

**Division of Research & Economic Development**

**Office of Research Compliance |Institutional Review Board**

(phone) 208.426.5401| MS 1138

[humansubjects@boisestate.edu](mailto:humansubjects@boisestate.edu)

EXEMPT PROTOCOL APPLICATION

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| **INSTRUCTIONS** |

* The application must be typed. **Handwritten applications will not be accepted.**
* **All Questions MUST be answered.**
* **Submit completed application to:** [**HumanSubjects@boisestate.edu**](mailto:HumanSubjects@boisestate.edu)

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| **SECTION A: General Information** | | | | | | | | |
| 1. | This project is: |  | Social Behavioral | |  | BioMedical | | |
|  |  |  | | | | | | |
| 2. | Project Title: | **Adoption of Conservation Behavior as a Response to Perceptions of Environmental Change** | | | | | | |
|  | | | | | | | | |
| 3. | Anticipated Start Date: | | | **3/1/2022** | | | Anticipated End Date: | **9/1/2022** |
|  | | | | | | | | |
| 4. | **PRINCIPAL INVESTIGATOR (PI)** (Refer to the [IRB PI Eligibility](https://www.boisestate.edu/research-compliance/irb/guidance/principal-investigator-eligibility/) requirements. IRB staff will confirm your eligibility. **Graduate thesis or dissertation students MUST list eligible faculty as PI – student may be a Co-Principal Investigator.** | | | | | | | |

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|  | Name: | **Vicken Hillis** | | | | | | | | |
|  | Title: |  | Full Professor | |  | Associate Professor | | |  | Assistant Professor |
|  | |  | External Investigator | |  | \*Other: | | | | |
|  | |  |  | |  | \*(This category is allowed under ***special circumstances only***) | | | | |
|  |  | **🡩 *If you DO NOT fall into one of the above titles, you may be a Co-Principal Investigator (Co-PI) with a qualified PI.*** | | | | | | | | |
|  | Department: | | | **College of Innovation and Design** | | | Phone: | **+1 415 812 6846** | | |
|  | E-mail: | | | **VickenHillis@boisestate.edu** | | | | | | |
|  | Roles and responsibilities in this study: | | | | | | | | | |

**Vicken Hillis is advising a graduate student, Matthew Clark, who is conducting this study as part of his PhD at Boise State. Vicken is responsible for overseeing the theoretical development of the research questions, as well as the development of the survey instrument and research protocol. Vicken will also advise on the analysis of the data collected and the development of the resulting manuscript(s).**

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|  | CITI Training Completed: | Social & Behavioral Researchers | Biomedical Researchers |

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| 5. | **CO-INVESTIGATOR** (IRB staff will confirm your title with the directory.) | | | | | | | | | | | |
|  | | Name: | | **Matthew Clark** | | | | | | | | |
|  | |  | Full Professor | | |  | Associate Professor | | |  | Assistant Professor | |
|  | |  | Adjunct Faculty | | |  | Lecturer | | |  | Undergraduate Student | |
|  | |  | Staff | | |  | Graduate Student | Thesis | | | Dissertation | |
|  | |  | Other: | |  | | | | | | | |
|  | | Department: | | | Ecology, Evolution, and Behavior | | | | Phone: | | | **+255 772 409 300** |
|  | | E-mail: | | | Matthewclark989@boisestate.edu | | | | | | | |
|  | | Roles and responsibilities in this study: | | | | | | | | | | |

**Matt is responsible for designing the survey and participatory mapping instruments for this project. Matt will be collecting all data used in this project and analyzing data for the presentation of results. Matt will also be responsible for presenting the results of this project to collaborators and at scientific meetings.**

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|  | CITI Training Completed: | Social & Behavioral Researchers | Biomedical Researchers |

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| 6. | Do you have additional research personnel (Co-Investigators, key personnel, student research assistants, etc.)? | | |
|  | | **NO** | |
|  | | **YES** | |
|  | | | To list additional investigators and/or key personnel, complete and attach an **ADDITIONAL PERSONNEL** form. |

