

DECEMBER 2025

MCQs may be of 'single correct answer' or 'multiple correct answer' format. Where the question states that more than one answer is correct, choose more than one of i, ii, iii or iv (anything from two to all answers may be correct), and then select the correct combination from answers a, b, c or d. Where the question states that only one answer is correct, mark the single answer that you think is correct.

'Encore, encore!' – secondary use of health data for research:**A practical guide to POPIA**

1. Which option correctly identifies the three key steps researchers should follow when assessing the secondary use of health data under POPIA?
 - A. Evaluate original consent, explore alternative lawful grounds, consider de-identification and pseudonymisation
 - B. Evaluate original consent, encrypt the dataset, submit a POPIA compliance certificate
 - C. Seek authorisation from the Information Regulator, remove all identifiers, verify institutional approval
 - D. Explore alternative lawful grounds, publish anonymised data, assess participant risk only
2. Under POPIA, when is a dataset considered fully de-identified and therefore outside the scope of the Act?
 - A. When all direct identifiers (e.g., names, ID numbers) are removed, even if indirect identifiers remain
 - B. When the data subject has consented to secondary use, regardless of identifiability
 - C. When no reasonably foreseeable method exists to re-identify the data, whether directly or through linkage with other datasets
 - D. When researchers store the re-identification key in a separate secure location
3. Under POPIA's section 27, which of the following conditions allows researchers to process special personal information without obtaining consent for research purposes?
 - A. The research produces commercial value for the institution
 - B. The research is conducted by a public university and published in a peer-reviewed journal
 - C. The research serves a public interest and is essential, or obtaining consent is impossible or would require disproportionate effort
 - D. The dataset has been pseudonymised, even if re-identification is still reasonably possible

Pandemics, public health and the limitation of the right to privacy: Legal compliance and public trust

4. According to South Africa's Protection of Personal Information Act (POPIA), under which of the following circumstances may personal health information be processed without the data subject's consent during a public health emergency?
 - A. When it is convenient for healthcare providers to collect the data
 - B. When processing is necessary to prevent or reduce a serious and imminent threat to public health, public safety, or any person's life or health
 - C. When the government wishes to use the data for economic research purposes
 - D. When international organisations request access to the data
5. In the context of POPIA and pandemic data collection, which statement best reflects the distinction between "public health" and "public interest" as legal grounds for processing personal information?
 - A. Public health and public interest are synonymous terms that provide identical legal pathways under POPIA.
 - B. Public health provides direct authorisation for epidemiological measures like surveillance and contact tracing under sections 15 and 32 of POPIA, while public interest under section 37 requires demonstrating that collective benefits substantially outweigh privacy interference.
 - C. Public interest applies only to commercial research, while public health applies exclusively to hospital treatment.
 - D. Public health exemptions require individual consent, while public interest exemptions do not.
6. In the case of Minister of Health of the Province of the Western Cape v Goliath, the court established which of the following principles regarding the limitation of constitutional rights during a health emergency?
 - A. Constitutional rights can never be limited under any circumstances, even during health emergencies.

A maximum of 3 CEUs will be awarded per correctly completed test.

INSTRUCTIONS

- 1. Read the journal. All the answers will be found there.**
 - 2. Go to <https://members.samedical.org/> to answer the questions.**
- Questions may be answered up to 6 months after publication of each issue.**
Accreditation number: MDB015/MPDP/038/402 (Ethics)

- B. Privacy rights are absolute and take precedence over all public health considerations.
- C. Constitutional rights such as freedom and bodily integrity are not absolute and may be proportionally limited when necessary to prevent the spread of infectious diseases, provided the measures are lawful, justified, and reasonably limited.
- D. Only the Disaster Management Act, not the National Health Act, can authorise limitations on constitutional rights during disease outbreaks.

