

**REQUIREMENTS FOR THE  
APPLICATION FOR  
ETHICAL CLEARANCE**

**SCHOOL OF GRADUATE STUDIES, UEW**

## Requirements for the Application for Ethical Clearance

1. The application has been grouped into four main sections – A, B, C and D. All these forms and requirements should be done on separate pages. Please complete all sections before it will be considered for ethical review. Submit one (1) **neatly comb bound** hard copy of the proposal and all supporting documents (i.e. letters, consent form, checklist, data collection instruments, CV.) to the School of Graduate Studies, UEW. Additionally, the applicant shall send a soft copy of all documents to the email, [ethicalreview@uew.edu.gh](mailto:ethicalreview@uew.edu.gh). The completed documents should reach the office, at least, two (2) months before the applicant's intention to go for data collection/fieldwork.
  - a. **Section A** requires the applicant to provide some background information about him/herself and the study being conducted.
  - b. **Section B** is the format for presenting a research proposal for the purpose of ethical clearance.
  - c. **Section C** is the Informed Consent Form for the proposed research participants.
  - d. **Section D** is the Checklist for the applicant to make sure that all ethical standards have been observed in the proposal presented for ethical clearance.
2. An application letter for ethical clearance by the applicant should be submitted. For other (collaborating) institutions, a letter of approval from the institution should be attached.
3. For students, a cover letter signed by the Head of Department should be added.
4. Add data collection instrument(s).

## Guidelines for,

1. *collecting data from vulnerable in the society (children, persons living with disability, aged, refugees, etc.)*
  - The applicant(s) shall indicate the type of vulnerability of the research participants; and
  - Provide a brief write-up on how data will be collected in order not to worsen their situation.
2. *handling or dealing with discomfort.*
  - The applicant(s) shall provide a brief write-up on how discomfort (traumatic situation, recount of experience, psychological distress, etc.) will be dealt with or handled. (For example, referral to psychologist or a counsellor; having a psychologist on standby, seeking the participant's approval to continue with the research, etc.)
3. *mitigating physical harm (exposure to chemicals, virus, offensive smell, injury, etc.) and psychological harm (exposure to distress, humiliation, verbal abuse, intimidation, etc.)*
  - applicant(s) shall provide a write-up on how physical harm will be prevented and indicate how participants will be protected.
  - applicant(s) must indicate how psychological harm would be handled in case of occurrence.

## **Operational definitions**

1. **Consent** - decision to participate as a respondent in the research or not.
2. **Agreement** - what has been accepted or signed to be followed during the research between the researcher(s) and the respondent(s).
3. **Assent** - consent given by children or persons unable to give informed consent to actually participate in the research

## **Formatting**

1. Use Times New Roman font style and 12-point font size.
2. 1.5 line spacing
3. Paper size should be A4.
4. Margins:  
Left – 3.0cm and top, bottom and right - 2.5cm
5. Proposal should not exceed 15 pages.
6. Merge the soft copies into a single Word document / PDF ensuring that the contents are organized in a logical and sequential manner, as outlined in the requirements.

## **NB:**

For further information, contact School of Graduate Studies, UEW or

[ethicalreview@uew.edu.gh](mailto:ethicalreview@uew.edu.gh)

**APPLICATION FORM**

**SECTION A**

**BACKGROUND INFORMATION**

(Please type in your responses on this page)

**Title of Proposal:**.....

**Principal applicant/investigator:** (Name, Qualification (Specialty), Department, Postal Address, Telephone number, email address)

.....  
.....

**Co-Principal applicant/investigator(s) (if any):** (Name, Qualification (Specialty), Department, Postal Address, Telephone number, email address)

**UEWIRB Number** (Proposal number to be provided by the UEWIRB Office):.....

**UEWIRB Approval Date** (if applicable):.....

**Department/Faculty** (if applicable):.....

**For other (collaborating) institution(s), name of institution(s)**.....

.....

**Source(s) of Funding:**.....

**Type of Research:** (Biomedical/Social/Behavioural/Physical Sciences, etc.).

.....

.....

