**2019**

**DEPARTMENT OF PSYCHOLOGICAL SCIENCES**

**BIRKBECK UNIVERSITY OF LONDON**

**ETHICAL APPROVAL FORM FOR RESEARCH INVOLVING MINORS (16 YEARS OF AGE OR UNDER)**

***ALL APPLICATIONS FOR RESEARCH WITH MINORS ARE NON-ROUTINE  
unless exceptionally there is just the smallest change to a previous procedure.***

**Please fill out this application carefully, answering every point in the space underneath, and ensure that you answer EVERY question and that it contains all relevant signatures. Incomplete forms will be returned.**

***Please submit all applications electronically to*** [***ethics@psychology.bbk.ac.uk***](mailto:ethics@psychology.bbk.ac.uk)

**Submission dates**

***NON ROUTINE applications:*** *Dates for submitting them are on the departmental ethics webpage. You will receive an email informing you of the committee’s decision.****Routine applications*** *may be submitted at any time. The chair of the ethics committee reviews them monthly.*

Top of Form

**NON-ROUTINE** (for Non-Routine go to Qn2)

Bottom of Form

**Question 1: If, exceptionally, this is routine, the relevant approval number(s) MUST be provided**

**ROUTINE**

|  |  |
| --- | --- |
| Previous Non-Routine  Approval Number(s) | Previous Non-Routine  Approval Dates (s)  **(within the last 3 years)** |
| **\_ \_ \_ \_ \_ \_** | **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

*press <enter> to enlarge the size of the box*

**IMPORTANT: For routine applications, you must attach to your e-mail a copy of all original documentation for each routine approval number that you list (i.e. application forms, appendices, and final versions if amendments were required). If you are unable to provide original documentation or ethical approval for the original study has expired, you may be required to complete a new non-routine form.**

*Notes: An application is non-routine if the proposed research raises ethical issues for which the applicant/supervisor does not have existing approval. An application is routine if the proposed study is so close to a previous one which has received ethical approval that there are no new ethical issues to be considered. Applicants should discuss this with their supervisor.*

**Question 1a: Please detail why this application is routine.**

*Notes: Explain the difference between this application and the already approved one (e.g. a change in age range, a change in stimulus on the computer screen – in other words, changes which would not be considered significant).*

**Routine explanation:**

**Previous approval number and date:**

**Question 2: Title of the study**

*Notes: The title should be a single sentence*

**Title:**

**Question 3: Primary applicant**

*Notes: The primary applicant is the name of the person who has overall responsibility for the study. If you are a student or research assistant, the primary applicant will be your supervisor.*

**Applicant name:**

**Question 4a: Co-applicants (Staff, PhD, Masters)**

*Notes: List the names of all researchers involved in the collection and analysis of data, and their specific role (e.g. Staff, Masters, PhD)*

**Co-applicant names:**

**Question 4b: Co-applicants (Undergraduates)**

*Notes: List the names of all researchers involved in the collection and analysis of data, and their specific role (e.g. Undergraduate)*

**Name: Student ID:**

**Question 5: Contact details**

*Notes: Please provide email addresses for all applicants. The approval certificate will be sent via email and must be retained*

**Email addresses:**

**Question 6: Give details of DBS applications and approval numbers (or equivalent) for all applicants involved in collecting data**

*Notes: Include name of applicant, date of application, date of approval and DBS number.*

*Anyone carrying out research with minors must undergo a DBS check and research MUST NOT begin until DBS approval is in place. Please see departmental ethics webpages for further information.*

**Name of applicant: Date of application: Approval number:**

**Question 7: Where will the study take place?**

*Notes: Indicate where the study procedures will take place. For example, CBCD, Babylab, schools, nurseries, homes.*

**Location:**

**Question 8: Briefly describe the purpose and rationale of the research**

*Notes: Attach any detailed research proposals, if they have been/will be submitted to a funding body. Make the objectives of the study clear*

**Purpose and rationale:**

**Question 9: Who is funding the costs of the study?**

*Notes: Give the name and address of funding bodies (eg ESRC) or other sponsorship*

