraordinary FREC meetings are warranted.

- 21.4.5 Should a FREC Chairperson decide to call an extraordinary FREC meeting, the Research Office staff shall prepare a provisional agenda before submitting the material to the Registrar's Division for processing.
- 21.4.6 The Committee Section in the Registrar's Division shall process the documentation according to its normal procedures and distribute them, along with the agenda and minutes of the previous meeting, at least three days prior to a FREC meeting.
- 21.4.7 In order to protect any vested or future rights and interests, confidentiality of all documentation and data contained therein must be assured.

## **22 FREC MEETINGS AND PROCESSES**

### **22.2 FREC Meetings**

- 22.2.1 FRECs shall normally meet once a term, but may, where the number of applications warrants it, meet more often.
- 22.2.2 The FREC Chairperson may call extraordinary meetings as and when necessary.
- 22.2.3 Provided that all such decisions are referred to a formal FREC meeting for noting, FRECs may conduct their business electronically in the following circumstances:
  - (a) Where an expedited process is followed.
  - (b) Where the FREC Chairperson is satisfied that a matter requires urgent attention.
- 22.2.4 Decisions must be made in a fair, consistent and transparent manner, preferably by consensus, otherwise by simple majority vote.
- 22.2.5 A quorum shall be 50% of FREC members.

### **22.3 The FREC Processes**

- 22.3.1 Prior to making a recommendation, a FREC will review ethical clearance application templates, research proposals, research questionnaires, consent forms, conflict of interest forms and/or any other relevant research documentation.
- 22.3.2 Ethical clearance for a particular project will not be considered without the completed protocol and the research proposal; but where other documents are not submitted, FREC, if satisfied with the applicant's reasons for not submitting the required documentation, may consider

granting provisional clearance pending the submission of particular documentation.

22.3.3 The FREC may:

- (a) Recommend to the UZREC that clearance be granted.
- (b) Recommend to the UZREC that clearance be granted subject to certain specified conditions.
- (c) Decline to make a recommendation to the UZREC and refer the application back to the applicant, with reasons for the decision and suggested amendments on how to meet the requirements of this policy.

22.3.4 All FREC recommendations must be recorded in its minutes and the Chairperson must within two days complete in respect of each application an ethical clearance application cover sheet which records FREC's recommendation to the UZREC and submit the cover sheet and all documentation considered by the FREC to the Research Office.

22.3.5 Where a matter has been referred back and an applicant is unable to agree to the FREC's suggestions, or where an applicant wishes a FREC decision to be reviewed, the matter shall be referred to the UZREC, whose decision shall be final.

22.3.6 Should any member of the FREC disagree with a majority decision, that fact should be recorded and made known to the UZREC; and any dissenting member may provide the UZREC with reasons for such dissent.

22.3.7 If ad hoc members were consulted in the course of making a decision, the FREC should inform the UZREC of that fact.

22.3.8 The Research Office shall record and retain on file all documentation submitted to and/or considered by the FREC, and thereafter submit the documents to the UZREC.

## **23 UZREC MEETINGS AND PROCESSES**

### **23.2 UZREC Meetings**

23.2.1 The UZREC shall normally meet twice a term, but may, where the number of applications warrants it, meet more often.

23.2.2 The UZREC Chairperson may call extraordinary meetings as and when necessary.

23.2.3 Provided that all such decisions are referred to a formal UZREC meeting for noting, the UZREC may conduct its business electronically in the following circumstances:

- (a) Where an expedited process is followed.
- (b) Where the UZREC Chairperson is satisfied that a matter requires urgent attention.

- 23.2.4 Decisions must be made in a fair, consistent and transparent manner, preferably by consensus, otherwise by simple majority vote.
- 23.2.5 A quorum shall be 60% of UZREC members.