## **SECTION B**

### **FORMAT FOR PRESENTING PROPOSAL**

DETAILS OF PROPOSAL: This should be the format of the full proposal

- 1. Synopsis** (Not more than 250 words)
  
- 2. Introduction/Rationale**
  
- 3. Justification/Statement of the Problem**
  
- 4. Purpose**
  
- 5. Objective(s) of study**
  
- 6. Research questions/Hypotheses**
  
- 7. Methodology**
  
- 8. References**
  
- 9. Work plan (Timelines)**
  
- 10. Budget**

**SECTION C**  
**INFORMED CONSENT FORM**

**(a) Title:** *[Name of research project]*

**(b) Principal Investigator:** *[Name]*

**(c) Address:** *[Name of institution or company and complete address]*

**(d) General Information about Research**

*(State clearly the objective(s) of the research. There must be a statement of expected duration of the participation, procedures to be followed and what the participant(s) is/are supposed to do.)*

**(e) Procedures (Tick as appropriate)**

(i) Questionnaire

(ii) Interview

(iii) Focus Group Discussion

(iv) Observation

(v) Other (specify)

.....

**(f) Explain the reasons why a particular person is being selected to take part in the study**

*(e.g. You are being invited to take part in this discussion because we feel that your experience as a social-worker can contribute much to this discussion).*

**(g) The expected duration of data collection**

*(e.g. 40-75 minutes).*

**(h) Possible Risks and Discomforts**

*(Description of any reasonably foreseeable risks or discomfort to the participant. Include physical, social and psychological risk if anticipated.)*

**(i) Possible Benefits**

*(Benefits to individuals and/or society that can be reasonably expected.)*

**(j) Confidentiality**

*(A statement describing the extent, if any, to which confidentiality of records identifying the respondents will be maintained. For example, “We will protect information about you to the best of our ability. You will not be named in any reports”).*

**(k) Compensation**

*(If there are any compensation packages either in cash or kind available for participants it must be clearly spelt out in terms of the actual amount to be given or gift to be given, conditions for receiving the package and when it will be given. Usually compensation should be given at the end of the study).*

**(l) Additional Cost**

*(Any additional cost to the participant that may result from participation in the research should be stated).*

**(m) Voluntary Participation and Right to Leave the Research**

*(A statement that the research is voluntary and participant can withdraw without penalty)*

**(n) Termination of Participation by the Researcher**

*(Any anticipated circumstances under which the participant's participation may be terminated by the investigator without regard to the participant's consent must be specified).*

**(o) Contact for Additional Information**

*(Give an information of whom to contact for answers to pertinent questions about the research and whom to contact in case of research-related injury. Give names and mobile numbers that are accessible to the participant)*

**(p) Your rights as a Participant**

This research has been reviewed and approved by the University of Education, Winneba Institutional Review Board (UEWIRB). If you have any questions about your rights as a research participant you can contact the Deputy Registrar at the School of Graduate Studies, UEW between the hours from 8:00am and before 5:00pm on week days through the phone number 0505581864 or email [graduateschool@uew.edu.gh](mailto:graduateschool@uew.edu.gh)

## VOLUNTEER AGREEMENT

The above document describing the benefits, risks and procedures for the research title (*name of research*) has been read and explained to me. I have been given an opportunity to ask any question about the research and I am satisfied with the answers. I agree to participate as a volunteer.

.....

*Date*

.....

*Name and signature or mark of volunteer*

### **If volunteers cannot read the form themselves, a witness must sign here:**

I was present while the benefits, risks and procedures were read to the volunteer. All questions were answered and the volunteer has agreed to take part in the research.

.....

*Date*

.....

*Name and signature of witness*

## SECTION D

### CHECKLIST

<b>Part A: Background Information of the Investigators</b>	
1.	Proposed Title of the Study: <i>(if student investigator, move to 4 after providing title)</i>
2.	Principal Investigator: Name: Title: Qualifications: Postal Address: Institution/Department: Phone Number: Email Address:
3.	Co-Investigator 1 (if applicable): Name: Title: Qualifications: Postal Address: Institution/Department: Phone Number: Email Address:  Co-Investigator 2 (if applicable): Name: Title: Qualifications: Postal Address: Institution/Department: Phone Number: Email Address:
4.	Student Investigator(s) Name: Postal Address: Institution/Department: Phone Number: Email Address: Supervisor (s) and their emails:  a. Indicate Status  Masters Level <input type="checkbox"/> Doctoral Level <input type="checkbox"/>  b. Thesis Approval Letter and Introductory Letter from Head of Department

