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**Draft 2<sup>nd</sup> Edition of the**  
***Tri-Council Policy Statement: Ethical Conduct for***  
***Research Involving Humans***

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*Submitted by the*

*Interagency Advisory Panel on Research Ethics*

December 2008



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## **Acknowledgements**

The draft 2<sup>nd</sup> edition of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (TCPS) was made possible through the sustained effort and valuable contributions of many volunteers. The Interagency Advisory Panel on Research Ethics wishes to acknowledge the members of the research community and members of the public, including research participants, who generously dedicated their time, and shared their knowledge of research and research ethics with the Secretariat and Panel. These voluntary contributions laid the groundwork for the evolution of the 2<sup>nd</sup> edition of the TCPS.

The Panel wishes to express its gratitude in particular to all those who have served on its working committees for the significant time and effort they invested in the various priority areas identified in the early years of the Panel's work. Their reports and policy recommendations were the starting point and a major touchstone of the Panel's work.

Many individuals, communities, professional organizations and government departments provided input for this document through feedback at conferences, written submissions, sounding board consultations, focus group discussions and private meetings. The Panel is grateful for the input that helped the Panel to test certain ideas and to refine its proposals for change.

The Panel wishes to acknowledge the work of former Panel members and to express special appreciation for the continuous support from members of the Secretariat on Research Ethics, past and present. Their commitment to the evolution of the TCPS made this draft a reality.



# CONTENTS

CHAPTER 1 .....	1
ETHICS FRAMEWORK.....	1
A. The Importance of Research and Research Ethics .....	1
B. Core Principles .....	2
C. A Guide to this Policy .....	5
CHAPTER 2.....	7
SCOPE AND APPROACH .....	7
A. Scope of Ethics Review .....	7
B. Approach to Research Ethics Board Review .....	11
Appendix .....	18
Examples of Research that Does Not Require Research Ethics Board Review .....	18
CHAPTER 3.....	21
FREE AND INFORMED CONSENT .....	21
A. General Principles .....	21
B. Departures from General Principles of Consent .....	30
C. Capacity.....	33
CHAPTER 4.....	37
INCLUSION IN RESEARCH .....	37
A. Introduction .....	37
B. General Inclusivity of Research .....	38
C. Research Involving Women .....	39
D. Research Involving Vulnerable Persons or Groups .....	39
E. Research Involving Those Who Lack Capacity to Consent for Themselves....	40
CHAPTER 5.....	43
PRIVACY AND CONFIDENTIALITY.....	43
A. Key Definitions and Principles .....	43
B. The Duty of Confidentiality .....	45
C. Safeguarding Information .....	47
D. Secondary Use of Personal Information for Research Purposes.....	49
E. Data Linkage .....	52

CHAPTER 6.....	55
GOVERNANCE OF RESEARCH ETHICS REVIEW.....	55
A. Establishment of Research Ethics Boards.....	55
B. Procedures for REB Review .....	62
C. Reconsideration and Appeals.....	68
D. Research Ethics Review During Publicly Declared Emergencies .....	70
CHAPTER 7.....	75
CONFLICT OF INTEREST .....	75
A. Institutions and Conflicts of Interest.....	75
B. REB Members and Conflicts of Interest .....	77
C. Researchers and Conflicts of Interest.....	78
CHAPTER 8.....	81
MULTI-JURISDICTIONAL RESEARCH .....	81
A. Review Mechanisms for Research Involving Multiple Institutions and Research Ethics Boards.....	81
B. Review of Research Conducted Outside a REB’s Jurisdiction.....	85
C. Other Ethics Considerations When Reviewing Research Conducted Outside the Jurisdiction of the REB.....	88
CHAPTER 9.....	91
RESEARCH INVOLVING ABORIGINAL PEOPLES.....	91
A. Interpreting the Ethics Framework in Aboriginal Contexts.....	91
B. Ethical Concerns in Research Involving Aboriginal Peoples .....	92
C. Applying Provisions of this Policy in Aboriginal Contexts.....	94
D. Research Processes and Ethics Review.....	94
CHAPTER 10.....	109
QUALITATIVE RESEARCH.....	109
A. The Nature of Qualitative Research.....	109
B. Research Ethics Review in the Context of Issues Distinctive to Qualitative Research .....	112
CHAPTER 11.....	121
CLINICAL TRIALS .....	121
A. Overview .....	121
B. Phases of Clinical Trials.....	122
C. Assessing Safety and Minimizing Risk.....	124
D. Sharing New Information.....	127
E. Therapeutic Misconception.....	128
F. Financial Conflicts of Interest.....	129
G. Placebo-Controlled Studies.....	130

H. Analysis and Dissemination of the Data and Results of Clinical Trials .....	132
CHAPTER 12.....	137
HUMAN TISSUE .....	137
A. Identifiability of Tissue .....	137
B. Tissue Collection.....	138
C. Tissue Storage and Banking.....	141
D. Secondary Use of Previously Collected Tissue .....	142
E. Human Reproductive Tissue .....	145
CHAPTER 13.....	149
HUMAN GENETIC RESEARCH.....	149
A. Application of Core Principles to Genetic Research.....	149
B. Plans for Handling Information Revealed through Genetic Research .....	150
C. Genetic Counselling .....	152
D. Genetic Research Involving Families .....	152
E. Genetic Research Involving Communities.....	153
F. Genetic Material Banks.....	154
G. Gene Transfer.....	154





# Chapter 1

## ETHICS FRAMEWORK

### A. The Importance of Research and Research Ethics

Research is a distinctly human enterprise, a natural extension of our desire to understand and to improve the world in which we live. The search for knowledge about ourselves and the world around us has been an aspect of human endeavour throughout recorded history. We observe, we question, and then we test our observations and theories. Over time, these instinctive activities have developed into disciplined inquiry to extend knowledge.

The scope of research is vast. On the purely physical side it ranges from seeking to understand the origins of the universe, down through the fundamental nature of matter. At the analytic level it covers mathematics, logic and metaphysics. Research involving humans ranges widely, including attempts to understand the broad sweep of history, the workings of the human body and the body politic, the nature of human interactions and the impact of nature on humans – the list is as boundless as the human imagination.

There can be no doubt that research has greatly enriched and improved our lives. A fundamental premise of this Policy is that research can benefit society. But research is, by any definition, a step into the unknown: it seeks to understand something not yet revealed. Because we do not know where it will lead us, research may entail risks. These risks can be trivial or profound, physical or emotional – but they do exist.

History offers unfortunate examples where participants in research have been needlessly and at times profoundly harmed by research. It offers many more examples where people have been gratified and their lives enriched by their participation in research and the sense that they have contributed to the expansion of knowledge. Given the fundamental importance of research and of human participation in research, we must do all we can as a society to ensure that research proceeds in an atmosphere of public confidence and trust. By promoting and guiding the ethical conduct of research involving humans, this Policy seeks to contribute tangibly to that essential public confidence and trust.

Respect for human dignity has been a founding value of the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans* (“the Policy”) since its inception. The term lends itself to a wide variety of interpretations. At its most basic, it requires that research involving humans be conducted ethically – that is, in accordance with an agreed-on set of principles. This Policy takes human dignity as the foundation for three core principles that transcend disciplinary boundaries and are therefore relevant

36 to the full range of research covered by this Policy. The intent is that the three core  
37 principles will collectively constitute a functional definition of human dignity, one that  
38 will provide clarity and guidance for the purposes of this document.

39 No single document can provide definitive answers to all ethical issues that may arise in  
40 an undertaking as complex as research involving humans. This Policy sets out guiding  
41 principles for the design, conduct and oversight of ethical research. Its aim is to assist  
42 those who use it – researchers, sponsors, members of research ethics boards (REBs),  
43 research participants and the public – to identify ethical issues in the design, conduct and  
44 oversight of research and to point the way to arriving at reasoned and ethical responses  
45 to these issues.

## 46 **B. Core Principles**

47 **Article 1.1** The three core principles that are the basis for the guidelines developed  
48 in the Policy are:

- 49 • Concern for welfare;
- 50 • Respect for autonomy; and
- 51 • Respect for the equal moral status of all humans.

52 These principles are not absolute. They may, at times, conflict. They do not apply in all  
53 circumstances, to all types of research, as is set out in the following chapters. How they  
54 apply and the weight to be accorded to each one will depend on the nature and context of  
55 the research being undertaken.

### 56 **Welfare**

57 Welfare is a broad concept that encompasses the full range of concerns that form the  
58 basis of an individual's decisions. It includes the individual's own well-being, such as  
59 his or her physical and mental health, but it is broader. It also involves all concerns  
60 regarding the individual's physical, social, economic and cultural environments,  
61 including the welfare of those who are important to the participant. One key aim of this  
62 Policy is not only to safeguard the well-being of the individual research participant, but  
63 to do so in a way that preserves and respects the broader values with which that  
64 individual identifies.

65 The researcher is responsible for considering welfare when designing and conducting a  
66 research project. However, concern for a participant's welfare does not imply that  
67 research must present no risk. Welfare must be assessed in light of the aims and the  
68 methodology of the research. Some risks are legitimate and necessary if the researcher is  
69 to gain the desired knowledge.

70 Researchers must be conscious of the impact their research can have, not only on those  
71 who participate in it, but also on others not directly involved. Just as the benefits of  
72 research can be enjoyed by larger groups, it is also possible that the knowledge gained

73 from research can have negative effects, such as the stigmatization of groups.  
74 Consultation during the design of the research with groups who may be affected can  
75 help clarify the potential impact of the research and may provide the best assurance that  
76 any negative impact of the research is minimized.

77 Prior to the research's being presented to prospective participants, the REB is  
78 responsible for ensuring that the risks of research are reasonable. It is the assessment of  
79 the relative risks and potential benefits (the "risk-benefit ratio") that should determine  
80 whether the research risks are proportionate to the potential contribution of the research  
81 to the advancement of knowledge. Researchers should then explain to prospective  
82 participants the known or expected risks their research presents. In the end, since they  
83 bear the risks, it is the research participants themselves who must judge whether the  
84 risks and benefits of participating are acceptable. This imperative follows from the next  
85 core principle, autonomy.

## 86 **Autonomy and the Decision to Participate in Research**

87 Respect for autonomy implies that participation in research should usually be voluntary  
88 – a matter of choice. To be meaningful, that choice should be informed. This means it  
89 should be based on as complete an understanding as reasonably possible of the purpose  
90 of the research, what it entails, and its foreseeable risks and benefits, both to the  
91 participant and to others.

92 How researchers obtain and maintain consent for participation in their projects will  
93 differ according to the nature of the research and the circumstances and capacity of the  
94 potential participants. While research ethics policies traditionally refer to autonomy as a  
95 condition for participation in research, we must consider the reality that:

- 96 • Not all research participants are capable of exercising their autonomy;
- 97 • Even those with the capacity to express their autonomy may experience  
98 constraints on how they do so; and
- 99 • In certain research contexts, incomplete disclosure of relevant information or  
100 deception is necessary for the successful conduct of the research.

101 Autonomy is not always the paramount consideration. Indeed, for some types of  
102 research, free and informed consent is not even required. The real inquiry, therefore, is  
103 the extent to which the exercise of autonomy is possible, and whether it can be validly  
104 exercised: either directly, by the prospective participant, or by an authorized third-party  
105 decision maker. Beyond the decision of an individual participant or an individual's  
106 authorized third-party decision-maker, the exercise of autonomy is influenced by an  
107 individual's various connections: to family; to community; and to cultural, social,  
108 linguistic, religious and other groups. The individual's decision can have an impact on  
109 and be constrained by any of these. Under some conditions, the views of the groups  
110 affected may have to be considered by the researcher and the REB in approving the  
111 research. The weight given to it will depend on the nature of the research being  
112 undertaken and the individuals or groups in question. This does not, however, imply that  
113 group consent is a condition of ethics approval.

114 The ethical recruitment of participants in human research goes beyond an evaluation of  
115 autonomy, which often seems to focus primarily on whether an adult person has signed a  
116 consent form. It is a more complex consideration of whether the recruitment of  
117 participants has been carried out on a basis that is ethically legitimate and  
118 methodologically justified. It should be a process that respects and reflects, wherever  
119 possible, the values and preferences of the individual participants and, where necessary,  
120 engages the groups that may be affected by the research.

## 121 **Equal Moral Status of All Humans**

122 Equal moral status means that all human beings should be accorded the same level of  
123 respect and concern in the conduct of research. This means that, for example,  
124 researchers may not be arbitrarily discriminatory in the recruitment of participants and  
125 that participants should share the burdens and the benefits of research equitably.  
126 Researchers may choose particular groups as the focus of their research, so long as the  
127 selection criteria for those to be included in the research are germane to answering the  
128 research question.

129 Respect for the equal moral status of all individuals is also important because the  
130 relationship between researcher and participant is often marked by an imbalance of  
131 power. The participant will generally not understand the research in the same way and in  
132 the same depth as does the researcher. In some cases, historically, this power imbalance  
133 has been a source of harm or abuse. Participants must have the assurance that they will  
134 be treated fairly and not be exploited. Researchers should conduct themselves in a way  
135 that earns the trust of participants. Respect for the equal moral status of all individuals is  
136 an important element in establishing that trust.

137 A special problem of according equal treatment to all emerges with regard to research  
138 populations that may be particularly vulnerable. In light of a few notorious cases of  
139 abuse, there has been a tendency to try to afford extra protection to certain categories of  
140 participants. While some such measures may be warranted, equal moral regard for all  
141 requires that the protection not be so comprehensive as to deny the groups access to  
142 participation in ethical research.

143 In designing and conducting research, researchers should consider their relationship to  
144 participants as a form of collaboration, even in fields where participants do not (indeed  
145 cannot) contribute to the design of the research. The touchstone for the researcher should  
146 be to respect the welfare, autonomy and equal moral status of all participants. That will  
147 engender trust, and the trust of individual participants, as well as public trust, is  
148 necessary for the research process. Researchers should also consider the implications of  
149 the core principles for sharing the benefits of the research.

150 In summary, the importance of research and the need to ensure the ethical conduct of  
151 research forces both researchers and REB members to navigate a sometimes difficult  
152 course between insufficient protection and overprotection of research participants. The  
153 three core principles, which characterize respect for human dignity, provide the compass  
154 for that journey.

155 **C. A Guide to this Policy**

156 To be effective, a research ethics policy should provide guidance for the interpretation of  
157 the principles of research ethics. This Policy aims to strike an appropriate balance  
158 between recognizing the potential benefits of research and the need to protect  
159 participants from research-related risks. Given that research involving humans covers  
160 the full spectrum from minimal to high risk, the first element of the approach laid out in  
161 this Policy is to ensure that the degree of scrutiny applied to ethics review is  
162 proportionate to the level of risk that the research presents.

163 Proportionality is the key to ensuring that those who volunteer to participate in research  
164 are not exposed to unnecessary risks, while at the same time avoiding the creation of  
165 unnecessary barriers or delays to research. Those involved in the design and the review  
166 of research should keep ethical considerations in mind. For any given research question,  
167 the design should be structured so that research risks are minimized. Equally, those  
168 involved in reviewing research (both initial and continuing review) should do so with an  
169 appreciation of the level of review that is appropriate to the risks of the project. The  
170 scope and intensity of ethics review should be proportionate to the level of risk involved.  
171 When those involved in the review of research tailor their level of scrutiny to the level of  
172 risk, they reduce unnecessary impediments and facilitate the progress of worthwhile and  
173 ethical research. This is the crux of proportionality, and it is a message that recurs  
174 throughout this Policy.

175 It is equally important that ethics review be appropriate to the disciplines, fields of  
176 research and methodologies of the research being reviewed. This means that REBs must  
177 understand the discipline and methodology under review and be able to assess the  
178 research on its own terms.

179 Finally, it is not enough to say that ethics review must be approached from the  
180 perspective of the participant. It is necessary to consider the context – social, economic,  
181 cultural or other – that shapes the participant’s life.

182 Together, the core principles and proportionality form the basis of a sound approach to  
183 research ethics – one that recognizes the value of research, while respecting, valuing and  
184 protecting research participants.

185 Members of REBs should view the Policy’s guidelines, not as rules to be applied, but as  
186 principles to be interpreted. This requires a thorough understanding of the principles in  
187 this Policy. It also requires the exercise of sound judgment in deciding how to apply  
188 those principles. Because the principles are intended to cover a wide variety of  
189 approaches to research and types of research, they may and should be interpreted  
190 differently in different circumstances. The use of discretion in the exercise of  
191 interpretation will be necessary. A certain variability of decisions among REBs may  
192 therefore be inevitable. These should not be so great, however, as to result in  
193 fundamental conflicts among the decisions of REBs.

194 This Policy is designed to provide general guidance with respect to the ethical conduct  
195 of research involving humans. It is divided into chapters, each of which focuses on a  
196 different aspect of the ethics of research and research ethics review. The chapters are  
197 divided into articles that provide targeted guidance on specific issues. Each article is  
198 followed by an explanatory section – “Application” – that describes in more detail  
199 considerations relevant to interpreting the article. In some cases, illustrative examples  
200 are provided, and in some sections other sources – “References” – are provided for more  
201 detailed guidance on particular topics.

202 Where the articles and their applications do not address an ethical issue in question, the  
203 researcher or REB should return to the core principles in order to resolve their dilemma.

204 This Policy, which provides a distinctive, comprehensive approach to considering  
205 research ethics, will continue to evolve as new issues emerge.

# Chapter 2

## SCOPE AND APPROACH

206

207

208 The purpose of this Policy, as set out in Chapter 1 (“Ethics Framework”), is to establish  
209 principles to guide the design, conduct and review of research involving human  
210 participants. This chapter outlines the scope of application of the Policy and the approach  
211 to ethics review that flows from the core principles: welfare, autonomy and equal moral  
212 status of all humans. It sets out the preferred approach to ethics review by a research ethics  
213 board (REB) – a proportionate approach, which tailors the level of scrutiny by an REB to  
214 the level of risk presented by the research, both at the stage of the initial review and  
215 throughout the period the research is active, to ensure the continued ethical acceptability of  
216 research. The establishment, governance, jurisdiction, composition and operational issues  
217 related to the functioning of REBs are addressed in Chapter 6 (“Governance of Research  
218 Ethics Review”).

### 219 **A. Scope of Ethics Review**

#### 220 **Research Requiring REB Review**

221 The following article defines the general categories of research that require REB review in  
222 accordance with this Policy, subject to the exceptions set out further on in this chapter.

223 **Article 2.1** (a) All research that involves human participants requires review and  
224 approval by a research ethics board (REB) in accordance with this  
225 Policy before the research commences, except as stipulated below.

226 (b) Research involving human remains, cadavers, tissues, biological fluids,  
227 embryos or fetuses shall also be reviewed by an REB.

228 (c) Researchers who intend to secure identifiable personal information about  
229 participants shall secure REB approval.

230 **Application** REB review is limited to those activities defined as “research” in this Policy,  
231 and involving “human participants” as defined in this Policy. There are  
232 many activities outside the scope of these definitions that may raise ethical  
233 issues requiring some form of review or guidance. REBs are not the sole  
234 forum for ethics guidance, however. Their role should be restricted to the  
235 scope of research involving human participants as set out below.