### **23.3 The UZREC Processes**

- 23.3.1 Once a month, on a stipulated date, Research Office staff shall coordinate all applications received from FRECs and consult with the UZREC Chairperson on whether or not an extraordinary UZREC meeting is warranted.
- 23.3.2 Should a FREC Chairperson decide to call a UZREC meeting, the Research Office staff shall prepare a provisional agenda before submitting the material to the Registrar's Division for processing.
- 23.3.3 Prior to deciding a matter, the UZREC will review ethical clearance application templates, research proposals, research questionnaires, consent forms, conflict of interest forms and/or any other relevant research documentation.
- 23.3.4 Ethical clearance for a particular project will normally not be considered without the completed protocol, the research proposal and a FREC recommendation.
- 23.3.5 The UZREC may:
  - (a) Grant ethical clearance.
  - (b) Grant ethical clearance subject to certain specified conditions.
  - (c) Decline to grant ethical clearance and refer the application back to the applicant, with reasons for the decision and suggested amendments on how to meet the requirements of this policy.
  - (d) Request principal Investigators to make representations to the UZREC in order to provide information which may assist the Committee in making an informed decision about the proposed research protocol.
  - (e) Require a project to be monitored in a specific manner.
  - (f) Specify specific methods of reporting progress.
- 23.3.6 All UZREC decisions must be recorded in its minutes.
- 23.3.7 Research Office staff must within five days of a UZREC decision:
  - (a) Communicate in writing with unsuccessful applicants and, where applicable the supervisor, as well as the Chairperson of the relevant FREC, informing them of the UZREC decision, the reasons for that decision and their recourse to appeal.
  - (b) Prepare an ethical clearance certificate in respect of each successful application for the UZREC Chairperson's signature.
  - (c) The Research Office shall forward the signed ethical clearance certificates to the applicants and, where applicable, supervisors.

- 23.3.8 Principal investigators have the right to re-apply for ethics approval in instances where applications have been refused, withdrawn or suspended.
- 23.3.9 UZREC approval constitutes ethical approval as required by regulators, funding agencies or sponsors.
- 23.3.10 The Research Office shall retain on file all documentation submitted to and/or considered by the UZREC, as well as records of all UZREC decisions.

## **23.4 Review of UZREC Decisions**

- 23.4.1 The UZREC shall refer a matter to Senate where:
  - (a) The Principal Investigator refuses to adjust the research protocol as suggested by the UZREC, and the Principal Investigator wishes the decision to be reviewed.
  - (b) When disputes or objections are not satisfactorily resolved within the UZREC.
- 23.4.2 Senate's decisions shall normally constitute final resolution of any matter referred to it in terms of this policy. However, in an exceptional instance, Senate may wish to refer a matter to a regulatory authority.

## **24 EXPEDITED ETHICAL CLEARANCE PROCESS**

### **24.2 Introduction**

- 24.2.1 An expedited ethical clearance process may be followed in the following instances:
  - (a) Where the research involves desktop, library work or laboratory work only.
  - (b) Where data will be collected but not from human participants or animals.
  - (c) Where some data collection activity will take place, but the research raises minimal levels of ethical concern AND ethical clearance is urgently required.
  - (d) In exceptional cases, where it is in the public interest to expedite the process.
- 24.2.2 Expedited review may not be followed where the research involves human health and/or animals, children and/or vulnerable people.

### **24.3 Process**

- 24.3.1 Applications shall be submitted to the Research Office and shall be recorded in the usual manner.