**Funding:**

**Question 10a: Describe the methods and procedures of the study**

*Notes: Please provide FULL information : Do not merely list the names of measures and/or their acronyms; summarize them briefly (e.g. Buss-Durkee Hostility Inventory: a standardized self-report measure of trait aggression). Include any information about any interventions, interview schedules, duration, order and frequency of assessments and so on.* ***It should be clear exactly what would happen to participants.***

**Methods and Procedures:**

**Question 10b: What materials and techniques (e.g. EEG, imaging) are to be used in the study?**

*Notes: Please list all materials and techniques described in Q10 and confirm they are attached (e.g. questionnaires, specific information given to parents about particular techniques such as EEG. These are in addition to the general information sheet about the study which is dealt with in Q15).*

**Materials and techniques:**

**Question 11a: For Researchers, describe any potential risks or adverse effects resulting from participation and what measures have been taken to address them?**

*Notes: Describe any discomfort or inconvenience that researchers may experience. Include information about location of the study, when the study is taking place, and possible safety risks to the researcher. Please ensure that your methods have a valid safety and risk assessment.*

**Risks or adverse effects for researchers:**

**Please indicate that the risk assessment associated with your research is attached: yes/no (please delete one)**

[**https://www.sevron.co.uk/**](https://www.sevron.co.uk/)

**If ‘no’, please explain why:**

**Question 11b: For Participants, describe any potential risks or adverse effects resulting from participation and what measures have been taken to address them?**

*Notes: Describe any discomfort or inconvenience that participants may experience. Include information about procedures that for some people could be physically stressful or might impinge on the safety of participants, e.g. noise levels, visual stimuli, equipment; or that for some people could be psychologically stressful, e.g. mood induction procedure, tasks with high failure rate, personal experience questions.*

**Risks or adverse effects for participants:**

**Question 12: Who will the participants be?**

*Notes: Describe (a) the groups of participants that will be recruited; (b) the main inclusion and exclusion criteria and (c) make clear how many participants you plan to recruit into the study in total.*

**Participants:**

**Question 13: Describe the recruitment procedures for the study**

*Notes: Give details of how potential participants will be identified or recruited. Include all advertising materials (posters, emails, letters etc.) as appendices and refer to them as appropriate. Describe any screening and selection procedures (e.g. collecting medical history, SES information) and explain why they are necessary*

**Recruitment:**

**Please confirm that you read the Recruiting Research Participants document on the ethics website: yes/no (please delete one)**

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**Question 14: Describe the procedures to obtain informed consent**

*Notes: Describe when and how consent will be obtained. Give details of who will take consent and how it will be done. If you plan to seek informed consent from vulnerable groups (e.g. adolescents with depression, children who may have suffered significant trauma), say how you will ensure that consent is voluntary and fully informed.* ***Please note that students are not allowed to carry out research with vulnerable groups and on sensitive topics.***

*There are different rules for different age groups:*

*0-4 Formal signed consent obtained from parent/guardian*

*5-12 Formal signed consent from parent/guardian and informal verbal consent from the child that they understand what the study involves and that they are happy to participate*

*13-16 Dual but independent signed consent from parent/guardian and the young person. Both are required for participation to go ahead.*

*There is one narrowly defined exception to the above: for studies conducted in schools where the researcher is known to the school (e.g. one of their own teachers) and which involves activities which might take place as part of normal school curriculum activity (e.g. awareness of phonemes in written text, counting strategies, memory tasks). In such cases, the head teacher should be asked if she/he wants to have parental opt-in or opt-out consent. In all other cases parental opt-in consent is required. Please state which form of consent is to be used and if it is opt-out consent, please explain why*

**Informed consent procedure:**

**Question 14a: Do you explain the exception to confidentiality rule?**

*Notes: There is an exception to confidentiality with respect to minors because of the need to consider child protection. A researcher who thinks a child may be at risk of harm must report this to the supervisor (if applicable) and the Chair of the ethics committee. Parents/guardians and young people over 13 should have this exception to confidentiality explained to them in the information sheet and consent form prior to taking part in the study.*