236 For the purpose of this Policy, “research” is defined as an undertaking  
237 intended to extend knowledge through a disciplined inquiry or systematic

238 investigation.

239 A determination of the intended purpose of the undertaking, as distinct from the  
240 use of potentially similar methods, is key for differentiating activities that  
241 require review by an REB and those that do not.

242 For the purpose of this Policy, “research participants” (or simply, “participants”)  
243 are those living individuals whose data or responses to questions, stimuli or  
244 interventions by the researcher are material to the research question. They are  
245 unique among the many parties involved in research, because they bear the  
246 primary risks of the research. The focus of this Policy is to ensure respect for  
247 their welfare, autonomy and equal moral status. These individuals are often  
248 referred to as “research subjects.” This Policy prefers the term “participant,”  
249 because it better reflects the spirit behind the core principles: that individuals  
250 who choose to participate in research play a more active role than the term  
251 “subject” conveys. In particular, it reflects the range of research covered by this  
252 Policy, as well as the varied degree of involvement by participants that different  
253 types of research offer.

254 Article 2.1(b) describes the scope of REB review beyond living individuals. This  
255 includes research involving human materials such as biological fluids, tissues  
256 and gametes, and human remains. Note that this covers only research involving  
257 the physical remains of a deceased person, and not deceased persons  
258 themselves. For further information regarding what type of research is exempt  
259 from REB review, see Article 2.2.

260 The use of human tissues for the purpose of research is further elaborated on in  
261 Chapters 12 and 13 (“Human Tissue” and “Human Genetic Research”).

262 For the purposes of this Policy, “identifiable personal information” means  
263 information relating to an individual that could be used to identify or re-  
264 identify that individual through a combination of indirect identifiers (such as  
265 date of birth, place of residence, or a unique personal characteristic). It  
266 includes information about personal characteristics such as age, culture,  
267 educational background, employment history, health care, life experiences,  
268 religion, social status and other matters where an individual has a reasonable  
269 expectation of privacy. (See Chapter 5 [“Privacy and Confidentiality”]  
270 regarding types of information and Chapter 3 [“Free and Informed  
271 Consent”] regarding consent procedures specific to securing identifiable  
272 personal information.)

273 Subject to the exceptions in this chapter, research based exclusively on  
274 publicly available information requires REB review only if the participant is  
275 approached directly for interviews or for access to private papers, and then  
276 only to ensure that such approaches are conducted according to professional  
277 protocols and to Articles 3.1 and 3.2 (free and informed consent). Where the  
278 research involves interaction with an individual in public life or an artist as a



279 research participant by way of a request for an interview or for access to  
280 private papers, the REB review should focus only on whether these requests  
281 will be made in accordance with appropriate ethical and professional  
282 standards. Similarly, REBs should ensure that interviews with third parties  
283 are conducted according to a professional interview protocol and to Articles  
284 3.1 and 3.2 (free and informed consent), and that the potential interviewees  
285 be fully informed about publication of the interview and their identity. REBs  
286 should not require such third-party interviews to be controlled in any way by  
287 the person who is the primary focus of the research.

288 Research based on critical inquiry – focusing, for example, on public policy  
289 issues, modern history, or literary or artistic criticism – may involve  
290 interaction with living individuals, notably through interviews. Where the  
291 aim of the researchers is to engage in a critical examination of a body of  
292 artistic work, a public policy, other comparable types of work, the role of the  
293 REB should be limited to ensuring that researchers conduct their work  
294 respecting the professional standards of their discipline(s) or field(s) of  
295 research. The need to ensure freedom of inquiry and to protect the ability of  
296 researchers to criticize the work (or organization, political party, corporate  
297 enterprise, etc.) they are examining takes precedence over the need to  
298 protect individual parties from harm.

#### 299 **Research Not Requiring REB Review**

300 The requirement for REB review is not absolute. This Policy allows some  
301 exemptions and exceptions, as outlined below and complemented in the  
302 Appendix by examples of activities that do not require ethics review by an  
303 REB.

304 Beyond the exceptions listed below, others may arise. Because principles are  
305 designed to guide ethical reflection and conduct, they require flexibility and  
306 admit exceptions. To preserve the values, purpose and protection that they  
307 attempt to advance, the onus for demonstrating a reasonable exception to a  
308 principle should fall on those claiming the exception. The opinion of the  
309 REB should be sought whenever there is any doubt about the applicability of  
310 this Policy to a particular research project.

311 Community processes may apply to research beyond the scope of REB  
312 responsibilities. For example, research on the interface between  
313 environmental and human systems that does not involve individual  
314 participants does not require REB review. In these cases, the guidelines  
315 of this Policy can be used as a model to help fill gaps, accommodate  
316 overlap and resolve other types of ethical conflicts between community  
317 and institutions.

318 **Article 2.2** Research that relies exclusively on publicly available information does not  
319 require research ethics board review. This includes research on living

320 individuals and research on organizations such as governments or  
321 corporations, so long as the research is based entirely on material to which  
322 the public has access.

323 **Application** Archival materials and records conserved by libraries, documentation  
324 centres and archival services (public and private) that are open to the general  
325 public on the basis of transparent procedures, including consultation  
326 policies, are considered to be publicly available for the purposes of this  
327 Policy. An archival document or a database that is subject to restrictions  
328 under access to information and privacy legislation may nevertheless be  
329 considered publicly available for the purposes of this Policy, insofar as it  
330 meets the criteria set out in this definition.

331 Research about a living individual involved in the public arena  
332 (politicians, artists, public figures, business or labour leaders, etc.) or  
333 about organizations and institutions (governments, corporations, criminal  
334 organizations, political parties, etc.) based exclusively on publicly  
335 available information such as documents, records, material from public  
336 archives, performances, archival materials, third-party interviews, public  
337 policy documents, published works and the like, available in print,  
338 electronic or other media, to which the public is granted access, is not  
339 required to undergo REB review, because such research involves no  
340 interaction with the person or organization who is the subject of the public  
341 records. In these cases, there is no presumption of privacy. The safeguard  
342 for those in the public arena is through public debate and discourse or, in  
343 extreme cases, through action in the courts for libel.

344 **Article 2.3** Research ethics board review is usually not required for research involving  
345 public policy issues, the writing of modern history, or literary or artistic  
346 criticism.

347 **Application** While all the areas of research noted in Article 2.3 may involve interaction  
348 with living individuals, this exception is based on the fact that the research  
349 relies either on published or publicly available information, including  
350 performances, archival materials, or on information derived from publicly  
351 available third-party interviews. This exception could, for example, cover  
352 research about a living individual with a public profile, or criticism of a  
353 living artist, so long as the research involves no interaction with the person  
354 who is the subject of the publicly available information.

355 **Article 2.4** Quality assurance and quality improvement studies, program evaluation, and  
356 performance reviews or testing within normal educational requirements are  
357 not subject to research ethics board review.

358 **Application** Studies related directly to assessing the performance of an organization or  
359 its employees or students, within the mandate of the organization or  
360 according to the terms and conditions of employment or training, do not

361 require REB review.

362 Activities other than research as defined in this Policy may still raise  
 363 ethical issues that would benefit from careful consideration by a body  
 364 capable of providing some independent guidance, other than an REB.  
 365 Such issues may include, for example, the potential for real or perceived  
 366 coercion in certain quality assurance or evaluation studies. Bodies  
 367 capable of providing such guidance may be based in professional or  
 368 disciplinary associations, particularly where those associations have  
 369 established best-practices guidelines for research in their discipline.

370 **Article 2.5** Research involving observation of people in public places that does not  
 371 allow for the identification of the individuals in research material and that  
 372 is not staged by the researchers does not require research ethics board  
 373 review.

374 **Application** Observational research is a form of qualitative research. The exemption  
 375 of observational research that meets the specific criteria set out in this  
 376 article is addressed more fully in Article 10.2 of Chapter 10 (“Qualitative  
 377 Research”).

378 **Article 2.6** Creative practice activities in and of themselves do not require research  
 379 ethics board review.

380 **Application** Creative practice is a process through which an artist makes or interprets  
 381 a work or works of art. It may also include a study of the process of how  
 382 a work of art is generated. Creative practice activities do not require  
 383 review by an REB, but they may be appropriately governed by ethical  
 384 practices established within the cultural sector. As a form of artistic  
 385 expression, creative practice does not fall within the definition of research  
 386 in this Policy. It is therefore not subject to REB review.

387 Research that employs creative practice to obtain responses from human  
 388 participants that will be analyzed to generate or to address a research  
 389 question is, however, subject to REB review.

## 390 **B. Approach to Research Ethics Board Review**

### 391 **REB Review Shall be Proportionate**

392 **Article 2.7** The research ethics board should adopt a proportionate approach to ethics  
 393 review, based on the principle that as the risk to participants increases, so  
 394 should the level of scrutiny in assessing the research and the level of  
 395 expertise involved in the review process.

396 **Application** The concept of proportionate review gives practical expression to the core  
 397 principle of concern for the welfare of participants in research, such that the

398 more potentially invasive or harmful is the proposed and ongoing research,  
399 the higher the level of scrutiny and expertise that should be applied to the  
400 ethics review process. While all research must be reviewed adequately,  
401 proportionate review is intended to direct the most intensive scrutiny, time  
402 and resources, and correspondingly the most protection, to the most ethically  
403 challenging or high-risk research.

404 A proportionate approach to ethics review starts with an assessment of  
405 the character, magnitude and probability of potential harms and benefits  
406 inherent in the research. The REB should make this assessment in light of  
407 the context of the research – that is, elements of the research that may  
408 produce benefits or harms or otherwise have an impact on the ethics of  
409 research.

410 The concept of minimal risk (described below) provides a foundation for  
411 proportionate review. The various applications of the proportionate  
412 approach to REB review are addressed in Chapter 6 (“Governance of  
413 Research Ethics Review”).

#### 414 **Concept of Potential Risks and Benefits**

415 Applying the principles of concern for welfare and respect for autonomy  
416 of research participants requires an assessment of foreseeable risks and  
417 benefits to research participants and to others. The ethical acceptability of  
418 research is dependent on a judgment as to whether the potential benefits  
419 justify the risks, thus ensuring that research involving humans is designed  
420 and conducted in such a way as to answer as well as possible the question  
421 posed by the research, while ensuring that the participant is not unduly or  
422 unnecessarily exposed to risk. It is the responsibility of the REB in  
423 reviewing a research proposal to decide whether the research presents an  
424 ethically acceptable balance of risks and potential benefits. The  
425 subsequent decision to participate in approved research is one that  
426 potential participants make based on their own appreciation of whether it  
427 serves their welfare to do so. Participants should share both the burdens  
428 and the benefits of research.

#### 429 *Potential Risks*

430 Three considerations (informed by the principle of concern for welfare)  
431 are relevant to the assessment and categorization of risks to research  
432 participants and of the possible risks to third parties:

- 433 • The nature of the harm;
- 434 • The magnitude or seriousness of the harm; and
- 435 • The probability of occurrence of the harm.

436 Potential harms are usually understood in relation to risks, which are  
437 defined in terms of the magnitude of harm and the probability of its  
438 occurrence. Both potential harms and potential benefits may span the  
439 spectrum from minimal through substantial. An explanation of “risk”  
440 should clarify risk as the combination of the probability of harm and the  
441 magnitude of harm. For example, the various kinds of harms that a  
442 participant might incur, the likelihood of participants’ actually incurring  
443 harms, and the available methods of ameliorating the harms all need to be  
444 considered. Research in certain disciplines, such as epidemiology,  
445 genetics, sociology or cultural anthropology, may present risks that go  
446 beyond the individual and may involve the interests of communities,  
447 societies or other defined groups.

448 For the purpose of this Policy, a “minimal risk” situation is defined as  
449 one in which the probability and magnitude of possible harms implied by  
450 participation in the research is no greater than those encountered by the  
451 participant in those aspects of his or her everyday life that relate to the  
452 research.

453 Above the threshold of minimal risk, research warrants a higher degree of  
454 scrutiny and greater provision for the protection of the interests of  
455 prospective participants.

456 Because research involves advancing the frontiers of knowledge, its  
457 undertaking often involves uncertainty about the precise magnitude and  
458 kind of harms that attend proposed research. Certain accepted research  
459 paradigms bring inherent limitations to the prior identification of risk. For  
460 example, when research in the social sciences employs emergent design,  
461 the manner in which the study will proceed and any associated risks will  
462 be known only as the study unfolds. (See Chapter 3 [“Free and Informed  
463 Consent”] and Chapter 10 [“Qualitative Research”].) In cases in which  
464 patients participate in research on interventions undertaken for purposes  
465 of therapy for that individual, the concept of minimal risk raises special  
466 issues in clinical research, especially clinical trials. (See Chapter 11  
467 [“Clinical Trials”].)

468 Risk may be perceived differently by different groups in society.  
469 Researchers and REBs should take this into account in designing and  
470 reviewing research. In assessing risks for specific populations,  
471 researchers and REBs should understand the role of the culture, values  
472 and beliefs of the populations to be studied, as well as any guidelines that  
473 exist for conducting research with these populations. (See Chapter 8  
474 [“Multi-jurisdictional Research”], Chapter 9 [“Research Involving  
475 Aboriginal Peoples’] and Chapter 10 [“Qualitative Research”].)

476

*Potential Benefits*

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Research involving humans is intended to produce benefits for participants themselves, for other individuals, or for society as a whole through the advancement of knowledge. Just as there are uncertainties concerning the risks of research, so there is uncertainty about its expected benefits. In most research, the primary benefits produced are for society and for the advancement of knowledge.

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*Balancing Risks and Benefits*

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Risks and benefits must be evaluated in the context of research and, to the extent possible, from the perspective of participants, because both risks and benefits may be perceived differently by different individuals.

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The analysis, balance and distribution of risks and benefits are critical to the ethics of human research. Modern research ethics, for instance, requires a favourable risk–benefit balance – that is, the anticipated benefits should outweigh the foreseeable harms.

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The uncertainty of research outcomes often makes it difficult to reliably predict the precise nature and magnitude of the resulting benefits and harms. This reality, coupled with the principle of concern for welfare, imposes an ethical obligation to design, assess and conduct research in a way that protects research participants from any unnecessary or avoidable harm. This is particularly true in the areas of biomedical research, where the physical well-being of participants may be at stake.

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These considerations do not apply in the same way in certain areas of research in the social sciences and humanities, such as political science, economics or modern history (including biographies), where the purpose of the research may be to cast a critical eye on organizations, political institutions, or systems or individuals in public life. The outcome of these types of research may harm the reputation of public figures or institutions in politics, business, labour, the arts, or other walks of life. Such harm may, however, be an unavoidable outcome of research that seeks to shed light on or to critically assess the work of a public figure or institution. Where the purpose of the research is to advance knowledge about the workings, for example, of a public office or a public figure, the risk–benefit analysis by the REB should focus on whether the approach they have adopted respects the professional standards of the researcher’s discipline or fields of research. Just as a bruise is an unavoidable risk of research that requires a needle-stick, so harm to reputation is an unavoidable risk of certain types of social science inquiry, and it must be treated as such.

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515 **Requirement of Continuing REB Review**

516 **Article 2.8** Further to the initial review of research that falls within the scope of this  
517 Policy, research ethics boards shall review ongoing research throughout the  
518 life of the project. This includes review of departures from approved  
519 research that result in a change in the level of risk of research, or other  
520 ethical implications that have an impact on the welfare, autonomy and equal  
521 moral status of all humans. As with initial review, continuing ethics review  
522 should be based on a proportionate approach.

523 **Application** The primary goal of continuing ethics review is to ensure that all stages  
524 of a research project are conducted in accordance with the guiding  
525 principles outlined in this Policy, thus ensuring the continued ethical  
526 acceptability of research. At the time of initial review of the research, the  
527 REB has the authority to determine the level at which continuing ethics  
528 review occurs (for example, the frequency of reports and the type of  
529 information to be provided in reports). The level of review and reporting  
530 schedule may be adjusted throughout the life of the project if the need  
531 arises in situations where the risk level increases because of the discovery  
532 of new information or changes in procedures.

533 Continuing ethics review by an REB provides those involved in the  
534 research process (in particular, researchers, REBs, participants or  
535 participant groups) with multiple opportunities to reflect on the ethical  
536 issues surrounding the research. This reflection can show whether the  
537 stated risks, or other unknown risks, were incurred and how they affected  
538 the individual and collective welfare of participants or participant groups.  
539 This reflective practice enables both researchers and REBs to be more  
540 effective in protecting research participants in current and future research.  
541 This practice is especially important in new and emerging fields, where  
542 the ethical implications are not yet well understood. Here, reflection is  
543 characterized as a continuing dialogue between the participants or  
544 participant groups, REBs and researchers to enable the principles and  
545 practices surrounding research ethics to evolve.

546 In the conduct of their approved research, researchers should be  
547 cognizant of the requirement to report to their REB, in a timely manner,  
548 events or issues that have ethical implications or that change the risk to  
549 participants. The level of REB review required to assess these changes  
550 shall follow a proportionate approach to ethics assessment.

551 Further details related to the application of continuing ethics review and the  
552 REB review of departures to approved research are outlined in Chapter 6 of  
553 this Policy.

554 **Scholarly Review as Part of REB Review**

555 **Article 2.9** The research ethics board should satisfy itself that research posing  
556 more than minimal risk has undergone scholarly review.

557 **Application** Scholarly review (referred to as peer review or scientific review in clinical  
558 research) is generally understood as a review of the importance of the  
559 research question and the validity of the methodology. When research poses  
560 more than minimal risk, exposing participants to research that has not been  
561 subject to scholarly review may be considered unethical.

562 Scholarly review is assessed by those familiar with the disciplines or  
563 methods of the proposed research. REBs may themselves assume the  
564 responsibility for scholarly review in the rare circumstances where there is  
565 no other more appropriate body to do so. In these cases, the REB will review  
566 research approaches and methodologies to the extent necessary to determine  
567 that the approach or methodology adopted is capable of answering the  
568 research question in a manner appropriate to the discipline or disciplines in  
569 question.

570 Traditions for scholarly and ethical review undertaken vary between  
571 disciplines or fields of research. The tradition for biomedical research is that  
572 it undergoes peer review prior to or as part of the REB review process. The  
573 extent of peer review required for minimal-risk biomedical research will  
574 vary according to the research being carried out. The tradition in the  
575 humanities and the social sciences for researchers is to undergo peer review  
576 at the grant application or publication stage. REBs therefore shall not require  
577 peer review for research in the humanities and the social sciences that poses,  
578 at most, minimal risk.

579 The possible mechanisms for REBs to seek evidence of scholarly review of  
580 more-than-minimal-risk research are detailed in Article 6.14 of Chapter 6  
581 (“Governance of Research Ethics Review”).

582 Nothing in this section, however, shall be interpreted to mean that other  
583 relevant parts of this Policy – such as the need for REB review, interview  
584 protocols, free and informed consent and privacy – are not applicable to  
585 their research.