- 24.3.2 Research Office staff shall assess whether or not the application process could be expedited and if in doubt, they shall request a ruling from the FREC Chairperson or UZREC Chairperson.
- 24.3.3 Where an expedited process is appropriate, Research Office staff will forward electronic versions of the application to the FREC.
- 24.3.4 Where the nature of the research is such that an expedited process can be followed, the Research Office staff shall immediately distribute the electronic version to the relevant FREC for a recommendation.
- 24.3.5 The FREC may deal with the matter electronically, and in such an instance the recommendation to submit the application to the UZREC requires the approval of a simple majority of FREC members entitled to vote.
- 24.3.6 Should a FREC member object to a matter being expedited, the Chairperson shall record that objection and the reasons therefor and thereafter may:
  - (a) Hold the matter over and place it on the agenda of next FREC meeting.
  - (b) Submit the matter to the UZREC for a decision.
- 24.3.7 Normal approval principles set out in this Policy, especially in Clauses 6 and 7 above, shall apply.
- 24.3.8 Upon the required majority having been attained, the FREC Chairperson shall within two days complete an ethical clearance application cover sheet and submit it and any additional documentation considered by the FREC to the Research Office.
- 24.3.9 The Research Office shall record and retain on file all documentation submitted to and/or considered by the FREC, and thereafter submit the documents, together with the ethical clearance application cover sheet to the UZREC.
- 24.3.10 The UZREC may deal with the matter electronically, and any decision requires the approval of 60% of FREC members entitled to vote.
- 24.3.11 Upon the required majority having been attained, the UZREC Chairperson shall notify the Research Office staff of the decision and cause the ethical clearance certificate to be processed in the normal manner.
- 24.3.12 All FREC and UZREC decisions made electronically shall be placed on the agenda of the committee meeting following that decision and formally noted in the minutes of that meeting.

## **25 MONITORING AND REPORTING**

### **25.2 Monitoring**

- 25.2.1 Principal investigators and supervisors shall in the first instance be responsible for monitoring compliance with research ethics obligations



generally as well as any specific obligations that the UZREC may impose in a particular instance.

- 25.2.2 Principal Investigators shall keep full records of all steps taken to comply with ethical obligations. In particular, monitoring of projects involving animals shall include keeping records of acquisition, breeding, health, care, housing, use and disposal of animals.
- 25.2.3 The UZREC may specify additional monitoring requirement and/or specific methods of monitoring a research project, the nature and the frequency of such monitoring being dependent upon the risk factors related to the research.
- 25.2.4 The UZREC retains the right to monitor or investigate any research project falling within this policy at any time, and to inspect any facility, equipment or process associated with such research.
- 25.2.5 Inspections may occur on notice or randomly, and in the presence of a person involved in the research, preferably the Principal Investigator. Only in most exceptional and urgent instances shall inspections be conducted without a researcher being present; and in such instances the inspector shall inform the Principal Investigator, failing which another person involved in the research, immediately upon completion of the investigation or, if where attempts to contact them have been unsuccessful, within a reasonable period.

### **25.3 Reporting**

- 25.3.1 All Principal Investigators shall normally report annually on the ethical issues pertinent to their research and specifically on any conditions that the UZREC may have imposed when granting the initial ethical clearance certificate.
- 25.3.2 At the end of each project, the Principal Investigator shall provide a close-out report, which shall form the basis of any ethical compliance certificate that might be required. No higher degree shall be awarded without such a report and ethical compliance certificate; and the University may withhold further funding to a researcher pending the submission of such a report.
- 25.3.3 UZREC may stipulate a different reporting cycle depending upon the nature of the risk factors related to the project.

### **25.4 Reporting of adverse events**

- 25.4.1 Principal investigators shall reporting immediately to the UZREC Chairperson any breach or threat of a breach of ethical obligations and/or anything that could materially affect ethical compliance and warrant a review of the protocols, including, but not limited to:
  - (a) proposed changes to the protocol.

- (b) serious/adverse effects on participants.
  - (c) unforeseen events that may affect ongoing acceptability of the project.
  - (d) the project being halted prematurely.
  - (e) whether any activity has constituted a serious breach of ethics.
- 25.4.2 In such instances, the project must be halted immediately and appropriate remedial action must be taken.
- 25.4.3 A full report must be submitted to the UZREC Chairperson within five days of discovery of the ethical breach or threat of a breach.

## **25.5 Complaints**

- 25.5.1 All citizens have the right and responsibility to report unethical or questionable research activities and accordingly, anyone has the right to forward complaints regarding research ethics to the UZREC, which shall investigate the complaint and take appropriate action.
- 25.5.2 If the response from the UZREC is not satisfactory, then the appropriate regulatory authority may be approached.
- 25.5.3 Whistleblowers have the right to anonymity.
- 25.5.4 Researchers have the right to fair and impartial investigation, as stipulated in this policy, with recourse to appeal.