From prohibition to protection: Rethinking the ethics of non-medical preimplantation sex selection

7. According to the Court in *Surrogacy Advisory Group v Minister of Health*, why was the prohibition on non-medical preimplantation sex selection declared unconstitutional?
- A. Because sex selection is considered medically unsafe
 - B. Because the state failed to provide evidence justifying the limitation of reproductive autonomy
 - C. Because sex selection is required to correct demographic imbalances in South Africa
 - D. Because the Choice on Termination of Pregnancy Act mandates preimplantation testing
8. How did the Court address the ethical concern that permitting non-medical preimplantation sex selection could lead to a 'slippery slope' toward designer babies?
- A. It upheld the prohibition, finding the slippery slope argument sufficient to override reproductive autonomy
 - B. It required mandatory counselling to prevent future requests for selecting non-medical traits
 - C. It rejected the slippery slope argument as speculative and reaffirmed reproductive autonomy and pluralism
 - D. It limited sex selection only to cases justified by family balancing
9. How did the Court address the ethical concern that non-medical preimplantation sex selection fails to respect the moral status of the embryo?
- A. It held that embryos have full legal personality and therefore cannot be selected based on sex
 - B. It ruled that preimplantation embryos have minimal legal protection and that their moral status is irrelevant to the constitutional question

- C. It required that all unused embryos be implanted to avoid ethical violations
- D. It found that embryo selection is unconstitutional because embryos are equivalent to future children

Lifestyle choice or sex work? The criminality or otherwise of blesser-lessee relationships within the context of the 2021 amendments to the Sexual Offences and Related Matters Act, and the implications for healthcare providers and researchers

10. Under the 2021 amendments to the Sexual Offences and Related Matters Amendment Act (SORMA), which of the following scenarios would most likely trigger a mandatory reporting obligation for a healthcare provider?
- A. A 26-year-old postgraduate student discloses a consensual sexual relationship with a landlord.
 - B. A 22-year-old female undergraduate living in a university residence discloses a sexual relationship involving gifts and financial support from an older man.
 - C. A 30-year-old woman reports being in a transactional relationship with a wealthy businessman.
 - D. A 24-year-old male student living off-campus discloses a sexual relationship with an older woman who pays his tuition fees.
11. Which constitutional principle is most directly implicated by the potential criminalisation of consensual blesser-lessee relationships under the expanded definition of "vulnerable persons"?
- A. The right to equality, as the law discriminates against men in transactional relationships.
 - B. The right to freedom of expression, as the law restricts discussions about transactional sex.
 - C. The right to access healthcare, as the law imposes reporting duties on healthcare providers.
 - D. The right to dignity and autonomy, as the law infantilises adult women under 25.
12. Which statement best reflects the legal ambiguity created by the 2021 amendments to SORMA regarding blesser-lessee relationships?
- A. The amendments explicitly classify all blesser-lessee relationships as sex work.
 - B. The amendments repeal section 11 of SORMA, thereby decriminalising transactional sex.

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- C. The amendments broaden mandatory reporting obligations without clarifying whether consensual transactional relationships are criminal.
- D. The amendments introduce a clear statutory definition distinguishing transactional sex from sex work.

Limpopo provincial health research committee outcomes: Implications for ethics practice and future research

13. Which challenge was reported as a major issue for Research Ethics Committees (RECs) in Africa?
- A. Excessive funding from international donors
 - B. Overstaffing of committee members
 - C. Inconsistent training and funding, and rubber-stamping approvals
 - D. Lack of interest in biomedical research

14. According to the study, which type of research proposals was most frequently submitted to the Limpopo Provincial Health Research Committee (LPHRC) from 2014 to 2024?

- A. Retrospective studies
- B. Mixed-methods studies
- C. Quantitative studies only
- D. Phenomenological studies

15. What is one of the main responsibilities of the National Health Research Ethics Council (NHREC) in South Africa?

- A. Conduct all clinical trials in the country
- B. Register and audit health research ethics committees (HRECs)
- C. Approve funding for postgraduate research projects
- D. Manage provincial hospitals and clinics

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