586 **Balance of Ethics and Law**

587 **Article 2.10** In ethics review and the conduct of research, research ethics boards and  
588 researchers have an obligation to be aware of applicable laws.

589 **Application** The law establishes principles and rules that affect and regulate the conduct  
590 of research involving humans. These include legal rules about privacy,



591 confidentiality, competence of research subjects, intellectual property, and  
592 many other topics. Researchers should be aware of applicable laws. For  
593 research conducted in multiple jurisdictions or research outside Canada  
594 (addressed in Chapter 8 [“Multi-jurisdictional Research”]), this may require  
595 knowledge of laws in multiple jurisdictions. REBs may satisfy this  
596 obligation through expertise among their memberships or through wider  
597 consultation.

598 Legal rules and ethical principles are not always consistent. Researchers  
599 may face situations where they experience a tension between the  
600 requirements of law and the guidance of ethical principles. In such  
601 situations, researchers should do their best to uphold ethical principles while  
602 complying with the law. Consultation with colleagues, the REB or any  
603 relevant professional body will help resolve any conflicts between law and  
604 ethics and guide an appropriate course of action. This may include providing  
605 the researcher with access to legal advice, if needed.

# 606 Appendix

## 607 **Examples of Research that does not Require Research Ethics Board** 608 **Review**

609 The following are examples of activities that do not require review by a research ethics board  
610 (REB). These may, nevertheless, raise ethical issues that would benefit from careful  
611 consideration outside of the REB.

- 612     ▪ Scholarship based on personal reflections and self-study where no one other than  
613     the researcher is involved in the research (e.g., autoethnography).
- 614     ▪ Occasions when individuals other than the researcher provide information, but  
615     are not themselves the focus of the research; for example:
  - 616         – data collection about organizations, policies, procedures, professional  
617         practices or statistical reports (e.g., information provided by authorized  
618         personnel in the ordinary course of their employment); or
  - 619         – consultation to frame or develop the research (e.g., a graduate student  
620         interviews an agency manager to determine if the data he or she is interested  
621         in can be accessed, and how the information from the interview will inform  
622         planning decisions about the research).
- 623     ▪ Program evaluation, quality assurance, quality improvement, or the review and  
624     assessment of the program or service; for example:
  - 625         – student course evaluations;
  - 626         – staff performance reviews;
  - 627         – website usability testing;
  - 628         – discussion with stakeholders and consultants; or
  - 629         – data collection for internal or external organizational reports.
- 630     ▪ Public health surveillance that is legally mandated.
- 631     ▪ Secondary use of information in research that does not involve identifying or  
632     identifiable information (see Chapter 5 [“Privacy and Confidentiality”] for a  
633     definition of identifying or identifiable information).  
634     635     636
- 637     ▪ Analysis or scrutiny of material in the public domain:
  - 638         – studies of people's writings that appear in the public domain (e.g., letters to  
639         the editors of newspapers; postings to public websites); or

- 640           – studies of public figures (e.g., politicians or celebrities) based on material  
641           such as interviews with a journalist or broadcast on television; biographical  
642           profiles based on materials in a public archive.
- 643           – research for a critical biography not involving living participants (i.e.,  
644           based exclusively on published or publicly available material) (see Article  
645           2.2).
- 646       ▪ Student assignments that pose minimal risk; teach about the design, conduct and  
647       process of research; and might involve “practice” data collection.



# Chapter 3

648

649

## FREE AND INFORMED CONSENT

650 Respect for human dignity implies that individuals who participate in research should do so  
651 voluntarily, understanding the purpose of the research and its risks and potential benefits as  
652 fully as reasonably possible. The decision to participate is therefore generally seen as an  
653 expression of autonomy – the result of an individual’s weighing the risks and potential  
654 benefits of a research study prior to agreeing to participate.

655 These are not, however, the only circumstances under which research takes place. Some  
656 potential participants, such as young children, lack the capacity to decide for themselves  
657 whether to participate. Consent in these cases requires the intervention of third parties to  
658 decide whether participation would be appropriate, based on considerations of well-being and  
659 welfare. These circumstances also involve considerations of equal moral status: it is  
660 important that those who lack capacity have the opportunity to participate in research that  
661 may benefit themselves or others.

662 The circumstances of the research itself may not allow for full disclosure of all relevant  
663 information prior to its commencement. This is the case, for example, with research in  
664 individual medical emergencies. It is also the case with certain research methodologies,  
665 where partial disclosure or an element of deception may be necessary in order for the  
666 research to be valid. In these cases, consent is still important, but it may have to be addressed,  
667 at least in part, following the research rather than preceding it.

668 These variations in the approach to consent raise a number of ethical issues. For example,  
669 what constitutes coercion or undue influence? When is partial or late disclosure ethically  
670 acceptable? What are the appropriate limits on the types of research in which individuals who  
671 lack the capacity to decide for themselves may participate?

672 In assessing consent, much emphasis has been placed on the signing of a consent form.  
673 Consent, however, may be evidenced in many equally legitimate ways. The primary focus of  
674 ethical concern should be on the quality of the consent, and not on how it is documented.

### 675 **A. General Principles**

#### 676 **Consent Must Be Voluntary**

677 **Article 3.1** Consent must be given voluntarily and, where feasible, may be withdrawn at  
678 any time.

679 **Application** The element of voluntariness is important, because it means that an  
680 individual has chosen to participate in research according to his or her own  
681 values, preferences and wishes. To maintain the element of voluntariness,  
682 the participant should be free to withdraw from the research at any time.

683 Researchers and research ethics boards (REBs) must be aware of the approach  
684 to recruitment as an important element in assuring voluntariness. In particular,  
685 who recruits participants, and how and when they are approached, are  
686 important elements in assuring (or undermining) voluntariness.

687 Undue influence and manipulation may arise when potential participants are  
688 approached by individuals in a position of authority over them. The influence  
689 of power relationships on voluntary choice should be judged according to the  
690 particular context of prospective participants. For example, the voluntariness of  
691 prisoners, members of organizations with authoritarian structures (such as the  
692 military, police, some religious groups, or street gangs), or of employees or  
693 students, may be restricted because their institutional context implies that the  
694 individuals being recruited may feel constrained to follow the wishes of those  
695 who have some form of control over them. This control may be physical,  
696 financial, or professional, for example. It may involve offering some form of  
697 inducement or threatening some form of deprivation. In such situations, the  
698 control may place undue pressure on the prospective participants. There can be  
699 no voluntariness if consent is secured by the order of authorities – the most  
700 explicit exercise of undue influence.

701 REBs should also pay particular attention to the elements of trust and  
702 dependency – for example, within doctor–patient or professor–student  
703 relationships – because these can impose undue influence on the individual  
704 in the position of dependence to participate in research projects. Undue  
705 influence is particularly likely in situations of ongoing or significant  
706 dependency.

707 Voluntariness is especially relevant in research involving restricted or  
708 dependent participants. Any relationship of dependency, even a nurturing  
709 one – as, for example, between an individual with a debilitating chronic  
710 condition and his or her caregiver – may give rise to undue influence, even  
711 if it is not applied overtly.

712 Beyond undue influence, potential participants may be subjected to  
713 coercion, which involves a threat of harm or punishment for failure to  
714 participate. This more extreme form of influence would, of course, negate  
715 the voluntariness of a decision to participate or to remain in a research study.

716 The offer of benefits in some contexts may amount to undue inducement and  
717 thus negate the voluntary aspect of the consent of participants, who may  
718 perceive such offers as a way to gain favour or improve their situation. The  
719 issue of reasonable versus excessive compensation for participation in

720 research is an important consideration in assessing voluntariness.  
721 Compensation for participation is intended to ensure that participants are not  
722 put at a financial disadvantage for the time and inconvenience of  
723 participation in research. In some cultures, the giving and receiving of gifts  
724 symbolizes the establishment of a relationship comparable to consent.  
725 Compensation or gifts should not be so attractive as to constitute an  
726 inducement to take risks that one would otherwise not take. This is a  
727 particular consideration in the case of healthy volunteers for the early phases  
728 of clinical trials, as discussed in Article 11.1 of Chapter 11 (“Clinical  
729 Trials”).

730 In considering the possibility of undue inducement in research projects  
731 where participants will be compensated, REBs should be sensitive to issues  
732 such as the economic circumstances of those in the pool of prospective  
733 participants, and to the magnitude and probability of harms.

734 Participants should be able to change their mind, for any reason or even for  
735 no reason, and decide to withdraw from a research study. In some cases,  
736 however, the physical practicalities of the study may prevent withdrawal  
737 partway through – for example, if the study involves only a single  
738 intervention or personal information is de-identified and added to a data  
739 pool.

#### 740 **Consent Must Be Informed**

741 **Article 3.2** Subject to the exceptions in Articles 3.8 and 3.9, researchers shall provide,  
742 to prospective participants or authorized third parties, full and frank  
743 disclosure of all information relevant to free and informed consent.

744 **Application** Researchers should ensure that prospective participants are given adequate  
745 opportunities to pose any questions they may have, and to discuss and  
746 consider whether they will participate. For the purposes of this Policy,  
747 “authorized third party” refers to an individual with the necessary legal  
748 authority to make decisions on behalf of an individual who lacks the  
749 capacity to decide whether to participate in a particular research project.

750 At the commencement of the process of free and informed consent,  
751 researchers or their qualified designated representatives should provide  
752 prospective participants with the following, as appropriate to the particular  
753 research:

- 754 (a) Information that the individual is being invited to participate in a  
755 research project;
- 756 (b) A comprehensible statement of the research purpose, the identity of the  
757 researcher, the identity of the funder or sponsor, the expected duration  
758 and nature of participation, a description of research procedures, and  
759 an explanation of the responsibilities of the participant;

- 760 (c) A comprehensible description of reasonably foreseeable harms and  
 761 benefits, both to the participants and in general, that may arise from  
 762 research participation, as well as the likely consequences of non-action,  
 763 particularly in research related to treatment, or where invasive  
 764 methodologies are involved, or where there is a potential for physical  
 765 or psychological harm;
- 766 (d) An assurance that prospective participants are under no obligation to  
 767 participate; have the right to withdraw at any time without prejudice to  
 768 pre-existing entitlements; and throughout the course of the research  
 769 will be given, in a timely manner, information that is relevant to their  
 770 decision to continue or withdraw from participation;
- 771 (e) Information concerning the possibility of commercialization of  
 772 research findings, and the presence of any apparent or actual or  
 773 potential conflict of interest on the part of researchers, their institutions  
 774 or sponsors;
- 775 (f) The measures to be undertaken for dissemination of research results,  
 776 and whether participants will be identified directly or indirectly;
- 777 (g) The identity of the qualified designated representative who can  
 778 explain scientific or scholarly aspects of the research;
- 779 (h) Information on the appropriate resources outside the research team  
 780 to contact regarding possible ethical issues in the research;
- 781 (i) An indication of who will have access to information collected on  
 782 the identity of participants, descriptions of how confidentiality will  
 783 be protected, and anticipated uses of data;
- 784 (j) Information on the circumstances under which the researcher may  
 785 terminate the participant's participation in the research;
- 786 (k) Information on any costs, payments, reimbursement for  
 787 expenses or compensation for injury; and
- 788 (l) A statement to the effect that, by consenting, participants have not  
 789 waived any legal rights.

790 Once research results have been compiled, researchers should make  
 791 them readily available to participants, to the extent that it is feasible  
 792 and in a manner that is appropriate.

793 Where there is a research team, the principal researcher is ultimately  
 794 responsible for the actions of those acting with delegated authority. This  
 795 includes responsibility for ensuring that the consent process has been  
 796 respected.



797 Article 3.2 states the requirement to provide prospective participants with  
798 the information they need to give free and informed consent to their  
799 involvement in the research project. While the list of required information  
800 in Article 3.2 is extensive, additional information may be required in  
801 particular types of research or under particular circumstances.

802 Rushing the process of free and informed consent, or treating it as a  
803 perfunctory routine, violates the principles of autonomy and welfare,  
804 inasmuch as it may not allow for the assimilation of information for the  
805 participant, nor allow adequate time for the participant to make a  
806 considered judgment. The time required for providing an initial free and  
807 informed consent will depend on such factors as the magnitude and  
808 probability of harms, the complexity of the information conveyed, the  
809 setting where the information is given, and the participant's situation (for  
810 example, his or her level of apprehension or curiosity about the research,  
811 or the importance to the participant of the potential benefit).

812 Paragraphs (a) to (c) require researchers to clearly explain the nature and  
813 goals of the research and other essential information, in a manner that best  
814 promotes understanding on the part of potential participants.

815 Paragraph (b) requires disclosure of those who support a particular research  
816 project, through funding or sponsorship. It is unethical for researchers to  
817 engage in covert activities for intelligence, police or military purposes under  
818 the guise of research. REBs must disallow any such research.

819 Article 3.1 and paragraph (d) in the Application of Article 3.2 help to ensure  
820 that a prospective participant's choice to participate is voluntary. Pre-  
821 existing entitlements to care, education and other services should not be  
822 prejudiced by the decision of whether to participate. Accordingly, for  
823 example, a physician should ensure that continued clinical care is not linked  
824 to research participation, and teachers should not recruit prospective  
825 participants from their classes, or students under their supervision, without  
826 REB approval. Nothing in this section should be interpreted as meaning that  
827 normal classroom assessments of course work or other comparable  
828 performance evaluation undertakings require REB approval.

829 Paragraph (d) also requires that researchers provide all the new information  
830 pertaining to the risks of the research and any new ethical implications as that  
831 information becomes available, in order to ensure that, throughout the  
832 research, participants have all the information that could affect their consent.  
833 It is equally important that prospective participants be made aware of their  
834 right to withdraw from a research study at any time.

835 Paragraph (e) aims at managing potential or actual conflicts of interest.  
836 Researchers should separate, to the extent possible, their role as researcher  
837 from their roles as therapists, caregivers, teachers, advisors, consultants,

838 supervisors, employers or the like. If a researcher is acting in dual roles, this  
839 fact must always be disclosed to the participant. Conflict of interest matters  
840 are further elaborated in Chapter 7 (“Conflict of Interest”).

841 Paragraph (f) requires that researchers provide a reasonable explanation  
842 of the measures to be undertaken to publish and otherwise disseminate  
843 the results of the research. Beyond the ethical obligation to do so in such  
844 areas as clinical trials (see Articles 11.11 and 11.12 in Chapter 11  
845 [“Clinical Trials”]), this requirement is grounded on the reasonable  
846 expectation of participants in research that the results will be published or  
847 otherwise disseminated in the public domain to advance societal  
848 knowledge.

849 Paragraph (h) acknowledges that some institutions may decide either to  
850 name an ombudsman for research participants, or designate a resource  
851 person to handle queries, receive complaints, and transmit those complaints  
852 to the REB. This is a matter for institutions to determine.

853 Paragraph (j) is intended to inform the prospective participant of  
854 circumstances under which the researcher may end the participant’s  
855 involvement in a research project. While participants need no reason to  
856 justify withdrawing from a research project, researchers must establish the  
857 basis on which they terminate the research or end the participation of a  
858 particular individual. For example, clinical trials have stopping rules –  
859 statistical points determined in advance, which, once reached, dictate that  
860 the trial must be terminated. These are discussed further in Chapter 11  
861 (“Clinical Trials”).

862 Paragraph (k) is intended to prevent the development of a payment structure  
863 for research participation that might place undue pressure on research  
864 participants, either to join or remain within a research project. It also ensures  
865 that participants receive information regarding inducements for those who  
866 recruit participants. It should not be taken to mean that participants should  
867 be paid for their participation in research.

868 The list of information to be disclosed to potential participants is extensive.  
869 Not all of it may be applicable to all forms of research. It is up to the  
870 researcher to explain to the REB why, in a particular project, some of the  
871 listed disclosure requirements do not apply. It is also up to the REB to  
872 consider whether all elements are necessary in a given research project.

### 873 **The Duty To Inform Is Ongoing**

874 **Article 3.3** Free and informed consent must be maintained throughout participation in  
875 the research.

876 **Application** Consent encompasses a process that begins with the initial contact and carries  
877 through to the end of – and sometimes beyond – the involvement of research

878 participants in the project. Throughout the process, researchers have a  
879 continuing duty to provide participants and REBs information relevant to the  
880 participant’s free and informed consent to participate in the research. The  
881 researcher has the obligation to bring to the participant’s attention changes in  
882 circumstances germane to the research or to the particular circumstances of  
883 the participant. The participant is, of course, free to withdraw consent at any  
884 time for any reason. The ongoing obligation to provide new information that  
885 may be relevant to the participant’s consent, however, provides the participant  
886 with the opportunity to reconsider the basis for his or her consent in light of  
887 the new information. As used in this Policy, the process of free and informed  
888 consent refers to the dialogue, information sharing, and general process  
889 through which prospective participants choose to participate in research.

## 890 **Incidental Findings**

891 Incidental findings is a term that describes unanticipated discoveries made in  
892 the course of research (or care). This policy is concerned only with incidental  
893 findings in the context of research. They are findings that may have important  
894 psychological, social, health-related or other implications for the participant,  
895 but they are not the focus of the research itself. For example, a sociologist  
896 doing research on early childhood education may receive information that a  
897 child is suffering abuse, or a health-care worker doing research on one disease  
898 may discover evidence that a participant suffers from an entirely different and  
899 perhaps more serious disease. In a research setting, this raises particular  
900 ethical issues, because the consent process did not anticipate (and perhaps  
901 could not have anticipated) that such information would surface. Incidental  
902 findings frequently arise in the course of genetic research. This is addressed  
903 more specifically in Chapter 13 (“Human Genetic Research”).

904 **Article 3.4** In their research proposal, researchers must:

- 905 (a) Develop a plan for handling incidental findings that their research may  
906 reveal and submit their plan to the research ethics board; and
- 907 (b) Advise potential participants of the plan for handling incidental findings  
908 in order to obtain free and informed consent.

909 **Application** It is not always possible to anticipate with any specificity the nature of the  
910 incidental findings that may surface in the course of research. It is therefore  
911 not possible to inform prospective participants in anything but the most  
912 general terms of what the research may reveal, beyond the realm of the  
913 research question itself.

914 So, for example, social science researchers embarking on questions of a  
915 personal nature should inform prospective participants of the legal obligations  
916 they are under to reveal information concerning certain types of abuse.  
917 Clinical researchers should disclose the possibility that they may come across  
918 evidence of other diagnoses beyond the particular condition they are studying.

919 To the extent that certain types of incidental findings are foreseeable,  
920 however, researchers should consider these possibilities when engaging in the  
921 consent process. The complexity of disclosing serious incidental findings may  
922 be mitigated to some extent by how well researchers have prepared  
923 participants for at least the possibility of discovering such information.

924 Incidental findings should be considered part of the obligation of ongoing  
925 disclosure to participants of information that may be germane to their  
926 continued participation in the research. The withholding or transmission of  
927 such information, particularly when it may have implications for the health or  
928 safety of the participant, may have legal consequences for the researcher.  
929 These are outside the scope of this Policy.