## **25.6 Review**

- 25.6.1 Following any monitoring or investigation activity, or a report of any nature, the UZREC shall review the matter and may amend the ethical clearance certificate in which event the initial certificate is revoked and replaced by the new certificate.
- 25.6.2 The UZREC may, based on the review, determine that the project continues, be suspended, requires modification or be terminated.
- 25.6.3 Recommendations made subsequent to review, may include random inspections of research sites, data, consent forms, records of interviews, and prior consent forms.
- 25.6.4 On receipt of the initial notification and the subsequent report of an adverse event, the UZREC Chairperson shall notify all members of the UZREC and take appropriate action, which shall include requesting an emergency meeting of the UZREC or establishing an ad hoc subcommittee to review and revise the scope of the research protocol.

## **26 COMPLIANCE REPORTING**

The UZREC shall report to the NHREC as required. Such reports will ordinarily include information related to the membership and composition of the UZREC; the number of meetings held; confirmation of participation of members; the number of

protocols presented to the UZREC and the number approved and not approved; monitoring and compliance activities and the complaints procedure and number of complaints received, including outcomes.

## **27 INDEMNITY**

27.2 The University accepts legal liability for bona fide decisions and advice given by members of its ethics committees and staff who administer this policy and indemnifies them from any liability relating to the bona fide discharge of their duties.

27.3 The University shall take out insurance to cover committee members and administrative staff who are required to act in terms of this policy.

## **28 DATA STORAGE AND RETENTION**

### **28.2 Research data**

28.2.1 Wherever possible, original data must be retained in the department or research entity in which they were generated. Individual researchers should hold copies of the data for their own use. However, retention solely by the individual researcher provides little protection to the researcher or the University in the event of an allegation of falsification of data. When data is obtained from limited access databases, or via a contractual arrangement, the location of the original data must be identified, or key information regarding the database from which it was collected and this must be retained by the researcher or research unit. In all cases, prior to the publication of research findings Location of Data Form must be completed.

28.2.2 Data related to publications must be available for discussion with other researchers for as long as interest and discussion persists following publication.

### **28.3 Research ethics data**

28.3.1 Data (including electronic data) collected in the course of implementing and administering this policy must be recorded and stored in a durable and appropriately-referenced format.

28.3.2 Data management should comply with relevant privacy protection laws and regulations.

28.3.3 Data must be held for an appropriate period to allow access for reference and monitoring purposes, and for data that is published, for as long as interest and discussion persists following publication.

28.3.4 Without derogating from the provisions of the above clause, the minimum period for retention of all research ethics data shall be five years from the date the granting of an ethical clearance certificate or the date of granting an ethical compliance certificate, whichever is the later date; while for research involving animals or human health, the period for retention shall be fifteen years.

## **28.4 Confidentiality issues**

28.4.1 Confidentiality agreements will be developed to protect intellectual property rights (see UNIZULU Intellectual Property Policy) belonging to the University, or to pass on obligations of confidence to others in relation to confidential information received by the University. Where such agreements limit free publication and discussion, limitations and restrictions must be explicitly agreed.

28.4.2 Copies of all confidentiality agreements relating to research falling within the ambit of this policy should be lodged with the Research Office as soon as they have been concluded. Should any reason exist why this cannot be done, the researcher shall inform the Deputy Vice-Chancellor, Research and Innovation who shall then attempt to resolve the issue in a manner that protects the interests involved.

28.4.3 Where confidentiality provisions apply (for example, where the researchers or the University have given undertakings to third parties, such as the subjects of the research), it is desirable for data to be kept in a way that reference to them by third parties can occur without breaching such confidentiality.

28.4.4 The researcher is responsible for enquiring into whether confidentiality agreements apply and the Head of Department or the research entity is responsible for informing researchers of their obligations with respect to these provisions.