<b>Part B: Project Information</b>	
1. Proposed Date of Commencement:	
2. Proposed Project Duration (dd/mm/yy):	From:    /    /                      To:    /    /
3. Collaborating Institution (if applicable)	
4. Funding Status of Project?	Funding Pending <input type="checkbox"/> Funded <input type="checkbox"/> Not Funded <input type="checkbox"/> Other <input type="checkbox"/>
5. Source of funding (Name and address)	
6. Research Site(s):	
7. Data Collection Instruments	
8. Consent Process (Tick all that apply)	Written <input type="checkbox"/> Thumbprint <input type="checkbox"/> Oral (English language) <input type="checkbox"/> Oral (Local language) <input type="checkbox"/> Other <input type="checkbox"/>
9. Type of Research	Social Science <input type="checkbox"/> Behavioural Science <input type="checkbox"/> Biomedical <input type="checkbox"/> Other (please specify) _____

<b>Part C: Ethics</b>	
1. Will the study involve participants who are particularly vulnerable or unable to give informed consent? (e.g. <i>people under the age of 18, people with learning disabilities, students you teach or assess, etc.</i> )	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, state the category of persons?
2. Will it be necessary for participants to take part in the study without their knowledge and consent at the time?	Yes <input type="checkbox"/> No <input type="checkbox"/> Give reason for your choice.
3. Will the study involve any audio or visual recording of people in public places?	Yes <input type="checkbox"/> No <input type="checkbox"/> Give reason for your choice.
4. Will the study involve the discussion of sensitive topics? (e.g. <i>sexual activity, illegal drug use, illegal activities, death, whistleblowing, etc.</i> )	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, state the topic type?
5. Will the study involve invasive, intrusive or potentially harmful procedures of any kind?	Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, State procedures?

6. Is physical pain or psychological stress from the proposed project likely to cause harm or negative consequences beyond the risks in normal life?

Yes  No

Give reason for your choice.

7. Will financial inducements (other than expenses) be offered to any of the participants?

Yes  No

Give reason for your choice.

**Part D: Signature**

Name of person completing the form: \_\_\_\_\_

Role in the study: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For all student projects:

\_\_\_\_\_  
Student Investigator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

For Thesis Supervisor(s)

I the undersigned supervisor have read through the proposal thoroughly (Scientific Review of the proposal) and reviewed the research instrument(s).

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Supervisor's Signature

\_\_\_\_\_  
Date

**Part E: Office Use Only**

Date received: \_\_\_\_\_ Protocol ID No \_\_\_\_\_

Recommended Review Process:

i. General Review

ii Expedited Review

Outcome of the Review Process:

i. Approved

ii Conditional

iii Pending

Others

sp  .....

### Application fees for UEW Ethical Clearance

S/N	Type of Application	Fee
1	UEW Students (Ghanaian or International)	Free
2	Non-UEW Students studying in other higher educational institutions in Ghana	GHC 100.00
3	Ghanaian Students studying in other countries	GHC 200.00
4	International Students studying in other tertiary institutions	GHC 400.00
5	Research Investigators from UEW	GHC 200.00
6	Non-UEW Research Investigators (Ghanaians)	GHC 400.00
7	Non-UEW Research Investigators (Other Nationals)	USD 400.00
8	Ghanaian Research Consultancy Projects	GHC 500.00
9	International Research Consultancy Projects	USD 500.00
10	Collaboration between UEW and other Ghanaian Researchers	GHC 400.00
11	Collaboration between other Ghanaian Researchers without UEW	GHC 500.00
12	Collaboration between UEW and other International Researchers	USD 400.00
13	International Investigators	USD 500.00

### Application fees Payment Details

#### Bank A – Cedi Account

Bank Name: GCB Bank PLC  
Account Name: School of Graduate Studies, UEW  
Account Number: 3051130003574  
Branch Name: Winneba

#### Bank B – US Dollar Account

Bank Name: Republic Bank (Ghana) PLC  
Account Name: University of Education, Winneba  
Account Number: 0270223884112  
Branch Name: Winneba  
Swift Code: HFCAGHAC

## References

- Basu, D., Chakraborty, S. & Sinha, A. (2022). *Research and publication ethics: a textbook*. Concept Publishing Company Pvt Ltd.
- Institute for Educational Research and Innovation Studies (2022). *Standard operating procedure for research and ethics committee*, Institutional Review Board
- University of Education, Winneba (2020). *Statutes UEW* Printing Press
- University of Education, Winneba Ethical Review Board (UEWERB)
- University of Education, Winneba School of Graduate Studies (2018). *Research Ethics Policy*
- University of Nottingham (2016). *Code of research conduct and research ethics*. (Online): <https://www.nottingham.ac.uk/academicservices/documents/academic-misconduct/code-of-research-conduct-and-research-ethics-version-6-2016.pdf> (Retrieved on 29<sup>th</sup> June, 2023).