### 930 **Consent Should Precede Research**

931 **Article 3.5** In general, research with human participants should begin only after the  
932 participants or their authorized third-party decision-makers have provided  
933 their free and informed consent.

934 **Application** In keeping with the principle of autonomy, participants should provide their  
935 free and informed consent prior to engaging in research. This is the clearest  
936 demonstration that their participation is based on consideration of the risks  
937 and benefits of the research and other principles in this Policy.

938 This article does not apply to conversations that researchers, particularly  
939 those in the social sciences and humanities, may have with potential  
940 participants as part of the development of the design of their research. These  
941 preliminary conversations –including, for example, negotiations concerning  
942 the terms on which a researcher may engage with a particular community or  
943 group – do not in themselves constitute research and therefore do not require  
944 consent. (See Chapter 2 [“Scope and Approach”], Articles 9.3 to 9.6 in  
945 Chapter 9 [“Research Involving Aboriginal Peoples”] and Article 10.6 in  
946 Chapter 10 [“Qualitative Research”]).

947 There are exceptions to this general ethical requirement, however, set out  
948 below in Articles 3.8 and 3.9.

949 **Article 3.6** Consent is not required from an organization in order to conduct research on  
950 that organization.

951 **Application** Much, but not all, of the research undertaken concerning organizations such  
952 as corporations and governments across Canada is likely conducted with the  
953 explicit or implicit authorization, acquiescence or cooperation of the  
954 organization. Collaboration is often essential to the effective conduct of  
955 research – for example, to facilitate recruitment of participants, to enable  
956 organizations to fulfil their ethical duties, to coordinate logistical and  
957 operational aspects of research, and to respect applicable laws. When

958 individual participants are involved, the ethical principle of respect for  
959 autonomy generally requires their voluntary and informed consent.

960 In other instances, when the goals of the research are to undertake the  
961 form of research known as critical inquiry (which analyzes social  
962 structures or activities, public policies or other social phenomena),  
963 community or organizational authorization may be overridden by the  
964 potential benefits for society to conduct research on organizations such as  
965 corporations or governments. The exception is tailored to the needs of  
966 different kinds of research undertaken by social science or humanities  
967 researchers whose methods may include seeking knowledge that critiques  
968 or challenges the policies and practices of institutions, governments,  
969 interest groups or corporations. If institutional approval were required, it  
970 is unlikely that research could be conducted effectively on such matters  
971 as institutional sexual abuse or a government's silencing of dissident  
972 scientists. Important knowledge and insights from research would be  
973 forgone.

974 Such an exception and its application requires due consideration to context,  
975 as outlined in Chapter 1 ("Ethics Framework"). Since this Policy does not  
976 define "organization," REBs and researchers need to evaluate the goal, kind  
977 and methodology of any research involving particular organizations, groups  
978 or settings. Different considerations may apply to, for example, corporations  
979 or governments, in contrast to community centres, schools, hospitals,  
980 churches or Aboriginal organizations.

981 **Article 3.7** When conducting research on an organization, researchers should inform  
982 potential participants who work within that organization of the extent to  
983 which the organization is or is not collaborating with the research. Risk to  
984 participants from the organization should be evaluated in relation to the  
985 participants' position of power within the organization.

986 **Application** Individuals who are approached to participate in a research project about  
987 their organization must have the opportunity to give free and informed  
988 consent. In particular, they should be fully informed about the views of the  
989 organization's authorities regarding the research, if these are known, and of  
990 the possible consequences of participation. In this context, researchers  
991 should pay special attention to confidentiality, to ensure that they do not  
992 jeopardize the participant's employment or status in the organization.

993 Situations may arise in which an organization, such as a corporation,  
994 government, political party or criminal organization, that has been approached  
995 about a research project, wishes to prevent that research. Researchers engaging  
996 in critical inquiry need to be attentive to risks, both of stigmatization or breach  
997 of privacy, to those who participate in research about their organization. In  
998 particular, potential participants should be fully informed of the possible  
999 consequences of participation.

1000 **B. Departures from General Principles of Consent**

1001 **Article 3.8** The research ethics board (REB) may approve a research proposal and may  
1002 waive the requirement to obtain informed consent, provided that the REB  
1003 finds and documents that:

- 1004 (a) The research involves no more than minimal risk to the participants;  
1005 (b) The waiver is unlikely to adversely affect the well-being and welfare  
1006 of the participants;  
1007 (c) The research could not practicably be carried out without the waiver;  
1008 (d) Whenever possible and appropriate, the participants will be provided  
1009 with additional pertinent information after participation; and  
1010 (e) The waived consent does not involve a therapeutic intervention.

1011 **Application** In some circumstances, the nature of the research may justify a limited or  
1012 temporary departure from the general requirement for free and fully  
1013 informed consent prior to participation in research. It is the responsibility of  
1014 researchers to justify the need for such a departure. It is the responsibility of  
1015 REBs, however, to understand that certain research methodologies  
1016 necessitate a different approach to consent and to exercise judgment on  
1017 whether the need for the research justifies a limited or temporary exception  
1018 to the general requirements in a particular case. (See discussion of different  
1019 approaches to consent in Article 10.1 in Chapter 10 [“Qualitative  
1020 Research”]).

1021 It should be noted that in cases of randomization and blinding in clinical  
1022 trials, neither the research participants nor the researchers know which  
1023 treatment arm the participant will be receiving before the research  
1024 commences. This is not regarded as a waiver or alteration of the  
1025 requirements for consent, however, so long as the research participants or  
1026 their authorized representatives are informed of the probability of being  
1027 randomly assigned to one arm of the study or another.

1028 **Research Involving Partial Disclosure or Deception**

1029 Some social science research, particularly in psychology, seeks to learn about human  
1030 responses to situations that have been created experimentally. Such research can be carried  
1031 out only if the participants do not know in advance the true purpose of the research. In  
1032 some research, therefore, participants may not know that they are part of a research project  
1033 until it is over, or they may be told in advance about the task that they will be asked to  
1034 perform, yet given additional information that provides them with a different perspective  
1035 on some aspect of the task or experiment and/or its purpose. For example, in questionnaire  
1036 research, questions that are central to the researcher’s hypothesis may be embedded within  
1037 distracter questions, decreasing the likelihood that participants will adapt their responses to  
1038 their perceptions of the true objective of the research. Similarly, social science research that  
1039 critically probes the inner workings of publicly accountable institutions might require

1040 limited recourse to partial disclosure or deception in order to be effective. For such  
1041 techniques to fall within the exception to the general requirement of full disclosure for free  
1042 and informed consent, the research must meet the requirements of Article 3.8.

1043 Where partial disclosure or deception has been used, debriefing is an important mechanism  
1044 in maintaining the participant's trust in the research community. The debriefing referred to  
1045 in Article 3.8(d) should be proportionate to the sensitivity of the issue. Often, debriefing can  
1046 be quite simple and straightforward. In sensitive cases, researchers should provide, in  
1047 addition to candid disclosure, a full explanation of why participants were temporarily led to  
1048 believe that the research, or some aspect of it, had a different purpose, or why participants  
1049 received less than full disclosure. The researchers should give details about the importance  
1050 of the research, the necessity of having to resort to partial disclosure or deception, and their  
1051 concern about the welfare of the participants. They should seek to remove any  
1052 misconceptions that may have arisen and to re-establish any trust that might have been lost,  
1053 by explaining why these research procedures were necessary to obtain scientifically valid  
1054 findings.

1055 Immediate, full debriefing of all individuals who have contributed data may not be feasible  
1056 in all cases. In studies with data collection over a longer term, debriefing may have to be  
1057 deferred until the end of the project. In some cases – for example, in research involving  
1058 children – it may be more appropriate to debrief the parents, guardians or authorized third  
1059 parties rather than the participants themselves. In other cases, it may be more appropriate to  
1060 debrief the entire family or community. It may sometimes be appropriate to modify the  
1061 debriefing to be sensitive to the participant's needs and feelings.

1062 In studies in which a waiver of prior informed consent has been allowed, it may still be  
1063 practicable for participants to exercise their consent at the conclusion of the study, following  
1064 debriefing. In cases where a participant expresses concerns about a study, the researcher may  
1065 give the participant the option of removing his or her data from the project. This approach  
1066 should be used only when the elimination of the participant's data will not compromise the  
1067 validity of the research design.

1068 Researchers should be required, as part of their research proposal, to set out the conditions  
1069 under which they would not be able to remove a participant's data from the study even if  
1070 the participant requested such a withdrawal. Once the deception is revealed, participants  
1071 should be given a contact on the REB if they have any concerns about the conduct of the  
1072 research.

### 1073 **Consent in Individual Medical Emergencies**

1074 This section addresses the exception to free and informed consent in situations where an  
1075 individual who requires urgent medical care is unable to provide consent, and the delay  
1076 to obtain authorized third-party consent could seriously compromise that individual's  
1077 health. Certain types of medical emergency practices can be evaluated only when they  
1078 occur, hence the need for this exception.

1079 This section is to be distinguished, however, from situations where there is a publicly  
1080 declared emergency (such as the SARS crisis or a major flood) that disrupts the ordinary

1081 system for obtaining REB approval for research. The process for research ethics review  
1082 during a publicly declared emergency is addressed in Articles 6.21 – 6.23 in Chapter 6  
1083 (“Governance of Research Ethics Review”).

1084 **Article 3.9** Subject to all applicable legislative and regulatory requirements, research  
1085 involving medical emergencies shall be conducted only if it addresses the  
1086 emergency needs of individuals involved, and then only in accordance with  
1087 criteria established in advance of such research by the research ethics board  
1088 (REB). The REB may allow research that involves medical emergencies to  
1089 be carried out without the free and informed consent of the participant or of  
1090 his or her authorized third party if *all* of the following apply:

- 1091 (a) A serious threat to the prospective participant requires immediate  
1092 intervention;
- 1093 (b) Either no standard efficacious care exists or the research offers a real  
1094 possibility of direct benefit to the participant in comparison with  
1095 standard care;
- 1096 (c) Either the risk of harm is not greater than that involved in standard  
1097 efficacious care, or it is clearly justified by the direct benefits to the  
1098 participant;
- 1099 (d) The prospective participant is unconscious or lacks capacity to  
1100 understand risks, methods and purposes of the research;
- 1101 (e) Third-party authorization cannot be secured in sufficient time, despite  
1102 diligent and documented efforts to do so; and
- 1103 (f) No relevant prior directive by the participant is known to exist.

1104 When a previously incapacitated participant regains capacity, or when an  
1105 authorized third party is found, free and informed consent shall be sought  
1106 promptly for continuation in the project and for subsequent examinations  
1107 or tests related to the study.

1108 **Application** For purposes of studying potential improvement in the treatment of life-  
1109 threatening conditions, Article 3.9 outlines an exception, in addition to that  
1110 in Article 3.8, to the general obligation of obtaining free and informed  
1111 consent from those participating in research.

1112 The exception is intended for a limited class of health research: that which  
1113 takes place in emergency situations where obtaining free and informed  
1114 consent from the participants is not possible due to loss of consciousness or  
1115 capacity, and where free and informed consent from an authorized third  
1116 party is not possible due to the urgent time constraints for effective  
1117 intervention. Seeking consent in advance is often impossible due to the  
1118 unforeseeable nature of the causes of the medical emergency. However,



1119 individuals and those in comparable future situations should not be denied  
1120 potential benefits of research because of the inability to consent.

1121 It is the responsibility of researchers to justify to the REB the need for  
1122 recourse to this exception. The underlying assumption of Article 3.9 is that  
1123 direct research benefits to the participant could not be secured without  
1124 forgoing the free and informed consent of the participant or of his or her  
1125 authorized third party. Article 3.9 indicates that research in emergency  
1126 medicine must be reviewed by the REB, be restricted to the emergency  
1127 needs of the participants, and be conducted under criteria designated by the  
1128 REB. Article 3.9 outlines the minimal conditions necessary for the REB to  
1129 authorize research without free and informed consent in individual medical  
1130 emergencies.

1131 It is unethical to expose participants to any additional risk of harm without  
1132 their free and informed consent if standard efficacious care exists, unless it  
1133 can clearly be shown that there is a realistic possibility of significantly  
1134 improving the participant's condition. Accordingly, paragraphs (b) and (c) of  
1135 Article 3.9 indicate that researchers and REBs must assess the potential risk of  
1136 harms and benefits of proposed research against existing standard efficacious  
1137 care.

1138 To respect the autonomy of the research participant, Article 3.9(e) requires  
1139 researchers to undertake diligent efforts to contact family members or  
1140 authorized third parties, if reasonably feasible, and to document such efforts  
1141 for the benefit of both the participant and for the monitoring or continuing  
1142 review functions of the REB. The article also requires that research  
1143 participants who regain capacity be promptly afforded the opportunity to give  
1144 free and informed consent concerning continued participation. Concern for the  
1145 patient's well-being is paramount and should be informed by ethical and  
1146 professional judgment.

1147 Because their incapacity to exercise free and informed consent makes them  
1148 vulnerable, prospective participants for emergency research are owed special  
1149 ethical obligations and protection commensurate with the harms involved.  
1150 Their interests, rights and welfare should be protected by additional  
1151 safeguards, where feasible and appropriate. These might include additional  
1152 scientific, medical or REB consultation; procedures to identify potential  
1153 participants in advance to obtain free and informed consent prior to the  
1154 occurrence of the emergency situation; consultation with former and potential  
1155 participants; and special monitoring procedures to be followed by data safety  
1156 and monitoring boards.

### 1157 **C. Capacity**

1158 Capacity refers to the ability of prospective participants to understand relevant information  
1159 presented and to appreciate the potential consequences of any given decision. This ability

1160 may vary according to the complexity of the choice being made, the circumstances  
1161 surrounding the decision, or the time in question. The capacity to participate in research,  
1162 then, may change over time, and depending on the nature of the decision the potential  
1163 participant needs to make. Assessing capacity is a question of determining, at a particular  
1164 point in time, whether a potential research participant meets the bar for understanding the  
1165 nature and consequences, risks and potential benefits, of a particular research project.

1166 One may therefore have diminished capacity and still be able to decide whether to  
1167 participate in certain types of research.

1168 Legislation with respect to capacity varies between jurisdictions. Researchers should be  
1169 aware of all applicable legislative requirements.

1170 In keeping with the principle of equal moral status, ethical considerations around research  
1171 involving those who lack the capacity to give free and informed consent on their own  
1172 behalf must seek to balance the vulnerability that arises from their lack of capacity with the  
1173 injustice that would arise from their exclusion from the benefits of research. (See  
1174 Chapter 4 [“Inclusion in Research”], which addresses these issues in more detail.)

1175 As indicated in Chapter 1 (“Ethics Framework”), respect for human dignity entails high  
1176 ethical obligations to vulnerable individuals. Such obligations often translate into special  
1177 procedures to promote and protect their interests. The articles that follow detail the special  
1178 procedures for research involving individuals who lack the capacity to participate in  
1179 particular research projects.

1180 **Article 3.10** For research involving individuals who lack the capacity, either permanently  
1181 or temporarily, to decide for themselves whether to participate, the research  
1182 ethics board shall ensure that, as a minimum, the following conditions are  
1183 met:

- 1184 (a) The researcher should seek free and informed consent from the  
1185 authorized third party and shall show how that consent will be sought  
1186 from the authorized third party, as well as how the participants’ well-  
1187 being and welfare will be protected;
- 1188 (b) The authorized third party should not be the researcher or any other  
1189 member of the research team;
- 1190 (c) The ongoing consent of an authorized third party will be required  
1191 throughout the participation in research of an individual who lacks  
1192 capacity to consent on his or her own behalf; and
- 1193 (d) When a participant who was entered into a research project through  
1194 third-party authorization acquires or regains capacity during the course  
1195 of the research, his or her informed consent shall be sought as a  
1196 condition of continuing participation.

1197 **Application** Article 3.10 provides a means of protecting the interests and dignity of  
1198 participants who lack adequate capacity, either permanently or temporarily,

1199 by having authorized third parties make the decision about participation on  
1200 their behalf. The decision of the third parties should be based on their  
1201 knowledge of the potential participants and on a consideration of the potential  
1202 participants' welfare. The third parties should not be in a position of conflict  
1203 of interest when making their decision.

1204 Article 3.10 outlines other safeguards to protect the dignity, interests and  
1205 integrity of those who lack the capacity to give their free and informed  
1206 consent to participation in research. The article details various considerations  
1207 relevant to the use of third-party authorization. Beyond the legal requirements  
1208 for obtaining free and informed consent from authorized third parties, family  
1209 members and friends may provide information about the interests and  
1210 previous wishes of prospective participants.

1211 **Article 3.11** Where free and informed consent has been obtained from an authorized  
1212 third party, and in those circumstances where a legally incompetent  
1213 individual understands the nature and consequences of the research, the  
1214 researcher shall seek to ascertain the wishes of the individual concerning  
1215 participation. The potential participant's dissent will preclude his or her  
1216 participation.

1217 **Application** Many individuals who are legally incompetent may still be able to express  
1218 their wishes in a meaningful way, even if such expression may not fulfil the  
1219 requirements for free and informed consent. Prospective participants may thus  
1220 be capable of verbally or physically assenting to, or dissenting from,  
1221 participation in research. Those who may be capable of assent or dissent  
1222 include (a) those whose capacity is in the process of development, such as  
1223 children whose capacity for judgment and self-direction is maturing; (b) those  
1224 who once were capable of making an informed decision about informed  
1225 consent, but whose capacity is now considerably, but not completely,  
1226 diminished, such as individuals with early Alzheimer's disease; and (c)  
1227 those whose capacity remains only partially developed, such as those  
1228 suffering from permanent cognitive impairment. While their assent would  
1229 not be sufficient to permit them to participate in the absence of consent by  
1230 an authorized third party, their expression of dissent must be respected.

### 1231 **Consent should be documented**

1232 **Article 3.12** Evidence of free and informed consent may be contained either in a signed  
1233 consent form or in documentation by the researcher of other means of  
1234 consent. Consent may also be demonstrated solely by the actions of the  
1235 participant – for example, through the return of a completed questionnaire.

1236 **Application** While it is not necessary for consent itself to be in writing, there should be  
1237 some written evidence of the process adopted to obtain free and informed  
1238 consent and that demonstrates that consent has been obtained. Such  
1239 documentation serves a number of purposes. For the participant, it is  
1240 evidence of the fact that he or she has agreed to participate in a particular  
1241 research project. Whether or not a consent form is signed, a written

1242 statement of the information conveyed in the consent process, signed or not,  
1243 should be left with the participant. It may serve as a reminder to the  
1244 participant of the terms of the research. It may also facilitate the ability of  
1245 the participant to consider and re-consider his or her involvement as the  
1246 research proceeds.

1247 For the researcher, it is evidence that he or she has satisfied the ethical  
1248 obligation of obtaining the free and informed consent of the participant prior  
1249 to involving that individual in a given research project. In cases where the  
1250 consent is inferred from the professional responsibilities of the research  
1251 participant, it is not necessary to provide a written confirmation of this to the  
1252 research participant. In some cases it may not be appropriate to leave a  
1253 written statement, such as in cultural settings where such written  
1254 documentation is contrary to prevailing norms.