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| **SECTION B: Financial Conflict of Interest Disclosure** | | | | |
| *Conflicts of interest must be disclosed in accordance with the Boise State Conflict of Interest and Commitment* [*Policy #1110*](https://www.boisestate.edu/policy/governance-legal/conflict-of-interest-and-commitment/)*.* | | | | |
| 1. | Do any investigators (PI, Co-Investigator) or research team members (key personnel) have any relationship or equity interest with any institutions or sponsors related to this research that might present or appear to present a conflict of interest (COI) with regard to the outcome of the research? | | | |
|  | | **NO POTENTIAL CONFLICTS EXIST** | | |
|  | | **YES:** | | |
| 2. | | | Name of the person(s) with the potential COI: |  |
|  | | | This potential conflict has been disclosed to the [Boise State Conflict of Interest Office](https://www.boisestate.edu/research-export/). | |
|  | | | This conflict has not been disclosed to the Boise State COI Office. | |

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|  | **Note: If a significant conflict of interest exists, you must also attach the Boise State COI Committee approved management plan.** If you have questions about conflicts of interest, contact the Boise State Conflict of Interest Officer at (208) 426-1252. |

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| 3. | Is this research supported in whole or in part by a grant or contract? | | | | | | | | | |
|  | | **NO** | | | | | | | | |
|  | | **YES:** | | | | | | | | |
|  | | | Sponsor Name: | | | |  | | | |
|  | | | PI on Grant: | | | |  | | | |
|  | | | Grant Title/Contract: | | | |  | | | |
|  | | | Project Period: | | | From: |  | | To: |  |
|  | | | Grant Project Summary Attached | | | | | | | |
|  | | | OSP Proposal Number (if known): | | | | |  | | |
|  | | | | | | | | | | |
|  | Is this research funded internally by Boise State University? | | | | | | | | | |
|  | | **NO** | | **YES:** |  | | | | | |

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| **SECTION C:** | YES | NO |
| Will the data be recorded by the investigator in such a manner that the identity of the subjects can be readily ascertained **OR** be potentially damaging to a participant’s financial standing, employability or reputation? |  |  |
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| Will your research participants include prisoners, cognitively, economically, or educationally impaired participants? |  |  |
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| Will the information be obtained in such a manner that the identity of the participant can be readily ascertained, directly or through identifiers, linked to the subjects? (Exempt Category 2 or 3-requiring Limited IRB Review) |  |  |
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| Does the research involve **federal** department or agency heads for the purpose of assessing or changing public benefit or service programs? (Exempt Category 5) |  |  |
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| Does the research involve the *storage or maintenance* of identifiable private information or bio-specimens?  (Exempt Category 7 – requires Limited IRB Review) |  |  |
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| Does the research involve *using* identifiable private information or identifiable bio-specimens?  (Exempt Category 8 – requires Limited IRB Review) |  |  |

* ***If you answered YES to any of these questions, your application does NOT qualify for exempt review. STOP COMPLETING THIS FORM and complete the*** [***Expedited or Full Board Protocol Application***](https://www.boisestate.edu/research-compliance/irb/forms-templates/) ***for IRB review.***