*Here is an example of default text for children aged 0-16 which can be modified if appropriate: Your child’s involvement in the study will remain confidential except in the highly unlikely event that the researcher has a serious concern regarding a child protection issue.*

*If you explain the exception please provide the text you will use. If you do not, please explain why not.*

**Exception to confidentiality:**

**Question 15: Will consent be written?**

*Notes: If yes, please include a consent form.* ***A draft consent form is at the end of this application, please complete/adapt as necessary and attach as an appendix****. If no, describe and justify an alternative procedure (verbal, electronic etc.)*

*Please provide sample informal verbal consent text for children aged 5-12. Here is an example which can be modified if appropriate: I just need to check that you understand that you can take part in the study if you want to but if you don’t, it’s fine not to. Your parents have said it is ok for you to do it but you also have a choice about whether you want to or not. Is there anything you would like to ask me about? Are you happy to go ahead and take part?*

**Written consent: yes/no (please delete one)**

**Informal verbal consent text (if necessary):**

**Question 16: What are participants told about the study? Will any information on procedures or the purpose of the study withheld? If any information is to be withheld, justify this decision.**

*Notes:* ***A draft information sheet that sets out the purpose of the study and what will be required of the participants is at the end of this application. Please complete/adapt as necessary and attach as an appendix.***

**Study information for participant:**

**Question 17: Describe the procedures in place for maintaining that participant personal information and data collected will be treated with confidentiality and their anonymity respected. Please list all people who will have access to the data.**

*Notes: Personal identifying information is defined as:*

* ***Biographical information or current living situation****, including dates of birth, Social Security numbers, phone numbers and email addresses.*
* ***Looks, appearance and behaviour****, including eye colour, weight and character traits.*
* ***Workplace data and information about education****, including salary, tax information and student numbers.*
* ***Private and subjective data****, including religion, political opinions and geo-tracking data.*
* ***Health, sickness and genetics****, including medical history, genetic data and information about sick leave.*

*Include how any identifying information will be kept separate for data collected; where data will be stored and for how long; what use will be made of the data. Say who will have access to participants’ personal data and for how long personal data will be stored or accessed after the study has ended. If using interview data, describe how you will ensure that all identifying information will be removed from the transcripts. Please state how long you will keep consent forms for (e.g., until marking of project, publication of data)*

**Please state your data management plan:**

**Procedures for confidentiality and anonymity:**

**Are you recording personal identifying information: yes/no (please delete one)**

**Why do you need to record personal identifying information?**

**How long will personal identifying information be kept:**

**How are you ensuring that personal identifying information will be kept separate from research data:**

**Will you be uploading your anonymised data to an online repository? Yes/no (please delete one)**

**Question 18: What payments, expenses or other benefits and inducements will participants receive?**

*Notes: Give details. If it is monetary say how much, how it will be paid and on what basis is the amount determined.*

**Payments:**

**Question 19: At the end of the study, what will participants be told about the investigation?**

*Notes: Give details of debriefings, ways of alleviating distress that might be caused by the study.* ***A draft debrief form is attached to the end of this application. Please complete/adapt as necessary.***

**Debrief document attached: yes/no (please delete one)**

**Question 20: Has the person carrying out the study had previous experience of all of the procedures to be used in the study? If not, who will supervise and/or train that person?**

*Notes: Say who will be undertaking the procedures involved and what training and/or experience they have. If supervision is necessary, indicate who will provide it.*

**Researcher:**

**Training:**

**Question 21: Signatures of the study team (including date)**

*Notes: The primary applicant and all co-applicants must sign and date the form. Scanned or electronic signatures are acceptable. Alternatively typing the full name represents your hand-signed signature.  
The Primary applicant needs to copied by email into your email application.*

*press <enter> to enlarge the size of the box*

*Primary applicant*

*NAME: SIGNATURE: DATE:*

*Co-applicant 1*

*NAME: SIGNATURE: DATE:*

*Co-applicant1*

*NAME: SIGNATURE: DATE:*

**DEPARTMENT OF PSYCHOLOGICAL SCIENCES**

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**CONSENT FORM FOR:** *State title of the study and ensure it is informative and user-friendly*

I have had the details of the study explained to me and willingly consent for my child to take part. My questions have been answered to my satisfaction and I understand that I may ask further questions at any time.