1255 For the research sponsor, for the REB and for the institution, such evidence  
1256 demonstrates that the consent obligations have been fulfilled, at least at the  
1257 outset.

1258 Written consent through a signed statement from the participant is a  
1259 common means of demonstrating consent. However, for some groups or  
1260 individuals, a verbal agreement, perhaps with a handshake, is evidence of  
1261 trust, and a request for a signature may imply distrust. In some types of  
1262 research, oral consent may be preferable. In others, written consent is  
1263 mandatory. Where oral consent is appropriate, the researcher may wish to  
1264 make a contemporaneous journal entry of the event and circumstances.  
1265 These and like elements may sometimes need to be refined in concert with  
1266 the REB, which plays an essential educational and consultative role in the  
1267 process of seeking free and informed consent.

1268 The consent process must reflect trust between the research participants and  
1269 the researcher. Often this is based on mutual understanding of the project's  
1270 intentions. In qualitative research, the nature of the methodology may lead  
1271 the research participant to sense attempts to legalize or formalize the process  
1272 as a violation of trust. Hence, written consent is not the norm in qualitative  
1273 research. Rather, qualitative researchers use a range of consent procedures,  
1274 including oral consent, field notes, and other strategies, for documenting the  
1275 consent process. In qualitative research conducted with research participants  
1276 in positions of authority, trust may be based upon that participant's  
1277 confidence in his or her ability to take care of himself or herself or to deter  
1278 undesirable behaviour on the part of the researcher by denying access to  
1279 social or professional networks, through the threat of litigation or by other  
1280 means.

1281 When in doubt about an issue involving free and informed consent,  
1282 researchers should consult their REB.

# Chapter 4

## INCLUSION IN RESEARCH

### A. Introduction

An important aspect of the principle of equal moral status is the fair distribution of benefits and burdens in research. Benefits of research participation may be direct, where, for example, an individual participant experiences amelioration of a health condition because of an experimental therapy or learns new information about social issues by participating in a research focus group. Benefits may be indirect, where an individual's research participation contributes to advancement in knowledge that may lead to improved conditions for a group to which the participant belongs or to society in general.

Historically, concern for justice in research involving human participants focused on whether research participants were treated fairly: were they overburdened relative to the direct benefits they received from their participation in research? Contemporary concerns with justice in research have broadened: are the overall benefits and burdens of research distributed fairly, and have disadvantaged individuals and groups received a fair share of the benefits of research?

The above two concerns flow from the principle of equal moral status, which holds that particular individuals or groups in society should neither bear an unfair share of the direct burdens of participating in research, nor should they be unfairly excluded from the potential benefits of research participation. Inclusiveness in research and fair distribution of benefits and burdens should be of concern to researchers, research ethics boards (REBs), research institutions and sponsors.

Overprotectionist attitudes or practices of researchers or REBs that intentionally exclude some members of society from participating in research may, in fact, fail to respect the equal moral status of those individuals and deprive them of the potential benefits of research. For example, age has been used to exclude individuals from participation in research, particularly health research. The result of such exclusion is that insufficient research has been done involving the young and the elderly.

Whether intentional or inadvertent, the exclusion of some from the potential benefits of research violates the principle of equal moral status of all humans. Researchers, institutions and REBs all have important roles to play in advancing that societal commitment and ensuring a fair distribution of the benefits and burdens of research. Research should navigate somewhere between the dangers of exploitation and the dangers of overprotection of research participants.

## 1317 **B. General Inclusivity of Research**

1318 **Article 4.1** Researchers must not exclude individuals from participation in research  
1319 on the basis of attributes such as culture, religion, race, disability, sexual  
1320 orientation, ethnicity, sex or age unless there is a valid reason for the  
1321 exclusion.

1322 **Application** Article 4.1 is based on the principles of equal moral status and just  
1323 distribution of benefits of research participation across all groups in society.  
1324 It imposes a duty on researchers not to discriminate against individuals or  
1325 groups for reasons that are unrelated to the research inquiry. Groups have  
1326 been disadvantaged in the context of research on the basis of characteristics  
1327 such as sex, colour, ethnicity, age and disability. Among those who have  
1328 been disadvantaged in the context of research, women warrant special  
1329 consideration, as elaborated on in Article 4.3.

1330 Article 4.1 is not intended to preclude research focused on a single living  
1331 individual (such as in a biography) or on a group of individuals who share a  
1332 specific characteristic (as in a study of an identifiable group of painters who  
1333 happen to be all of one sex, race or religion, or of a religious order that is  
1334 restricted to one sex).

1335 Researchers who plan to actively exclude particular groups from research  
1336 must explain the exclusion to the REB. The REB will assess the validity  
1337 and reasonableness of the exclusion, based on the nature of the research  
1338 inquiry, the context in which the research is conducted, and other  
1339 objective grounds for the inclusion and exclusion criteria.

1340  
1341 **Article 4.2** Individuals who are not proficient in the language used by the researchers  
1342 should not be automatically excluded from the opportunity to participate in  
1343 research.

1344 **Application** The exclusion of potential research participants on the basis of language  
1345 proficiency may undermine the objective of Article 4.1 to avoid exclusions  
1346 based on culture, race or ethnicity. With appropriate measures to ensure  
1347 effective communication between potential participants and researchers,  
1348 language proficiency should not bar inclusion in research. Where a  
1349 language barrier exists, various measures may be used to ensure effective  
1350 communication between potential participants and researchers in  
1351 recruitment and informed consent discussions. For example, an  
1352 intermediary who is not part of the research study or team, but who is  
1353 competent in the language used by the researchers as well as that chosen by  
1354 the research participant may assist with communication between potential  
1355 participants and researchers. The intermediary's activities will depend on  
1356 the nature and risks of the research. For example, where risks are minimal  
1357 and researchers intend to seek oral consent from participants, an  
1358 intermediary may help facilitate oral communication. In other situations

1359 involving written consent materials, the intermediary may translate or  
1360 approve an existing translation of consent documents and any other  
1361 information relevant to participation in the study. The intermediary should  
1362 not be in a role or relationship that may influence the potential participant's  
1363 free and informed consent.

### 1364 **C. Research Involving Women**

1365 Women have historically been inappropriately excluded from participating in some  
1366 research. Exclusion of women, where unwarranted, delays advancement of knowledge,  
1367 denies potential benefits to women, and may expose them to harm if research findings  
1368 from male-only studies are generalized inappropriately to women. The inclusion of  
1369 women in research advances the commitment to equal moral status, improves the  
1370 generalizability of research results where that is a goal of the research, and is essential to  
1371 ensure that women and men benefit equally from research.

1372 **Article 4.3** Women must not be automatically excluded from research solely on the  
1373 basis of sex or reproductive capacity.

1374 **Application** Like Article 4.1, Article 4.3 imposes obligations on REBs and  
1375 researchers to ensure equitable treatment of potential participants. While  
1376 some research is properly focused on particular research populations that  
1377 do not include women or include very few women, women should be  
1378 represented in most studies.

1379 Article 4.3 rejects discriminatory and unethical use of inclusion or exclusion  
1380 criteria that presumptively or automatically exclude women because of their  
1381 sex or reproductive capacity. In considering research on pregnant or  
1382 breastfeeding women, researchers and REBs must, however, take into  
1383 account potential harms and benefits for the woman and her embryo, fetus  
1384 or infant.

### 1385 **D. Research Involving Vulnerable Persons or Groups**

1386 Respect for equal moral status and welfare entails special ethical obligations toward  
1387 individuals or groups who may be vulnerable in the context of research, such as children  
1388 and individuals who are institutionalized, or those in dependent situations or other  
1389 situations that may compromise voluntariness of consent. Researchers and REBs should  
1390 be mindful of the fact that poverty may also impede an autonomous choice to participate  
1391 in research.

1392 **Article 4.4** Vulnerable individuals or groups must not be automatically excluded from  
1393 research that may benefit them or a group to which they belong.

1394 **Application** Characteristics that may make an individual or group vulnerable in the  
1395 context of research may vary over time and with changing circumstances.  
1396 Also, individuals should not automatically be considered vulnerable

1397 because of a group with which they may be identified. Researchers and  
1398 REBs should recognize and address changes in a participant’s  
1399 circumstances that may create, heighten or attenuate vulnerability and  
1400 provide special protections for those who are vulnerable to abuse,  
1401 exploitation or discrimination. Researchers and REBs should also be  
1402 aware of applicable laws, regulations and other requirements that  
1403 establish rules regarding participation of vulnerable individuals in  
1404 research.

1405 Children may be particularly vulnerable as research participants because  
1406 of their developmental status. Researchers and REBs must consider a  
1407 child’s stage of physical, physiological, psychological and social  
1408 development to ensure adequate protections for a child’s welfare.  
1409 Physical or psychological harms a child experiences in a research setting  
1410 may have long-lasting effects. In addition to vulnerability that arises from  
1411 their developmental status, children may also lack capacity to give  
1412 consent to participate in research.

1413 Similarly, adults who are institutionalized may be vulnerable because  
1414 they live under the care of others, but they may also lack capacity to  
1415 consent due to cognitive disability or other impairment. The following  
1416 section provides further guidance on the ethical conduct of research with  
1417 participants who cannot give consent for themselves.

## 1418 **E. Research Involving Those Who Lack Capacity to** 1419 **Consent for Themselves**

1420 Respect for equal moral status and concern for welfare entails special ethical obligations  
1421 toward individuals who do not have capacity to give free and informed consent for research  
1422 participation. Individuals who do not have capacity to give consent to participate in  
1423 research should not be automatically excluded from research. Based on the core principle  
1424 of concern for welfare, however, this section sets out conditions that apply to research  
1425 involving those who cannot give consent for themselves. This section should be read in  
1426 conjunction with Section C (“Capacity”) of Chapter 3 (“Free and Informed Consent”).

1427 **Article 4.5** Where a researcher seeks to involve individuals in research who do not  
1428 have capacity to give free and informed consent, the researcher must  
1429 satisfy the research ethics board that:

1430 (a) The research question can be addressed only with the participation of  
1431 individuals who do not have capacity to consent; and

1432 (a) If the research involves more than minimal risk, it has the potential to  
1433 provide direct benefits for participants or a group to which they belong.

1434 **Application** This Policy recognizes the need to include individuals or groups in  
1435 research who have historically been excluded, including those who lack



1436 capacity to give consent for themselves. For example, young children and  
1437 individuals with cognitive or intellectual disabilities may lack capacity to  
1438 give consent to participate in particular research initiatives. Yet the  
1439 advancement of knowledge about their social, psychological and health  
1440 experiences and needs may depend on their participation in research.

1441 Article 4.5 and Article 3.10 in Chapter 3 (“Free and Informed Consent”)  
1442 establish conditions regarding research that involves individuals who lack  
1443 capacity to give consent. Researchers and REBs must consider the degree  
1444 of risk to which participants are exposed and the potential of direct  
1445 benefits to the participant or a group to which they belong.

1446 Note: The World Medical Association Declaration Of Helsinki: Ethical Principles For  
1447 Medical Research Involving Human Subjects (October 2008), s. 27, states, with respect  
1448 to research involving those who lack capacity, that “these individuals must not be  
1449 included in a research study that has no likelihood of benefit for them unless it is  
1450 intended to promote the health of the population represented by the potential subject, the  
1451 research cannot instead be performed with competent individuals, and entails only  
1452 minimal risk and minimal burden.” The Panel presents this statement here as a point of  
1453 comparison in the discussion of proposed Article 4.5.



# Chapter 5

1454

1455

## PRIVACY AND CONFIDENTIALITY

1456 There is widespread agreement about the rights of research participants to privacy and  
1457 the corresponding duties of researchers to treat personal information in a confidential  
1458 manner. Indeed, the respect for privacy in research is an internationally recognized norm  
1459 and ethical standard. Privacy rights are protected in the Canadian Constitution,<sup>1</sup> our  
1460 country's most fundamental statement of rights and freedoms, and they are also  
1461 protected in federal and provincial/territorial statutes. Model voluntary codes<sup>2</sup> have also  
1462 been adopted to govern access to, and the protection of, personal information. Some  
1463 professional organizations have also established privacy codes that establish the rights  
1464 and obligations of their members regarding collection, use and disclosure of personal  
1465 information.

1466 This Policy is based on a proportionate approach to ethical assessment of research,  
1467 where more stringent review and protections are applied to research that poses greater  
1468 risks to participants. Privacy risks in research relate to the identifiability of participants  
1469 and the potential harms they may experience from collection, use and disclosure of  
1470 personal information. Privacy risks arise at all stages of the research life cycle, including  
1471 initial collection of information, use and analysis to address research questions,  
1472 dissemination of research results, retention of information, and disposal of research  
1473 records or devices on which information is stored. Researchers and research ethics  
1474 boards (REBs) should identify and mitigate privacy risks, keeping in mind that a matter  
1475 that is not considered sensitive or embarrassing in the researcher's culture may be so in a  
1476 prospective participant's culture.

### 1477 **A. Key Definitions and Principles**

#### 1478 **Privacy**

1479 Privacy refers to an individual's right to be free from intrusion or interference by others.  
1480 It is a fundamental right in a free and democratic society. Individuals have privacy  
1481 interests in relation to their bodies, personal information, thoughts and opinions,  
1482 personal communications with others, and spaces they occupy. Research affects these  
1483 various domains of privacy in different ways, depending on its objectives and methods.  
1484 An important aspect of privacy is the right to control information about oneself. The  
1485 concept of consent is related to the right to privacy. Privacy is respected if an individual  
1486 has an opportunity to exercise control over personal information by consenting to, or  
1487 withholding consent for, collection, use and/or disclosure of information. (For further  
1488 discussion of consent, see Chapter 3 ["Free and Informed Consent"].)

1489 **Confidentiality**

1490 The duty of confidentiality refers to the obligation of an individual or organization to  
1491 safeguard information entrusted to it by another. The duty of confidentiality includes  
1492 obligations to protect information from unauthorized access, use, disclosure,  
1493 modification, loss or theft. Fulfilling the duty of confidentiality is essential to the trust  
1494 relationship between researcher and research participant, and to the integrity of the  
1495 research enterprise.

1496 **Security**

1497 Security refers to measures used to protect information. It includes physical,  
1498 administrative and technical safeguards. An individual or organization fulfils its  
1499 confidentiality duties, in part, by adopting and enforcing appropriate security measures.  
1500 Physical safeguards include use of locked filing cabinets and location of computers  
1501 containing research data away from public areas. Administrative safeguards include  
1502 development and enforcement of organizational rules about who has access to personal  
1503 information about research participants. Technical safeguards include use of computer  
1504 password, firewall, anti-virus, encryption and other measures that protect data from  
1505 unauthorized access, loss or modification.

1506 **Types of Information**

1507 Researchers collect, use, share and seek access to different types of information about  
1508 research participants. Privacy concerns are strongest in regard to information that  
1509 identifies a specific research participant, and they attenuate as it becomes more difficult  
1510 or impossible to associate information with a particular participant. Privacy concerns  
1511 also vary with the sensitivity of the information and the extent to which access, use or  
1512 disclosure may harm an individual by exposing them to embarrassment, stigma,  
1513 discrimination or other detriments.

1514 Information may be categorized as follows:

- 1515 • Identifying information: The information identifies a specific research participant  
1516 through direct identifiers (e.g., name, address, social insurance number or  
1517 personal health number).
- 1518 • Identifiable information: The information could be used to re-identify a  
1519 participant through a combination of indirect identifiers (e.g., date of birth, place  
1520 of residence or unique personal characteristic) using reasonably foreseeable  
1521 means.
- 1522 • De-identified/coded information: Identifiers are removed and replaced with a  
1523 code. Depending on access to the code, it may be possible to re-identify specific  
1524 research participants (e.g., participants are assigned a code name and the  
1525 principal investigator retains a list that links the code name with the participant's

1526 actual name so data can be re-linked if necessary.) Researchers who have access  
1527 to the code and the data have identifiable information.

1528 • Anonymized information: Information is irrevocably stripped of identifiers, and  
1529 a code is not kept to allow future re-linkage.

1530 • Anonymous information: Information never had identifiers associated with it  
1531 (e.g., anonymous surveys).

1532 In this Policy, the term “personal information” refers to identifying and identifiable  
1533 information about an individual. This includes identifiable information about personal  
1534 characteristics such as age, culture, educational background, employment history, health  
1535 care, life experiences, religion, social status and other matters where an individual has a  
1536 reasonable expectation of privacy. In assessing privacy risks, researchers and REBs  
1537 should also consider the possibility that, despite the removal of personal identifiers, a  
1538 small or unique group (such as a group with a rare condition or an Aboriginal  
1539 community) may be identified. Individuals within that group may experience stigma,  
1540 embarrassment or other harm resulting from being identified individually or being  
1541 associated with the group. If researchers are uncertain if the information to which they  
1542 seek access constitutes personal information under this Policy, they should consult their  
1543 REB.

1544 Collection and use of anonymous data in research is the easiest way to protect  
1545 participants, although this is not always possible or desirable. A “next-best” alternative  
1546 is to anonymize the data at the earliest opportunity. While anonymization often protects  
1547 participants from identification, the ability to link anonymized datasets with other  
1548 information sources may lead to re-identification of individuals. Growing technological  
1549 capacities facilitate re-identification, as is discussed in Section E (“Data Linkage”).  
1550 Failing the feasibility of using anonymous or anonymized data for research – and there  
1551 are many reasons why data may need to be gathered and retained in an identifiable form  
1552 – the duty of confidentiality becomes paramount.

## 1553 **B. The Duty of Confidentiality**

1554 **Article 5.1** Researchers must maintain confidentiality of personal information about  
1555 research participants, subject to any legal and ethical duties to disclose  
1556 confidential information.

1557 **Application** When researchers obtain personal information with a promise of  
1558 confidentiality, following through with that promise is integral to respect for  
1559 research participants and the integrity of the research enterprise. Breaches of  
1560 confidentiality may cause harm to the trust relationship between the  
1561 researcher and the research participant, to other individuals or groups, and/or  
1562 to the reputation of the research community.

1563 The duty of confidentiality applies to information obtained directly from  
1564 participants or from other researchers or organizations that have legal,  
1565 professional or other obligations to maintain the confidentiality of personal

1566 records.

1567 A researcher's duty of confidentiality is not absolute. In certain exceptional  
1568 and compelling circumstances, researchers may have legal and ethical  
1569 obligations to disclose information revealed to them in confidence, such as  
1570 reporting information to authorities to protect the health, life or safety of a  
1571 research participant or third party. Researchers should be aware of laws  
1572 (such as laws that require reporting of children in need of protection) or  
1573 ethical codes (such as professional codes of conduct) that may require  
1574 disclosure of information they obtain in a research context.

1575 Researchers who believe they may have a legal or ethical duty to disclose  
1576 information obtained in a research context should consult with colleagues,  
1577 any relevant professional body, the REB and/or legal counsel regarding  
1578 an appropriate course of action.