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| **SECTION D: Exempt Research Category** | | | | |
| **Exempt Categories 5, 7, and 8 require Expedited Application. Study must fit *exactly* into one of these categories.**  **Indicate the applicable** [**Exempt Category**](https://www.hhs.gov/ohrp/regulations-and-policy/regulations/45-cfr-46/common-rule-subpart-a-46104/index.html) **(1-4 or 6):** | | | | |
|  |  | **1.** | **Research, conducted in established or commonly accepted educational settings that specifically involves normal educational practices that are not likely to adversely impact students’ opportunity to learn required educational content or the assessment of educators who provide instruction. This includes most research on regular and special educational instructional strategies, and the research on the effectiveness of or the comparison amount instructional techniques, curricula, or classroom management methods.** | |
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|  |  | **2.** | **Research that only includes interactions involving educations tests (cognitive, diagnostic, aptitude, achievement), survey procedures, interview procedures, or observation of public behavior (including visual or auditory recording) if at least ONE of the following criteria is met:** | |
|  |  | **i.** | | the information obtained is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained, directly or through identifiers linked to the subjects; |
|  |  | **ii.** | | any disclosure of the human subjects’ responses outside the research would not reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects’ financial standing, employability, educational advancement, or reputation. |
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|  |  | **3.** | **Research involving benign behavioral interventions in conjunction with the collection of information from an ADULT subject through verbal or written response or audiovisual recording if the subject prospectively agrees to the intervention and information collection at least ONE of the following criteria is met:** | |
|  |  | **i.** | | Information obtained is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained, directly or through identifiers linked to the subjects; |
|  |  | **ii.** | | Any disclosure of the human subjects’ responses outside the research would not reasonably place the subjects at risk of criminal or civil liability or be damaging to the subjects’ financial standing, employability, educational advancement, or reputation. |
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|  |  | **4.** | **Secondary research for which consent is not required: Secondary research uses of identifiable private information or identifiable bio-specimens, if at least ONE of the following criteria is met:** | |
|  |  | **i.** | | The identifiable private information or identifiable bio-specimens are publicly available; |
|  |  | **ii.** | | Information, which may include information about bio-specimens, is recorded by the investigator in such a manner that the identity of the human subjects cannot readily be ascertained directly or through identifiers linked to the subjects, the investigator does not contact the subjects, and the investigator will not re-identify subjects; |
|  |  | **iii.** | | The research involves only information collection and analysis involving the investigator’s use of identifiable health information when that use is regulated under 45 CFR 160 and 164, subparts A and E, for the purpose of “health care operations” or “research” as defined by the regulations; |
|  |  | **iv.** | | The research is conducted by, or on behalf of, a Federal department or agency using government-generated or government-collected information obtained for non-research activities, if the research generates identifiable private information that is or will be maintained on information technology that is subject to and in compliance with section 208(b) of the E-Government Act of 2002, if all of the identifiable private information collected, used, or generated as part of the activity will be maintained in systems of records subject to the Privacy Act of 1974, and, if applicable, the information used in the research was collected subject to the Paperwork Reduction Act of 1995. |
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|  |  | **6.** | **Taste and food quality evaluation and consumer acceptance studies, if:** | |
|  |  | **i.** | | wholesome foods without additives are consumed; or |
|  |  | **ii.** | | if a food is consumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminant at or below the level found to be safe, by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the USDA. |