28.4.5 Researchers are responsible for ensuring appropriate security of any confidential material, including that held in electronic media. Where computing systems are accessible through networks, particular attention to security of confidential data is required. Security and confidentiality must be assured in a way that copes with multiple researchers and the departure of individual researchers.

28.4.6 The provisions of this clause apply equally to members of committees responsible for research and research administrators, with the necessary changes.

## 29 PROCEDURES FOR DEALING WITH ALLEGATIONS OF RESEARCH MISCONDUCT<sup>5</sup>

### 29.2 Introduction

- 29.2.1 The UZREC and any head of department, dean and senior administrator are empowered to institute disciplinary steps, via the normal institutional channels, against researchers who violate ethics guidelines.
- 29.2.2 Any research involving risk to animals, humans or the environment, that is conducted by persons to whom this policy is applicable without prior ethical clearance approval will be regarded as a transgression of research ethics and the UZREC may act against such transgressions, within the scope of the university disciplinary policies and procedures.
- 29.2.3 The UZREC may appoint standing or ad hoc subcommittees to investigate ethical transgressions that fall under its jurisdiction.

### 29.3 Definition of Research Misconduct

- 29.3.1 "Misconduct" or "scientific / academic misconduct" is taken here to mean misrepresentation, fabrication, falsification, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, conducting, or reporting research and for recording research activity in curricula vitae or similar documents. It includes the misleading ascription or credit of authorship including the listing of authors without their permission, attributing work to others who have not in fact contributed to the research, and the lack of appropriate acknowledgement of work primarily produced by a research student/trainee or associate. It does not include honest errors or honest differences in interpretation or judgments of data.
- 29.3.2 Examples of research misconduct include, but are not limited to, the following:
- (a) *Misappropriation*. A researcher or reviewer shall not intentionally or recklessly:
- 29.3.2.a.1 Engage in plagiarism, as understood and defined in the University's Plagiarism Policy.
- 29.3.2.a.2 Make use of any information in breach of any duty of confidentiality associated with the review of any manuscript or grant application.

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<sup>5</sup> This section should be read in conjunction with the University's Plagiarism Policy as well as applicable staff and/or student disciplinary codes.

29.3.2.a.3 Intentionally omit reference to the relevant published work of others for the purpose of inferring personal discovery of new information.

(b) *Interference.* A researcher or reviewer shall not intentionally and without authorisation take or seize or materially damage any research-related property of another, including, but not limited to the apparatus, reagents, biological materials, writings, data, hardware, software, or any other substance or device used or produced in the conduct of research.

(c) *Misrepresentation.* A researcher or reviewer shall not with intent to deceive, or in reckless disregard for the truth:

29.3.2.c.1 State or present a material or significant falsehood.

29.3.2.c.2 Omit a fact so that what is stated or presented as a whole states or presents a material or significant falsehood.

## **29.4 Protection of interested parties**

29.4.1 Deans and Heads of Department should advise on integrity in research. Their tasks include giving confidential advice to staff and to research students/trainees about what constitutes research misconduct, the rights and responsibilities of a potential complainant, and the procedures for dealing with allegations of research misconduct within the University.

29.4.2 Care should be taken when dealing with allegations of research misconduct. When an allegation is made, all interested parties must be protected. These interested parties include:

(a) The person bringing the allegation.

(b) The person against whom the allegation is made.

(c) Staff, students and trainees working with persons making an allegation, or with persons against whom an allegation is made.

(d) Journals and other media reporting research subject to suspected, alleged, or demonstrated research misconduct.

(e) Funding bodies supporting persons or research involved.

## **29.5 The investigation**

Procedures involving the investigation of misconduct or serious misconduct shall form:

29.5.1 Academic teaching and research staff, be dealt with in accordance with the current UNIZULU Academic Staff Agreement.

29.5.2 Other general staff, be dealt with in accordance with UNIZULU Human Resources Guidelines on Handling Unsatisfactory Job Performance and Unsatisfactory Job-Related Behaviour: General Staff.