1579 **Article 5.2** Researchers must describe measures for meeting confidentiality obligations  
1580 and explain any limits on confidentiality:

1581 (a) In application materials they submit to the research ethics board; and  
1582 (b) During informed consent discussions with potential research  
1583 participants.

1584 **Application** Researchers should inform potential research participants of these legal  
1585 and/or ethical disclosure duties at the time of obtaining consent so the  
1586 participants understand the limits of the confidentiality promise.

1587 Researchers should also inform participants if personal information may be  
1588 provided to government departments or agencies, personnel from an agency  
1589 that monitors the research, a research sponsor (such as a pharmaceutical  
1590 company), the REB or a regulatory agency.

1591 In rare cases, a third party may seek access to information obtained and/or  
1592 created in a research context. An access request may seek voluntary  
1593 disclosure of information or may seek to compel disclosure through force  
1594 of law (such as seeking a subpoena). Researchers must make reasonable  
1595 efforts to maintain their promise of confidentiality to research participants  
1596 within the extent permitted by law and ethical principles. This may  
1597 involve resisting requests for access, such as opposing court applications  
1598 seeking disclosure.

1599 When designing their research, researchers should incorporate any  
1600 applicable statute-based or other legal principles that may afford  
1601 protection for the privacy of participants and confidentiality of research  
1602 information.

1603 **C. Safeguarding Information**

1604 **Article 5.3** Researchers should assess privacy risks and threats to the security of  
1605 information for all stages of the research life cycle and implement  
1606 appropriate measures to protect information. Researchers must provide  
1607 details to the research ethics board regarding their proposed measures for  
1608 safeguarding information, for the full life cycle of information – that is, its  
1609 collection, use, dissemination, retention and disposal.

1610 **Application** Safeguarding information helps respect the privacy of research  
1611 participants and helps researchers fulfil their confidentiality obligations.  
1612 In adopting measures to safeguard information, researchers should follow  
1613 disciplinary standards and practices for the collection and protection of  
1614 information for research purposes. Formal privacy impact assessments are  
1615 required in some institutions and under legislation or policy in some  
1616 jurisdictions. Security measures should take into account the nature and  
1617 type of data (e.g., paper records or electronic data stored on a mobile  
1618 device; whether information contains direct or indirect identifiers).  
1619 Principles for safeguarding information apply both to original documents  
1620 and copies of information.

1621 Factors relevant to the REB’s assessment of the adequacy of the researchers’  
1622 proposed measures for safeguarding information include:

- 1623 (a) The type of information to be collected;
- 1624 (b) The purpose for which the information will be used;
- 1625 (c) Limits on the use, disclosure and retention of the information;
- 1626 (d) Appropriate security safeguards for the full life cycle of information;
- 1627 (e) Any modes of observation (e.g., photographs or videos) or access to  
1628 information (e.g., sound recordings) in the research that may allow  
1629 identification of particular participants;
- 1630 (f) Any intended uses of personal information from the research; and
- 1631 (g) Any anticipated linkage of data gathered in the research with other  
1632 data about participants, whether those data are contained in public or  
1633 personal records. (See also Section E [“Data Linkage”].)

1634 In considering the adequacy of proposed data protection measures for the  
1635 full life cycle of information, REBs should not automatically impose a  
1636 requirement that researchers destroy the research data. Data retention  
1637 periods vary depending on the research discipline, research purpose and  
1638 kind of data involved. Data destruction is not a typical part of the  
1639 qualitative research process; in some situations formal data sharing with  
1640 participants may occur – for example, by giving individual participants  
1641 copies of a recording or transcript as a gift for personal, family or other

1642 archival use. Similarly, some funding bodies, such as the Social Sciences  
1643 and Humanities Research Council and the Canadian Institutes of Health  
1644 Research, have specific policies on data archiving and sharing.<sup>3</sup>

1645 In disseminating research results, researchers should not disclose direct  
1646 identifiers without the consent of research participants. Researchers  
1647 should take reasonable measures to ensure against inadvertent  
1648 identification of individuals or groups in publications or other means of  
1649 dissemination, and they must address this issue to the satisfaction of the  
1650 REB.

1651 In some instances, participants may wish to be identified for their  
1652 contributions to the research. Where possible, researchers should  
1653 negotiate agreement with participants about if and how participants may  
1654 be identified to recognize their contribution. Negotiation may help resolve  
1655 any disagreement on this issue between individual participants and groups  
1656 of which they are a member (where, for example, an individual wants to  
1657 be recognized, but the broader group or community expresses objection).  
1658 Researchers and REBs should also pay heed to disciplinary standards  
1659 regarding identification and acknowledgment of research participants.

1660 In disseminating results, researchers should avoid being put in a position of  
1661 becoming informants for authorities or leaders of organizations. For  
1662 example, when records of prisoners, employees, students or others are used  
1663 for research purposes, the researcher should not provide authorities with  
1664 results that could identify individuals, unless the prior written consent of the  
1665 participants is obtained. Researchers may, however, provide administrative  
1666 bodies with aggregated data that cannot be linked to individuals, for  
1667 purposes such as policy-making or program evaluation. To obtain informed  
1668 consent, researchers should advise potential participants if aggregated data  
1669 from a study may be disclosed, particularly where such disclosure may pose  
1670 risk of harm to the participants. For example, aggregate data provided to  
1671 authorities about illicit drug use in a penitentiary may pose harms to the  
1672 prisoners, even though they are not identified individually.

1673 Consideration of future uses of personal information refers not just to  
1674 research, but also to other purposes, such as the future use of research videos  
1675 for educational purposes. It is essential that proposed future uses of  
1676 information be specified in sufficient detail that prospective participants  
1677 may give free and informed consent. In most cases, it is inappropriate to  
1678 seek prospective permission for unspecified future uses of personal  
1679 information at the same time consent is being sought for participation in a  
1680 specific study. (Refer to Chapter 12 [“Human Tissue”] for guidance on  
1681 establishment of large-scale biobanking projects where participants may  
1682 have an option of agreeing to broader categories of future uses.) Secondary  
1683 use of personal information is discussed further in the next section of this  
1684 chapter, and Chapter 3 (“Free and Informed Consent”) addresses free and



1685 informed consent in detail.

1686 Internet research may raise special privacy, confidentiality and security  
1687 issues that researchers and REBs need to take into account. Research data  
1688 sent over the Internet may require encryption or use of special  
1689 denominalization software to prevent interception by unauthorized  
1690 persons or other risks to data security. In general, identifying data  
1691 obtained through research that is kept on a computer and connected to the  
1692 Internet should be encrypted.

1693 **Article 5.4** Institutions or organizations where research data are held have a  
1694 responsibility to establish appropriate institutional security safeguards.

1695 **Application** In addition to the security measures researchers implement to protect data,  
1696 safeguards put in place at the institutional or organizational level also  
1697 provide important protection. Such data security safeguards should  
1698 include physical, administrative and technical measures.

1699 **D. Secondary Use of Personal Information for**  
1700 **Research Purposes**

1701 Secondary use refers to the use in research of personal information originally collected for a  
1702 purpose other than the current research purpose. Common examples are social science or  
1703 public health survey datasets that are collected for specific research or statistical purposes,  
1704 but then re-used to answer other research questions. Other examples are health-care or  
1705 school records or biological specimens, originally created or collected for therapeutic or  
1706 educational purposes, but later sought for use in research. Chapter 12 (“Human Tissue”)  
1707 provides further guidance on research involving secondary use of previously collected human  
1708 tissue.

1709 Secondary use avoids duplication in primary collection and therefore reduces burdens and  
1710 costs for participants and researchers. Privacy concerns arise, however, when information can  
1711 be linked to individuals and when the possibility exists that individuals can be identified in  
1712 published reports.

1713 Personal information refers to identifying and identifiable information, as described in  
1714 Section A of this chapter (“Key Definitions and Principles”). Articles 5.5 and 5.6 do not  
1715 apply to secondary use of information that is anonymous, anonymized or de-  
1716 identified/coded and where the research team has no access to the code. For example, this  
1717 article does not apply to a researcher who receives a de-identified dataset from an  
1718 organization, but who does not have access to a code that permits re-identification of  
1719 individuals. Research use of personal information that relies exclusively on publicly  
1720 available sources such as public archives and published works does not require REB review,  
1721 as discussed in Chapter 2 (“Scope and Approach”).

1722 **Article 5.5** Researchers must seek research ethics board (REB) approval for secondary  
1723 research use of personal information. Researchers must satisfy the REB

- 1724 that:
- 1725 (a) Identifying or identifiable information is essential to the research;
- 1726 (b) They will take appropriate measures to protect the privacy of the  
1727 individuals, to ensure the confidentiality of the data, and to minimize  
1728 harms to participants;
- 1729 (c) Individuals to whom the data refer did not object in principle to  
1730 secondary use at the initial stage of collection or otherwise make known  
1731 their objection; and
- 1732 (d) They have obtained any other necessary (e.g., legal) permission to  
1733 access personal information for secondary research purposes.

1734 **Application** If a researcher satisfies the conditions in Article 5.5(a) to (d), the REB may  
1735 approve the research without requiring consent from individuals to whom the  
1736 information relates.

1737 Databases vary greatly in the degree to which information identifies or could  
1738 be used to identify individuals. The REB must carefully appraise the  
1739 possibility of identification and the harm or stigma that might result from  
1740 identification. A proportionate approach should be applied by the REB to  
1741 evaluate the identifiability of the information in the database and to modulate  
1742 its own requirements accordingly.

1743 REBs and researchers should be sensitive to the context in which  
1744 information was initially obtained, such as in a relationship of trust and  
1745 confidence, as well as to the understanding and/or expectations of the  
1746 individual about use, retention and disclosure of the information. Known  
1747 objections to secondary use should be respected. An individual may express  
1748 objection to future uses at the time of initial data collection or may, at some  
1749 later point, contact the organization or individual who holds the data to  
1750 request that it not be used for secondary research. For example, a former  
1751 patient may hear in the media about research being conducted at a local  
1752 hospital and contact the facility administrators to request that her or his  
1753 medical records (in their identifying or identifiable form) not be used for  
1754 research.

1755 Legislation governing protection of personal information may impose specific  
1756 rules regarding disclosure of personal information for secondary research  
1757 purposes. These laws may require the individual or organization that has  
1758 custody or control of requested personal information to obtain approval from  
1759 a privacy commissioner or other body before disclosing information to  
1760 researchers, and may impose additional requirements such as information  
1761 sharing agreements that describe conditions for disclosure of personal  
1762 information. Researchers should be aware of relevant laws that regulate  
1763 disclosure of personal information for research purposes.

1764 **Article 5.6** In highly sensitive situations, such as when personal information will be  
1765 published or other instances where there is a substantial privacy risk, the  
1766 research ethics board (REB) may require that a researcher's access to  
1767 personal information for secondary use be dependent on the informed  
1768 consent of individuals about whom the information relates or the  
1769 informed consent of authorized third parties, unless it is impossible or  
1770 impracticable to obtain consent.

1771 If the REB is satisfied that it is impossible or impracticable to obtain  
1772 consent, it may require that access to personal information be dependent  
1773 on:

- 1774 (a) An appropriate strategy for communicating to relevant groups that  
1775 personal information is intended to be used for a specified research  
1776 purpose; or  
1777 (b) Consultation with representatives of individuals or groups about whom  
1778 the information relates.

1779 Researchers must report outcomes of communication or consultation under  
1780 (a) or (b) to the REB.

1781 **Application** In considering the applicability of this article, REBs should apply a  
1782 proportionate approach to ethical assessment of research. This involves  
1783 considering the likelihood and magnitude of privacy risks for individuals  
1784 about whom the information relates, as well as the potential benefits of the  
1785 research.

1786 Where use of identifying or identifiable information for secondary research  
1787 raises a substantial privacy risk, Article 5.6 states that the REB may require  
1788 researchers to seek consent from individuals or authorized third parties. It  
1789 may, however, be impossible or impracticable to contact all individuals or  
1790 authorized third parties to obtain informed consent for secondary research  
1791 use of information. In some jurisdictions, privacy laws may preclude  
1792 researchers from using personal information to contact individuals to seek  
1793 their consent for secondary use of information. Consent may also be  
1794 impossible or impracticable when the group is large or its members are likely  
1795 to be deceased, geographically dispersed or difficult to track. Attempting to  
1796 track and contact members of the group may raise additional privacy  
1797 concerns. Seeking consent from only a partial set of group members may  
1798 introduce undesirable bias into the research. Financial, human and other  
1799 resources required to contact individuals and obtain consent may impose  
1800 undue hardship that jeopardizes the research.

1801 Where an REB is satisfied that consent is impossible or impracticable,  
1802 Article 5.6(a) states that the REB may require an appropriate strategy for  
1803 distributing information to relevant groups about the proposed research. For

1804 example, researchers who propose to access identifiable patient records may  
1805 post notices or distribute pamphlets at a health-care centre, because former  
1806 patients may still have contact with the centre. Alternatively, under Article  
1807 5.6(b), the REB may require that there be consultation with representatives  
1808 of the individuals or group. For example, researchers may develop a way to  
1809 sample the opinions of a subset of individuals in the group or contact one or  
1810 more organizations that are likely to represent the views and interests of the  
1811 individuals. The goal of such communication or consultation is to provide an  
1812 opportunity for input regarding the proposed research. In some situations, the  
1813 consultation under Article 5.6(b) may take place with an organization that  
1814 provides access to personal information. For example, researchers who  
1815 obtain a dataset of personal information from a government agency may  
1816 consult with that agency about the proposed research.

1817 In their application materials, researchers must explain to the REB why it is  
1818 impossible or impracticable to obtain informed consent from individuals.  
1819 Their application should also propose a communication or consultation  
1820 strategy for the REB's consideration. Where the REB is satisfied that  
1821 consent is impossible or impracticable, and that the sensitivity of the  
1822 situation warrants communication or consultation under Article 5.6(a) or (b),  
1823 the researchers must report the outcomes of those activities to the REB. For  
1824 example, if consultation with a representative group reveals concern with an  
1825 aspect of the proposed research, researchers must report this feedback to the  
1826 REB. Any changes to the research must comply with guidelines regarding  
1827 departures from approved research, as set out in Article 6.16 of Chapter 6  
1828 ("Governance of Research Ethics Review").

1829 **Article 5.7** Researchers who wish to contact individuals about whom personal  
1830 information relates must obtain research ethics board approval prior to  
1831 contact.

1832 **Application** In certain cases, a research goal may be achieved only through follow-up  
1833 contact with individuals to collect additional information. However, contact  
1834 with individuals whose previously collected information is used for  
1835 secondary research purposes raises privacy concerns, especially where a  
1836 relationship with individuals has not been maintained. Individuals might not  
1837 want to be contacted by researchers or might be upset that their information  
1838 was disclosed to researchers. The research benefits of follow-up contact  
1839 must clearly outweigh the potential harms to individuals of follow-up  
1840 contact, and the REB must be satisfied that the proposed manner of follow-  
1841 up contact minimizes potential harms for individuals.

## 1842 **E. Data Linkage**

1843 **Article 5.8** Researchers who wish to engage in data linkage that may lead to  
1844 identification of individuals must obtain research ethics board approval prior  
1845 to carrying out the data linkage.

1846 **Application** Advances in our abilities to link databases create both new research  
1847 opportunities and new threats to privacy. These techniques may provide  
1848 avenues for addressing previously unanswerable questions and for  
1849 generating better social and health-related information. The values  
1850 underlying the ethical obligation to respect privacy oblige researchers and  
1851 REBs to exercise caution in the creation and use of data of this kind. REBs  
1852 should also be aware of relevant legislation and any criteria required by  
1853 governments for authorization of use of data in governmental databanks.<sup>4</sup>

1854 Only a restricted number of individuals should perform the function of  
1855 merging databases. Researchers should either destroy the merged file  
1856 immediately after use, or use enhanced security measures to store it.  
1857 Whether the data are to be used statistically or otherwise, all members of the  
1858 research team must maintain security of the information. When a merged  
1859 database identifies a person or a group who might be at risk of substantial  
1860 harm, it may be appropriate to contact those at risk or the appropriate  
1861 authorities. The REB and the record holder should also be notified.

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#### Endnotes

<sup>1</sup> See *Canadian Charter of Rights and Freedoms*, Part I of the *Constitution Act, 1982*, being Schedule B to the *Canada Act 1982 (U.K.)*, 1982, c. 11.

<sup>2</sup> See, for example, the Canadian Standards Association's Model Code for the Protection of Personal Information.

<sup>3</sup> See the SSHRC Research Data Archiving Policy and the CIHR Policy on Access to Research Outputs.

<sup>4</sup> See, for example, *Statistics Act*, Revised Statutes of Canada, 1985, Chapter S-19 as amended.



# Chapter 6

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## GOVERNANCE OF RESEARCH ETHICS REVIEW

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This chapter sets out the process of research ethics review: the elements necessary to establish a research ethics board (REB) and operational guidelines for the REBs and the review process, both initially and throughout the course of the research project. It also includes guidelines for the conduct of research ethics review during publicly declared emergencies.

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A key goal in establishing an appropriate governance structure for research ethics review is to ensure that REBs operate with a clear mandate and authority and that roles and responsibilities are clearly defined. REBs need operational independence to carry out their role effectively and to properly apply the core principles of welfare, autonomy and equal moral status to their review of research projects. These operational guidelines are meant to ensure that independence, yet to be flexible enough to apply in various contexts, at institutions of various sizes, and to the full range of research disciplines, fields and methodologies.

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### A. Establishment of Research Ethics Boards

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#### Authority and Powers

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**Article 6.1** Institutions shall establish independent research ethics boards to review the ethical acceptability of research involving humans conducted within their jurisdiction or under their auspices – that is, by their faculty, staff or students regardless of where the research is conducted, in accordance with this Policy.

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**Application** In fulfilling this responsibility, institutions are required to develop the necessary structure of independent REBs for the ethics review of research involving humans.

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Where research with human participants takes place within the jurisdiction or under the auspices of an institution, that institution must establish an REB (or REBs) capable of reviewing the ethical acceptability of that research. To ensure integrity and safeguard public trust in the research process, the REB must maintain an arm's-length relationship with, and act independently from, the parent organization.

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The number of REBs and the expertise of their members will depend on the range and volume of research for which that institution is responsible, in accordance with the articles below relating to composition and membership.

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1895 **Article 6.2** The highest appropriate body within an institution shall establish the research  
1896 ethics board (REB) or REBs and provide them with sufficient and appropriate  
1897 financial and administrative independence to fulfil their duties. REBs shall  
1898 report directly to the highest level of the institution that has the overall  
1899 responsibility for research involving humans conducted under its auspices or  
1900 within its jurisdiction.

1901 **Application** REBs should be established by and report to the highest appropriate body of the  
1902 institution. This could be an individual such as the president, rector, or chief  
1903 executive officer, or an equivalent body such as a governing council or board of  
1904 directors. The highest body may delegate the reporting function as it deems  
1905 appropriate.