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| **SECTION E: Summary** | | | |
| 1. | Please provide a ***detailed*** description of your project: **These activities described below will be conducted in 30 communities across Pemba Island, Tanzania. We will collect data from 10 individuals in each community to build a database of 300 individual responses. All information will be collected with the help of a translator and only after the Co-PI of this project, Matt Clark, meets with the leader of each community to ask for permission.**  **The aim of this project is to better understand how peoples' perceptions of environmental change affect their support for conservation institutions. We will achieve this through a combination of a participatory mapping exercise and standard survey methodology. Participants will be asked to identify patches of native mangrove forest on community level maps like the one included as part of this packet. They will then indicate whether each patch is currently increasing or decreasing forest cover.**  **We also include a survey (English and Kiswahili) instrument that participants will complete after the participatory mapping activity. The translator will walk through each question with the participants and answer any associated questions. In this way, the survey instrument will be used to facilitate a type of group structured interview. We will use this format to alleviate issues that may arise with individual literacy and comprehension of the questions asked. Respondents will use this instrument to indicate their knowledge of resource function, perceptions of mangrove harvest by both in-group and out-group individuals, and support for various conservation institutions. The protocol for these activities is attached.**  **This research is done partially in collaboration with the Department of Forestry and Non-Renewable Natural Resources, the Tanzanian government body who issued our research clearance (attached). When beginning data collection in each community, the research team (Matt Clark and translator) will explain to participants that they can leave at any time without fear of punishment or penalty. We will give this verbal description of the consent process in lieu of a written consent form. Tanzania, especially Pemba, has a history of land grabs from outsiders and a somewhat illiterate population. These factors cause many individuals to be hesitant to sign forms given by foreigners.** | |
| |  |  |  | | --- | --- | --- | |  | Please provide a ***detailed*** description of your project. Include information on recruitment, consent process, incentives (if applicable), methods of data collection, data storage, etc.: | | |  | |  | | | * Who will survey, interview, collect data: **Matt Clark will perform all data collection practices with the assistance of a paid translator provided by the Department of Forestry and Non-Renewable Natural Resources** * How, specifically, are participants being recruited: **The leader of each community has a book with the names and phone numbers (if applicable) of each member of their community. We will first meet with the leader of each community to ask permission to conduct the research project. Upon approval, we will use a random number generator to randomly select participants from the book of community members. While sitting with the community leader, we will call each selected individual, describe the research process and compensation, and ask for their participation. If selected individuals decline, we will move to the next individual in the book. Lastly, we will tell the participant the time and location of the meeting and answer any questions they may have.** * If there is a signed agreement, who owns the data: **NA,**   **\*Provide copy of agreement to IRB.**   * Will participants be offered incentives?  |  | | --- | | **NO** | | **YES, please provide details: Participants will be compensated 5,000tsh (approx. $2USD) for their participation. This is equal to about a standard half to full day's wages as we aim to compensate participants for time lost, but not incentivize participation.** |  * If direct quotes will be included as part of the analyzed data, is this information in the consent form?  |  | | --- | | **YES\* (must be included this information as part of informed consent)** | | **N/A** |  * Will participants be audio and/or video recorded?  |  |  | | --- | --- | | **NO** | | | **YES\* (must include this information in the consent—include whether these recordings will be**  **kept, or transcribed, verified and deleted so only the transcripts will be considered data.)** | | |  |  | | |
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| **SECTION F: Population** | | | | | | | | |
| 1. | Will your population include: | | | | | | |
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|  | | **Adults (18 and over)** | | | | | |
|  | | **Minors (17 and younger):** | | | **Ages 15-17** | **Ages 11-14** | **Ages 10 and younger** |
|  | | **At risk population:** | | **Explain:** | | | |
| ***\*Additional school district permissions may apply if research is being conducted in primary or secondary schools. Check with***  ***the appropriate school district(s).*** | | | | | | | |
|  | | | | | | | |
| 2. | Will your population include Boise State University students or employees? **\**If so, additional permissions may apply.*** | | | | | | |
|  | | **NO** | | | | | |
|  | | **YES:** | | | | | |
|  | | | If BSU students or employees report to you, list the third party contact who will hold all data until final grades have been given or data has been coded: | | | | |

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| **SECTION G: Applicable Documents** | | | | | | |
| 1. | Please check the boxes for the documents included with this submission: | | | | |
|  |  | | | | |
|  | | **Recruitment Scripts** | **Survey(s)** | **Interview Questions** | **Letter(s) of Support\*** |
|  | | **Consent** | **Assent (15-17)** | **Assent (11-14)** | **Verbal Assent (10 and younger)** |
|  | | **Other: Participatory mapping tool** | | | |
|  | | | | | |

\*If you are collecting data at a location not on BSU property **OR** you are wanting to access information

via your department (such as a list of email to contact all students with that major), you may also need

to provide a Letter of Support.

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| **SECTION H: Signature** |

**My signature below and/or by submitting protocol documents from my Boise State email address indicates:**

* **I agree to fully comply with the policies and procedures outlined in Boise State University's [IRB](https://www.boisestate.edu/policy/research/use-of-human-subjects/)**

**[Policy (5050)](https://www.boisestate.edu/policy/research/use-of-human-subjects/) as well as all applicable** [**program guides**](https://www.boisestate.edu/research-compliance/irb/policy-written-plans/irb-program-guide/)**, rules and** [**regulations**](https://www.hhs.gov/ohrp/regulations-and-policy/regulations/45-cfr-46/revised-common-rule-regulatory-text/index.html)**.**

* **I will ensure all personnel involved in the activities outlined in this application have received**

**training on appropriate practices and procedures.**

* **I ensure the information provided in this document is accurate and complete and that I am qualified**

**to perform the described activities.**

* **I agree to stay within the scope of activities outlined in this application, and I understand any**

**changes in activities must be approved by the IRB before they begin.**

PI Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Co-I Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**You will receive a Notification of Exemption once the IRB has reviewed this application. Research cannot begin until this letter is received.**