I understand that my child will remain anonymous and that all the information given will be used for this study only.

I understand that I may withdraw my consent for my child to participant in this study at any time without giving any reason and to decline to answer particular questions. Furthermore I understand that I will be able to withdraw my child’s data up to the point that the anonymised data can no longer be identified.

I understand that audio/video recordings will be made *(If this is the case, say something about: how recordings will be identified by a code, and will not be used or made available for any purposes other than the research project; when the recordings will be destroyed.)*

I understand that all information given will be kept confidential (*Say something about: who will have access to the data. For example: All data will be identified by a code, with personal details kept in a locked file or secure computer with access only by the immediate researchers. If personal data is being collected, explain how personal data will be kept separate from research data).*

Your child’s involvement in the study will remain confidential except in the highly unlikely event that the researcher has a serious concern regarding a child protection issue.

I understand how the results of the study will be used. (*Say something about what will happen to the study results. For example: Results will be written up for a project/thesis or results will be presented at conferences and written up in journals. Results are normally presented in terms of groups of individuals. If any individual data are presented, the data will be totally anonymous, without any means of identifying the individuals involved).*

I confirm that I am over 16 years of age

**There should be two signed copies, one for the participant, one retained by the researcher for records.**

Name (participant): Signature: Date:

Name (researcher): Signature: Date:

Primary investigator contact details:

Co-applicant contact details:

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**INFORMATION SHEET FOR:** *State title of the study and ensure it is informative and user-friendly*

Before you decide to take part in this study, it is important for you to understand why the research is being done and what it will involve. Please take the time to read the following information carefully and discuss it with others if you wish. A member of the research team can be contacted if there is anything that is not clear or if you would like more information. Take time to decide whether or not you wish to take part.

This research project looks at (*state the aim of the study in user-friendly terms)*. This study will be completed by (*expected completion* date).

Your child has been chosen to participate in this study (*state any inclusion criteria*).

In this study, (*explain in detail what the participant will do if s/he takes part*). This study will take place (*state location of study - in your child’s school, in our laboratory*).

Describe any possible disadvantages/risks and benefits of taking part

The results of this project will be (*written up for an undergraduate final year project, written up for a masters’ dissertation, written up for a PhD dissertation, written up for publication, disseminated at conferences*). *Please describe the arrangements for anonymity and confidentiality*.

Your child’s involvement in the study will remain confidential except in the highly unlikely event that the researcher has a serious concern regarding a child protection issue.

You and/or your child have the right to withdraw participation at any point up until the point that the anonymised data can no longer be identified.

The project has received ethical approval from the Department of Psychological Sciences Research Ethics Committee of Birkbeck, University of London

Primary investigator contact details:

Co-applicant contact details:

For information about Birkbeck’s data protection policy please visit:

http://www.bbk.ac.uk/about-us/policies/privacy#7

If you have concerns about this study, please contact the School’s Ethics Officer at: ethics@psychology.bbk.ac.uk

School Research Officer

School of Science, Department of Psychological Sciences

Birkbeck, University of London

London WC1E 7HX

You also have the right to submit a complaint to the Information Commissioner’s Office

https://ico.org.uk/

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**DEBRIEF SHEET FOR:** *State title of the study and ensure it is informative and user-friendly*

The following should be included:

The motivation for the research (why is this study being run?)

The hypotheses of the research (what are the expected results?)

Any information not available to the participant before participating in the study (e.g., what condition they were in, why they were selected etc).

(If necessary) ways to alleviate any possible distress (e.g., numbers and details for supervisor and/or appropriate school contacts)