29.5.3 Students, be dealt with in accordance with the Statute and the Regulations for Student Conduct and Discipline in the University Prospectus.

### **30 IMPLEMENTATION AND OVERSIGHT RESPONSIBILITIES**

30.2 The project owner of this Policy is the Deputy Vice-Chancellor, Research and Innovation, who shall ensure that the policy provisions are implemented and that it is presented for revision and review at the appropriate time.

30.3 The various FRECs and the UZREC shall in the first instance oversee compliance in respect of the matters that fall within their jurisdictions.

30.4 Senate has overarching oversight responsibility.

30.5 Ethical compliance management rests with the Office of the Deputy Vice-Chancellor, Research and Innovation and the Research Office.

### **31 POLICY REVIEW**

31.2 Council shall review the policy on a three-yearly cycle.

31.3 On recommendation of the UZREC, Senate may review and amend Section B and any annexures of a policy at any time, in which event the amendments take effect on the date of the Senate approval.

31.4 The policy owner may review amend any annexures that contain or illustrate forms or documents for effective administration and/or management at any time.

31.5 Nothing in this clause shall prevent Council from reviewing this policy at any time prior to the stipulated three-year cycle, in which event a new cycle shall commence from the date of such review.

### **32 ACKNOWLEDGEMENTS AND REFERENCES**

32.2 In drafting this policy substantial reliance was placed on Research Ethics Policies of the University of Fort Hare and the Mangosuthu University of Technology. Permission to use some of their material verbatim is acknowledged and appreciated.

32.3 The following documents were consulted in the drafting of both the original Fort Hare document and this document:

- 32.3.1 Human Sciences Research Council Research Ethics Committee Terms of Reference.
- 32.3.2 University of Fort Hare Research Ethics Policy.
- 32.3.3 University of Pretoria Terms of Reference and Standard Operating Procedures.
- 32.3.4 Stellenbosch University Health Research Ethics Committees Standard Operating Procedures and Guidelines.
- 32.3.5 The Belmont Report.
- 32.3.6 InterAcademy Council Responsible Conduct in the Global Research Enterprise: A Policy Report (2012)
- 32.3.7 Guidelines on Ethics for Medical Research, SA Medical Research Council (1993).
- 32.3.8 Handbook for the use of Animals in Neuroscience Research, Society for Neuroscience (USA).
- 32.3.9 SANS10386:200X ISBN 0-626- Edition 1, 2002.

#### 32.4 General reference works included:

- 32.4.1 Cameroon Bioethics Initiative. CAMBIN ethical review committee standard operating procedures, 2008.
- 32.4.2 Canadian Council for Animal Care. Guidelines on animal use protocol review 1997. Downloaded on 06/05/2002.
- 32.4.3 House of Lords Session 2001- 02. Select Committee on Animals in Scientific Procedures, Volume I Report.
- 32.4.4 Remfry J. Ethical Aspects of Animal Experimentation. In: Tuffery AA, ed. Laboratory Animals: An Introduction for New Experimenters. New York: John Wiley & Sons, 1987.
- 32.4.5 South African Medical Research Council. Guide to Ethical Considerations in Medical Research. Parowvallei, Cape Town: South Africa Medical Research Council, 1979.
- 32.4.6 South African Medical Research Council. Ethical Considerations in Medical Research. Parowvallei, Cape Town: South African Medical Research Council, 1987.
- 32.4.7 South African Medical Research Council. Guidelines on Ethics for Medical Research. Parowvallei, Cape Town: South African Medical Research Council, 1993.
- 32.4.8 World Medical Association declaration of Helsinki. Ethical principles for medical research involving human subjects. Adopted by the 15<sup>th</sup> WMA General Assembly, Helsinki, Finland, June 1964, and amended by the 59<sup>th</sup> WMA General Assembly, Seoul.
- 32.4.9 The University of Western Australia's Research website: <http://www.research.uwa.edu.au/staff>