1906 In order to ensure that REBs are able to operate effectively and  
1907 independently, institutions should dedicate the appropriate financial and  
1908 human resources to their support. Institutional policies and procedures should  
1909 also support and promote the effective and independent operation of REBs.  
1910 Similarly, institutions should avoid situations that may undermine the  
1911 independence of REBs. For example, REBs should not report (other than for  
1912 purely administrative purposes) to institutional officers who are directly  
1913 responsible for promoting research, as this may result in situations of real or  
1914 apparent conflict of interest. (See Chapter 7 [“Conflict of Interest”].)

1915 While the REB should have the independence to conduct ethics review free  
1916 of inappropriate influence, it remains accountable to the institution for the  
1917 integrity of its processes, including its decision-making processes. REB  
1918 independence, therefore, does not mean that the REB is immune from  
1919 scrutiny.

1920 **Article 6.3** The institution grants the research ethics board the mandate to review the ethical  
1921 acceptability of research on behalf of the institution, including approving,  
1922 rejecting, proposing modifications to, or terminating any proposed or ongoing  
1923 research involving human participants that is conducted under the auspices or  
1924 within the jurisdiction of the institution, using the considerations set forth in this  
1925 Policy.

1926 **Application** The institution shall delegate the authority of the REB through its normal process of  
1927 governance. In defining the scope of the REB’s mandate, the institution must clearly  
1928 define the types of research that the REB may review. Where the institution requires  
1929 more than one REB, it should establish a mechanism to coordinate the operations of  
1930 all its REBs and clarify their relationship with each other and with other relevant  
1931 bodies or authorities. An institution may wish to use different models for the ethics  
1932 review of research conducted under its auspices. Institutions must have clear written  
1933 policies describing the mandate of each REB.

1934 Institutions must respect the authority delegated to the REB. While an



1935 individual researcher may appeal a decision of an REB, an institution may  
1936 not override REB decisions simply to promote or prevent a particular  
1937 research project. Institutions may, however, as a matter of policy, refuse to  
1938 allow certain types of research to be conducted under its auspices regardless  
1939 of the ethical acceptability of that research.

## 1940 **REB Composition**

### 1941 *Basic REB Membership Requirements*

1942 The membership of the REB is designed to ensure competent independent research ethics  
1943 review. Provisions respecting its size, composition, terms of appointment and quorum are set  
1944 out below.

1945 **Article 6.4** The research ethics board (REB) shall consist of at least five members, of  
1946 whom:

1947 (a) At least two members have expertise in relevant research disciplines and  
1948 methodologies covered by the REB;

1949 (b) At least one member is knowledgeable in ethics;

1950 (c) At least one member is knowledgeable in the law (but that member should  
1951 not be the institution's legal counsel or risk manager); and

1952 (d) At least one member has no affiliation with the institution, but is recruited  
1953 from the community served by the institution and has relevant experience or  
1954 training.

1955 **Application** This minimum requirement for REB membership brings to bear the necessary  
1956 basic background, expertise and perspectives to allow informed independent  
1957 reflection and decision-making on the ethics of research involving humans.  
1958 Senior administrators should not serve on the REB (see Article 7.3 in Chapter 7  
1959 ["Conflict of Interest"]), in order to avoid the perception of perceived, potential  
1960 or real conflict of interest.

1961 The size of an REB may vary based on the diversity of disciplines, fields of  
1962 research and methodologies to be covered by the REB, as well as based on the  
1963 needs of the institution. Institutions should ensure proper gender representation  
1964 on REBs where possible. Institutions may therefore need to exceed these  
1965 minimum requirements in order to ensure an adequate and thorough review, or  
1966 to respond to other local, provincial/territorial or federal requirements or  
1967 legislation. For example, for REB review of clinical trials, provincial/territorial  
1968 or federal regulations may outline specific membership requirements, in  
1969 addition to the requirements set out in this Policy. Community representation  
1970 should be proportionate to the size of the REB.

1971 **Relevant expertise in research content and methodology:** At least two  
1972 members should have the relevant knowledge and expertise to understand the  
1973 content area and methodology of the proposed or ongoing research, and to  
1974 assess the risks and benefits that may be associated with the research (Article  
1975 6.4[a]). For example, REBs reviewing oncology research, education, or topics  
1976 involving Aboriginal peoples, or research using qualitative methodologies,  
1977 should have members that are knowledgeable and competent to address those  
1978 fields of research, disciplines and methodologies.

1979 **Knowledgeable in ethics:** Knowledge of ethics of research involving  
1980 humans is key within the REB membership as a whole. A member  
1981 knowledgeable in ethics (Article 6.4[b]) needs to have sufficient knowledge  
1982 to guide an REB in identifying and addressing ethics issues. A balance of  
1983 ethics theory, practice and experience offers the most effective path to  
1984 knowledge in ethics for REB membership. The kind and level of knowledge  
1985 or expertise needed on the REB will be commensurate with, and  
1986 proportionate to, the types and complexities of research the REB reviews. For  
1987 example, a member knowledgeable in ethics serving on a social sciences and  
1988 humanities REB may have different contextual and disciplinary knowledge in  
1989 ethics than has a member of a biomedical REB.

1990 **Knowledgeable in the law:** The role of the member knowledgeable in the  
1991 law (Article 6.4[c]) is to alert REBs to legal issues and their implications, not  
1992 to provide formal legal opinions or to serve as legal counsel for the REB. To  
1993 avoid undermining the independence and credibility of the REB, the  
1994 institution's legal counsel or risk manager should not be a member of the  
1995 REB. In-house legal counsel might be seen to identify too closely with the  
1996 institutions' financial interest in having research go forward or, conversely,  
1997 may be unduly concerned with protecting the institution from potential  
1998 liability. Any external legal counsel hired on a case-by-case basis by the  
1999 institution should not sit as a member of that institution's REBs while  
2000 working for the institution.

2001 In some instances, the legal issues identified by the REB will necessitate further  
2002 scrutiny and even formal legal advice by the legal counsel to the institution. Legal  
2003 liability is a separate issue for institutions to handle through mechanisms other than  
2004 the REB.

2005 **Community member with no affiliation with the institution:** The community  
2006 member requirement (Article 6.4[d]) is essential to help broaden the perspective  
2007 and value base of the REB, and thus advances dialogue with, and accountability  
2008 to, local communities. The role of community members on REBs during the  
2009 research ethics process is both unique and at arm's length from the institution.  
2010 Their primary role is to reflect the perspective of the research participant. This is  
2011 particularly important when research participants are vulnerable and/or risks to  
2012 research participants are high. Institutions should seek to appoint former

2013 research participants as community members. Their experience as research  
2014 participants provides the REB with a vital perspective and important  
2015 contributions to the ethics review process. Institutions should provide training  
2016 opportunities to community members.

2017 To maintain effective community representation, the number of community  
2018 representatives should be commensurate with the size of an REB and should  
2019 increase as the size of an REB increases.

2020 **Substitute members:** Institutions should consider the nomination of substitute  
2021 REB members so that REBs can continue to function when regular members are  
2022 unable to attend due to illness or other unforeseen eventualities. The use of  
2023 substitute members should not, however, alter the REB membership structure as  
2024 set out in this article. Substitute members should have the appropriate  
2025 knowledge, expertise and training to contribute to the ethics review process.

2026 *Ad hoc Advisors*

2027 **Article 6.5** The research ethics board should have provisions for appointing ad hoc advisors in  
2028 the event that it lacks the specific expertise or knowledge to review a research  
2029 proposal competently.

2030 **Application** In the event that the REB is reviewing a project that requires particular community  
2031 or research participant representation, or a project that requires specific expertise  
2032 not available from its members, it should have provisions for appointing ad hoc  
2033 advisors. The REB maintains its composition and representation as outlined in  
2034 Article 6.4.

2035 Ad hoc advisors are appointed for a specific task and for the duration of the  
2036 review. Should this occur regularly, the membership of the REB should be  
2037 modified to ensure appropriate expertise on the REB. For example, in cases  
2038 where review of research on topics related to Aboriginal peoples is regularly  
2039 required, the REB membership should be modified to ensure that relevant  
2040 and competent knowledge and expertise of Aboriginal cultures are captured  
2041 within its regular complement.

2042 While an ad hoc advisor may complement the REB through his or her experience or  
2043 expertise, his or her input is a form of consultation that may or may not be  
2044 considered in the final decision of an REB. He or she is not an REB member and, as  
2045 such, does not necessarily have the knowledge and experience gained from  
2046 reviewing applications as a member. Ad hoc advisors should not be counted in the  
2047 quorum for an REB, nor be allowed to vote on REB decisions.

2048 *Terms of Appointment of REB Members*

2049 **Article 6.6** Research ethics board members shall be appointed by the appropriate body at the

2050		highest level of the institution such that their terms allow for continuity of the ethics review process.
2051		
2052	<b>Application</b>	In appointing REB members, institutions should arrange the terms of members and their rotation to balance the need to maintain continuity with the need to ensure diversity of opinion and the opportunity to spread knowledge and experience gained from REB membership throughout the institution and community. The REB membership selection process should be fair and impartial.
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2057	<b>Article 6.7</b>	Research ethics board (REB) members should have the qualifications, expertise and training necessary to review the ethical issues raised by research proposals that fall within the mandate of their REB.
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2060	<b>Application</b>	In selecting new members for appointment, the REB should consider the qualifications it needs in order to fulfil the requirements of Article 6.4.
2061		
2062		REBs should have adequate expertise, experience and training to understand the research disciplines, methodologies and approaches of the research that it considers for ethics review. Each REB member brings complementary expertise and knowledge. It is not sufficient for an REB to possess the necessary expertise globally, however. It must ensure that the members in attendance at any given meeting have the specific expertise necessary to review the proposals under consideration at that meeting.
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2069		All members of the REB should understand core ethics principles and concepts as set forth in this Policy to contribute to the review process. Institutions should ensure that all REB members receive appropriate education and training in the ethics review of research involving humans, to enable them to fulfil their duties. This training should be offered both on the appointment of new members and periodically throughout a member's tenure. Institutions should promote and recognize the contribution of REB members to the ethics review process, as a valued and essential component of the research enterprise.
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2077	<b>Article 6.8</b>	The research ethics board (REB) Chair is responsible for ensuring that the operations of the REB comply with institutional policies and procedures concerning the ethics review process.
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2080	<b>Application</b>	The role of the REB Chair is to facilitate the REB review process, operations and procedures, based on institutional policies and procedures and this Policy. The Chair should monitor the REB's decisions for consistency and ensure that these decisions are recorded properly and that they are communicated to researchers in writing as soon as possible. The institution should provide the Chair with administrative support in fulfilling his or her role.
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2086 *REB Quorum*

2087 **Article 6.9** Institutions shall establish quorum rules for research ethics boards subject to the  
2088 range of competence and knowledge required by this Policy to ensure the  
2089 soundness and integrity of the ethics review process.

2090 **Application** Quorum rules should be established by institutions such that REB decisions  
2091 requiring full review should be adopted only if the members attending the  
2092 meeting possess relevant competence and knowledge and meet the minimum  
2093 requirement of membership as outlined in Article 6.4. Among the REB  
2094 members there should be at least two members who have relevant expertise in  
2095 the methods or areas of research that are covered by the REB, one member who  
2096 is knowledgeable in ethics, one member who has no affiliation with the  
2097 institution but is recruited from the community served by the institution, and one  
2098 member who is knowledgeable in the law. Quorum should be proportionate to  
2099 the increases of the REB membership necessary to ensure adequate ethics  
2100 review.

2101 Ad hoc advisors, observers and others attending REB meetings should not be  
2102 counted in the quorum for an REB nor be allowed to vote on REB decisions (see  
2103 Article 6.5). Decisions without a quorum are not valid or binding.

2104 **REB Meetings and Attendance**

2105 **Article 6.10** Research ethics boards shall have regular face-to-face meetings to discharge  
2106 their responsibilities.

2107 **Application** Face-to-face meetings are essential for adequate discussion of and effective  
2108 REB decision-making on research proposals, and for the collective education of  
2109 the REB. The face-to-face medium provides interactive dynamics that tend to  
2110 heighten the quality and effectiveness of communications and decisions. REBs  
2111 shall meet face-to-face to review proposed research that is not assigned to  
2112 delegated review.

2113 Planning regular meetings is essential to fulfilling REB responsibilities.  
2114 Regular attendance by REB members at meetings is important, and frequent  
2115 absences should be construed as a notice of resignation. Unexpected  
2116 circumstances such as emergencies may prevent individual member(s) from  
2117 attending the REB meeting. In these exceptional cases, input from member(s)  
2118 by other means (e.g., use of technology) would be acceptable.

2119 Videoconferencing and use of other technologies may occasionally be regarded  
2120 as necessary for meetings when REB members are geographically dispersed and  
2121 there is no other way of holding an effective REB meeting or when exceptional  
2122 or exigent circumstances significantly disrupt or limit the feasibility of face-to-  
2123 face REB meetings, such as during a public emergency. All efforts should be

2124 made to ensure that technical difficulties do not prevent the maintenance of  
2125 quorum throughout the meeting. Respecting the principles of this policy,  
2126 institutions should develop written procedures for the occasional use of  
2127 videoconferences or other technologies by an REB.

2128 REBs and researchers may request informal meetings with each other prior to  
2129 the formal review process to facilitate the review. Such informal meetings  
2130 cannot, however, substitute for the formal review process. A schedule of REB  
2131 meetings should be communicated to researchers for the planning of ethics  
2132 review of their research.

2133 On occasion, REBs may need to consult other resources within or outside the  
2134 institution for advice and may invite experts or observers to attend their  
2135 meetings. REBs should consider whether the institutional functions of other  
2136 individuals attending their meetings could exercise undue influence or provide  
2137 elements of power imbalances or coercion that could affect REB members in a  
2138 way that would affect REB research ethics review deliberations and decisions.  
2139 Individuals who are not REB members should be aware of how their  
2140 institutional functions, how their roles may be perceived at REB meetings, and  
2141 how they have the potential to unduly influence REB members in their decision-  
2142 making procedures (see Chapter 7 [“Conflict of Interest”]).

2143 REBs should also hold general meetings, retreats and educational workshops to  
2144 enhance educational opportunities that may benefit the overall operation of the  
2145 REB, discuss any general issues arising out of the REB’s activities, or revise  
2146 relevant policies.

2147 **B. Procedures for REB Review**

2148 **Initial Research Ethics Review**

2149 **Article 6.11** Researchers should submit their research project for research ethics board review  
2150 and approval prior to the start of the formal data collection.

2151 **Application** For some types of methodologies, such as in qualitative research or fields of  
2152 research such as those involving Aboriginal peoples, the design of the study may  
2153 not be known at the onset, but only after the researcher has engaged with  
2154 prospective participants.

2155 Prior dialogue with individuals or communities of interest is a normal component  
2156 in community-based research or in some types of fields or disciplines of  
2157 research. This may precede REB review.

2158 **Article 6.12** Research ethics boards shall follow a research ethics review process  
2159 proportionate to the level of risk in research under review.

2160 **Application** REBs must assess the level of risk that the research under review poses to  
2161 participants to determine the appropriate proportionate approach to use in the  
2162 ethics review. At the time of initial review of the research, the REB has the  
2163 authority to determine the level at which continuing ethics review occurs  
2164 (e.g., frequency of reports, required details in reports). The level of review  
2165 and reporting schedule may be adjusted throughout the life of the project if  
2166 the need arises in situations where the risk level of the research increases  
2167 because of the discovery of new information or changes in procedures.

2168 Two levels of ethics review may apply:

2169 1. Full REB review

2170 Ethics review by the full REB should be the default requirement for research  
2171 involving human participants.

2172 2. Delegated REB review of minimal-risk research

2173 The REB delegates ethics review to an individual or individuals. Delegates  
2174 may be selected from among the REB membership or at the faculty or  
2175 department level.

2176 Where it is determined that the research is of minimal risk, an REB generally may  
2177 authorize a delegated ethics review, in accordance with its institutional policies.  
2178 The REB may decide that its Chair or another individual(s) (e.g., delegated  
2179 reviewer[s]) may review and approve categories of research that are confidently  
2180 expected to involve minimal risk. Delegated reviewers may call on other  
2181 reviewers within the REB or revert back to the full REB.

2182 In delegating the conduct of review, the REB should carefully select delegated  
2183 reviewer(s) and should ensure that all delegated reviewers who are not members  
2184 of the REB have the appropriate expertise and training to review all aspects of the  
2185 proposal consistent with this Policy.

2186 Examples of categories delegated for ethics review include:

- 2187 • categories of research that are confidently expected to involve minimal risk;
- 2188 • minimal-risk changes to approved research;
- 2189 • annual renewals of approved research; or
- 2190 • situations in which there is evidence that requirements laid down by the  
2191 REB have been met.

2192 An REB that decides to authorize a delegated review process must require that  
2193 the actions and decisions of the delegated reviewer(s) be well documented and  
2194 formally reported to the full REB in a timely and appropriate manner, thus  
2195 permitting the REB to maintain surveillance over the decisions made on its

2196                   behalf so as to protect the interests of participants.

2197                   REBs retain the authority to accept the report as presented or to request a more  
2198                   rigorous review process. It is imperative that delegated reviewer(s) be  
2199                   accountable to the full REB. With the support of their institutions, REBs may  
2200                   develop their own mechanisms under which delegation of the conduct of review  
2201                   and the associated reporting process will occur. Those mechanisms and  
2202                   procedures should be made public.

## 2203   **REB Decision-Making**

2204   **Article 6.13**   The research ethics board shall function impartially, provide a fair hearing to  
2205                   those involved and provide reasoned and appropriately documented opinions  
2206                   and decisions. Approvals and refusals need to be communicated in writing to  
2207                   researchers in print or by electronic means.

2208   **Application**   The REB shall accommodate reasonable requests from researchers to participate  
2209                   in discussions about their proposals, but those researchers must not be present  
2210                   when the REB is making its decision. When an REB is considering a negative  
2211                   decision, it shall provide the researcher with all the reasons for doing so and  
2212                   give the researcher an opportunity to reply before making a final decision.

2213                   The formal REB decision on whether to approve the research will often be  
2214                   preceded by extensive discussion of ethical concerns and of possible means of  
2215                   improving certain aspects of the research. These may include the research design  
2216                   or the information to be provided in the process of free and informed consent  
2217                   that affect the welfare or autonomy of participants or others affected by the  
2218                   research. In the event that a minority within the REB membership considers a  
2219                   research project unethical, even though it is acceptable to a majority of members,  
2220                   an effort should be made to reach consensus.

2221                   Consultation with the researcher, external advice, or further reflection by the  
2222                   REB may be helpful. If disagreement persists, a decision should be made in  
2223                   accordance with the process mandated by the institution. In such instances, the  
2224                   position of those disagreeing may be communicated to the researcher.

2225                   Participation by the researcher in such discussions is often very helpful to both  
2226                   REBs and researchers. Such discussions may result in a deferral of the REB's  
2227                   decision until the researcher has considered the discussions and possibly  
2228                   modified the proposal. Such discussions are an essential part of the educational  
2229                   role of the REB.

## 2230   **Scholarly Review**

2231   **Article 6.14**   As part of ethics review, research ethics boards should consider the appropriate  
2232                   mechanism for scholarly review of more-than-minimal-risk research, informed by



2233 the traditions for scholarly review in various disciplines.

2234 **Application** Where it is determined that the research presents more than minimal risk to  
 2235 participants, the full REB should consider some of the following mechanisms in  
 2236 their review:

- 2237 • Conclude that the proposed research has already passed appropriate peer  
 2238 review – for example, by a funding sponsor;
- 2239 • Establish a permanent peer review committee reporting directly to the  
 2240 REB; and/or
- 2241 • Where no other venue for scholarly review is available, and if the REB  
 2242 has the necessary scholarly expertise, assume complete responsibility for  
 2243 the scholarly review, or if the REB does not have the necessary scholarly  
 2244 expertise, establish an ad hoc independent peer review committee.

2245 REBs should normally avoid duplicating previous professional peer-review  
 2246 assessments unless there is a good and defined reason to do so. However,  
 2247 they may request that the researcher provide them with the full  
 2248 documentation of those reviews.

2249 When evaluating the merit and the scholarly standards of a research proposal,  
 2250 the REB should be concerned with a global assessment of the degree to  
 2251 which the research might further the understanding of a phenomenon, and not  
 2252 be driven by factors such as personal biases or preferences. REBs should not  
 2253 reject research proposals because they are controversial, challenge  
 2254 mainstream thought, or offend powerful or vocal interest groups. The primary  
 2255 tests to be used by REBs should be ethical probity and high scientific and  
 2256 scholarly standards.

2257 **Continuing Ethics Review**

2258 **Article 6.15** The research ethics board shall make the final determination as to the nature  
 2259 and frequency of the continuing ethics review in accordance with a  
 2260 proportionate approach to ethics review.

2261 **Application** Research is subject to continuing ethics review from the date of initial REB  
 2262 approval until completion of the study. At the time of first review, the REB  
 2263 should determine the term of approval. For some types of research (e.g.,  
 2264 qualitative research or longitudinal research), there may be some difficulty in  
 2265 establishing start or end dates. For these cases, the REB should work with  
 2266 researchers to determine a reasonable timeline for continuing ethics review.  
 2267 The reporting schedule for continuing ethics review may be adjusted  
 2268 throughout the life of the project if the need arises in situations where the risk  
 2269 level of the research increases because of the discovery of new knowledge or  
 2270 addition of new procedures.

2271 Research that involves minimal or no risk to the research participant should  
2272 be held to the minimum standard of continuing ethics review – for example, a  
2273 short annual report. Research that poses greater-than-minimal risk may  
2274 require a more extensive continuing ethics review. This could include more  
2275 frequent reporting to the REB, review of the consent process, and review of  
2276 participant records, etc. Other reporting mechanisms for continuing ethics  
2277 review may be required by funding sponsors.

2278 While REBs make the final decision about the nature and frequency of  
2279 continuing ethics review, continuing ethics review should be understood as a  
2280 collective responsibility, to be carried out with a common interest in maintaining  
2281 the highest ethical and scientific standards. For example, researchers must  
2282 monitor their research to ensure that the research is conducted in an ethical  
2283 manner. Researchers are responsible for supervising all team members in the  
2284 application of the research procedures, and for ensuring that they are versed in  
2285 the conduct of ethical research.

## 2286 **Departures From Approved Research**

2287 **Article 6.16** Research ethics boards shall make decisions on the ethical acceptability of  
2288 researchers' departures from the originally approved research, in accordance  
2289 with a proportionate approach to research ethics review.

2290 **Application** Three categories of departures from approved research may occur during the  
2291 conduct of research. These include (1) unanticipated or unexpected events or  
2292 issues that the researcher did not anticipate or expect when originally  
2293 submitting the research for ethics review, (2) changes that the researcher  
2294 makes to the approved research, and (3) deviations from approved research  
2295 when unavoidable single-incident departures from the originally planned  
2296 research procedure occur.

2297 In the conduct of their approved research, researchers should be cognizant of  
2298 the requirement to report to their REB, in a timely manner, departures from  
2299 approved research that have ethical implications and/or change the level of  
2300 risk to participants, which could adversely affect their well-being or welfare.  
2301 Any non-trivial or substantive changes to the research should not be  
2302 implemented without documented approval or acceptance by the REB, except  
2303 when necessary to eliminate an immediate hazard(s) to the research  
2304 participants.

2305 Institutions must have an established process for the REB to review and take  
2306 appropriate action regarding departures from approved research, including  
2307 reporting to senior administration and other administrative units where  
2308 necessary and appropriate.

2309 The level of REB review required to assess the changes or deviations from  
2310 approved research that have ethical implications and/or change the level of  
2311 risk to participants shall follow a proportionate approach to ethics  
2312 assessment, including changes to the continuing ethics review process. It is  
2313 not the size of the change that dictates the review process, but rather the  
2314 ethical implications and risk associated with the proposed change. In general,  
2315 regardless of the term of approval, projects will need to be re-reviewed or  
2316 amended if the context surrounding the research project changes. Although  
2317 the REB holds responsibility for reviewing the ethics of research in light of  
2318 changes in context, the researcher has a responsibility to be familiar with the  
2319 environment in which the research is being conducted and to notify the REB  
2320 about changes that may affect the ethics of the research.

2321 The final decision as to which type of deviations to report to the REB is up to  
2322 the REB. The report to the REB should include a description of the incident,  
2323 including details of how the researcher(s) dealt with the situation. The point  
2324 in reporting is informational and educational: it is to enable the REB to better  
2325 protect research participants in future research projects. Depending on the  
2326 nature of the event or issue, REBs may require that researchers adjust their  
2327 procedures to prevent such events from re-occurring during the research  
2328 project.

2329 In the case of clinical trials, unexpected or unanticipated events and reporting  
2330 requirements are defined in *International Conference on Harmonisation of*  
2331 *Technical Requirements for the Registration of Pharmaceuticals for Human*  
2332 *Use Guidance E6: Good Clinical Practice: Consolidated Guideline (ICH-*  
2333 *GCP)* . An REB may stipulate a timeframe for the reporting of such events.  
2334 In some cases, such events may be identified by Data and Safety Monitoring  
2335 Boards or study sponsors. If the event has immediate implications for the  
2336 safety and protection of research participants, the REB may require that the  
2337 research be halted until the matter can be addressed. (See Articles 11.3 and  
2338 11.4 in Chapter 11 [“Clinical Trials”].)

2339 In still other kinds of research (especially in the social sciences and  
2340 humanities), it is not always clear before the research is undertaken what  
2341 events may occur during the course of the research project. Here, researchers  
2342 should report any event that occurred as a result of the research and that may  
2343 affect the safety and well-being of the research participants. In many cases,  
2344 researchers will simply need to use their best judgment as to what should be  
2345 reported to the REB. In other cases, the researchers and REBs may work  
2346 together to develop a list of types of reportable events.

## 2347 **Record Keeping of REB Documents**

2348 **Article 6.17** Research ethics boards (REBs) shall prepare and maintain comprehensive  
2349 files, including accurate minutes reflecting research ethics review decisions

2350 and attendance of all REB meetings, as well as all documentation related to  
2351 the studies submitted to the REB for review.

2352 **Application** REBs need to act, and to be seen to be acting, fairly and reasonably. REBs  
2353 should maintain complete study files, including the original application, as  
2354 well as annual and end-of-study reports. REBs should be guided by their  
2355 institutional record-keeping policies and other relevant legislation or  
2356 requirements when deciding the retention period of their files. Minutes and  
2357 other relevant documentation must be accessible to authorized representatives  
2358 of the institution, researchers, sponsors and research agencies when  
2359 applicable to assist internal and external audits or research monitoring and to  
2360 facilitate reconsideration or appeals.

2361 The minutes of REB meetings shall clearly document the REB’s decisions  
2362 and any dissents, and the reasons for them. REB decisions should be  
2363 supported by clear references (e.g., date of decision, title of project),  
2364 documentary basis for decision (i.e., documents or progress reports received  
2365 and reviewed), the plan for continuing ethics review and timelines, reasons  
2366 for decisions, and any conditions or limitations attached to the approval.  
2367 Providing reasons is mandatory when a proposal is refused; it is optional  
2368 when it is approved.

2369 REBs should maintain reports and decisions on departures from approved  
2370 research, including a description of the unexpected or unanticipated event,  
2371 change or deviation; details of how the researcher dealt with the situation;  
2372 and the REB’s approval or acceptance of such changes.

2373 The REB should also maintain general records related to REB membership and  
2374 qualifications of members (e.g., copies of curriculum vitae, participation in  
2375 training).

2376 **C. Reconsideration and Appeals**

2377 Appeals of REB decisions follow a two-tiered approach. The first step – reconsideration –  
2378 must be exhausted before a researcher may proceed to the second step – the appeal process.

2379 **Reconsideration of REB Decisions**

2380 **Article 6.18** Researchers have the right to request, and research ethics boards have an  
2381 obligation to provide, reconsideration of decisions affecting a research project.

2382 **Application** REBs are to follow principles of natural and procedural justice in their decision-  
2383 making. Such principles include providing a reasonable opportunity to be heard;  
2384 an explanation of the reasons for opinions or decisions; and the opportunity for  
2385 rebuttal, fair and impartial judgment, and reasoned grounds for the decisions.  
2386 Researchers and REBs should make every effort to resolve their disagreement

2387 through deliberation, consultation or advice. If a disagreement cannot be resolved  
2388 by the researcher and REB, recourse to the appeals process may be considered.

2389 In the case of protocols reviewed by delegated review, requests by the  
2390 researcher for reconsideration of a delegated review decision should be  
2391 forwarded by the researcher for review by the full REB. Researchers must  
2392 justify on what grounds they request a reconsideration and indicate the breaches  
2393 to the research ethics process or the elements of the delegated REB decision that  
2394 are not supported by this Policy.

2395 **Appeal of REB Decisions**

2396 **Article 6.19** (a) In cases when researchers and research ethics boards (REBs) cannot reach  
2397 agreement through discussion and reconsideration, an institution should  
2398 permit review of an REB decision by an established appeal process.

2399 (b) Small institutions may wish to explore regional cooperation or alliances,  
2400 including the sharing of appeal boards. If two institutions decide to use each  
2401 other's REB as an appeal board, a formal letter of agreement between  
2402 institutions is required.

2403 **Application** Institutions must have an established mechanism and procedure in place for  
2404 entertaining appeals.

2405 By nature of their role and lack of frequency of meeting, appeal committees are  
2406 typically, de facto, ad hoc. Therefore, the appeal mechanism may be an ad hoc  
2407 committee or a permanent committee, as long as individuals involved in the  
2408 appeal process have the relevant knowledge and competence to review REB  
2409 decisions and procedures based on this Policy (see Article 6.4).

2410 It is not the role of the three federal research Agencies who are responsible for  
2411 this Policy to entertain any appeals of REB decisions.

2412 **Article 6.20** The scope of any appeal will be limited to assessment of the consistency of the  
2413 research ethics board's decision with this Policy.

2414 **Application** Researchers have the right to request an appeal of an REB decision once the  
2415 period of reconsideration has expired or the reconsideration process has been  
2416 exhausted and the REB has issued a final decision. Researchers must justify on  
2417 what grounds they request an appeal and indicate the breaches to the research  
2418 ethics process or the elements of the REB decision that are not supported by this  
2419 Policy.

2420 The Appeal Committee will determine whether the REB acted outside its  
2421 mandate and/or committed a breach of the process for ethics review as set out in  
2422 the most recent version of the institution's guidelines or policies and this Policy.

2423 The Appeal Committee has no jurisdiction to make a decision regarding the  
2424 ethical acceptability of the research study involved in the process under appeal.  
2425 It should be stressed that the appeals process is not a substitute for the REB's  
2426 and the researcher's working closely together to ensure high-quality research,  
2427 nor is it a forum to merely seek a second opinion. It is expected that an appeal  
2428 will be an exceptionally rare occurrence.

2429 The Appeal Committee shall do one of the following:

- 2430 1. Dismiss the appeal; or  
2431 2. Declare the original REB decision void and direct the responsible REB to  
2432 reconsider the application while ensuring that the REB is compliant with all  
2433 procedural and jurisdictional requirements.

2434 The Appeal Committee shall function impartially, provide a fair hearing to those  
2435 involved, and provide reasoned and appropriately documented opinions and  
2436 decisions. Approvals and refusals should be communicated in writing to  
2437 researchers in print or by electronic means.

2438 **D. Research Ethics Review During Publicly Declared**  
2439 **Emergencies**

2440 There is a growing awareness of the need for institutional planning to respond to public  
2441 emergencies and the associated potential challenges for research ethics review. Public  
2442 emergencies are extraordinary events that arise suddenly or unexpectedly and require urgent  
2443 or quick responses to minimize devastation. Examples include hurricanes and other natural  
2444 disasters, large communicable disease outbreaks, catastrophic civil disorders, bio-hazardous  
2445 releases, environmental disasters and humanitarian emergencies. They tend to be time-  
2446 limited. They may severely disrupt or may destroy normal institutional, community and  
2447 individual life.

2448 This section addresses research ethics review within the context of the official declaration of  
2449 public emergencies, which initiates emergency procedures and provides special  
2450 responsibilities and powers to authorized officials in accordance with provisions of the law.  
2451 Given the extraordinary circumstances that research participants are potentially subjected to  
2452 in public emergencies, special attention and effort should be given to upholding the core  
2453 principles of welfare, autonomy in the decision-making process, and the equal moral status  
2454 of all humans in such emergencies.

2455 **Institutional Emergency Research Ethics Preparedness Plans**

2456 **Article 6.21** In concert with their researchers, institutions and their research ethics boards  
2457 should develop emergency research ethics preparedness plans. Research  
2458 ethics review during emergencies may follow modified procedures and  
2459 practices.

2460 **Application** Preparedness plans should outline policies and procedures for addressing  
2461 research ethics review during and concerning public health outbreaks, natural  
2462 disasters and other public emergencies. Research ethics policies and  
2463 procedures and their implementation should adhere rigorously to a rule of  
2464 reasonable, fair and principled design and use for emergency purposes.

2465 Through their emergency preparedness plans, institutions, researchers and  
2466 their REBs need to anticipate the pressures, time constraints, priorities and  
2467 logistical challenges that may arise to ensure quality, timely, proportionate  
2468 and appropriate ethics review. The plan and its policies should proactively  
2469 address basic operational questions. Examples include, but are not limited to,  
2470 how emergencies may affect research and ethics review in institutions/REBs;  
2471 how REBs conduct business or meet; what research needs should be planned  
2472 in advance of, or done after, an emergency; what research, if any, needs to be  
2473 done during an emergency; what qualifies as time-sensitive or “essential”  
2474 research; what procedures govern the ethics review; and what evaluation  
2475 methods need to be developed. It is important to pilot test the emergency  
2476 procedures and plans in advance.

2477 Policies should try to anticipate the extraordinary circumstances or demands  
2478 occasioned by emergencies, and set priorities among them. For example,  
2479 institutions might consider the use of an instrument to identify and triage the  
2480 kinds of research that should be designed before, undertaken during, or  
2481 conducted after officially declared public emergencies. Likewise, a plan to  
2482 help prioritize REB reviews during emergencies should consider the  
2483 following:

- 2484 1. What constitutes “essential” research during the emergency;
- 2485 2. The initial review process of new research projects arising from the  
2486 emergency (e.g., research involving interviews with first responders and  
2487 victims to understand human response during a disaster, such as a tornado  
2488 or earthquake);
- 2489 3. Continuing ethics review of research undertaken prior to the occurrence  
2490 of the emergency; and
- 2491 4. The review process for departures from approved research, because new  
2492 information may become available very rapidly during emergencies (see  
2493 Article 6.16).

2494 REB procedures may warrant reasonable adjustments to address the timing,  
2495 locale, expertise, form and scope of review, and the holding of REB meetings  
2496 during emergency situations (see Article 6.10). Special attention could be  
2497 given to REB procedures to review and approve research (e.g., full or  
2498 delegated ethics reviews, quorum rules, or special agreements with other  
2499 institutions), while considering the impact of the emergency on research  
2500 participants, researchers, REB members, institutional staff and others. REB

2501 members may become unavailable (e.g., due to illness, relocation or  
2502 quarantine by public authorities). Institutions and REBs should explore the  
2503 nomination of substitute REB members and ad hoc advisors with relevant  
2504 expertise, negotiate reciprocity agreements with other institutions for REB  
2505 reviews, and revisit how scholarly review would be applied in such instances.

2506 Research ethics review should be proportionate to the necessities occasioned  
2507 by the emergency, because of the critical interplay between public urgencies,  
2508 essential research, and a continuing commitment to core ethics principles  
2509 even in the face of acute public necessity. Research ethics review during or  
2510 regarding public emergencies is even more important than under normal  
2511 circumstances and may require even greater care and scrutiny, since everyone  
2512 (research participants, researchers and REB members themselves) may be  
2513 rendered more vulnerable by the nature of the emergency.

2514 **Application of Research Ethics Review Policy and Procedures in Publicly Declared**  
2515 **Emergencies**

2516 **Article 6.22** The application of research ethics policy and procedures for emergencies is  
2517 limited to officially declared public emergencies. It should cease immediately  
2518 after such declaration is withdrawn.

2519 **Application** Public emergencies for the purposes of this Policy are limited to those that  
2520 are declared by an authorized public official. This section therefore applies  
2521 to narrow, limited and exceptional circumstances. Because emergencies  
2522 present extraordinary public risks that warrant special responses, legislation  
2523 or public policies usually require that they be officially proclaimed or  
2524 declared. The exercise of those responsibilities may temporarily modify  
2525 normal procedures or practices. In extreme instances, public emergencies  
2526 might warrant the suspension of some civil liberties. The ethical rationale  
2527 behind such powers and duties is beneficence-based public necessity: that  
2528 the exceptions to, and infringements of, principles such as autonomy may  
2529 prove necessary to preserve or protect human life or public health, safety,  
2530 order and welfare. An important concern regarding such powers is that they  
2531 not be used beyond the scope of the emergency, nor used arbitrarily or  
2532 unreasonably or otherwise abused. For such reasons, they are circumscribed.  
2533 Research ethics review policies and procedures for declared emergencies  
2534 should, accordingly, be applied only to compelling public necessities  
2535 occasioned by a public emergency.

2536 **Respecting Core Principles: Limiting Derogations**

2537 **Article 6.23** Research ethics boards should give special care to requests for derogations  
2538 from the principles outlined in this Policy involving or during publicly  
2539 declared emergencies.



2540 **Application** Especially during times of emergency, researchers, REBs and institutions  
2541 need to be vigilant and exercise due diligence in respecting ethical principles  
2542 and procedural standards. To preserve the values, purpose and protection that  
2543 the principles of this Policy advance, the onus for demonstrating a reasonable  
2544 public-emergency exception to an ethical principle or procedural standard  
2545 should fall on those claiming the exception.

2546 To guide fair and reasonable implementation for emergency circumstances,  
2547 any derogations from or infringement of ethics principles and standards need  
2548 to be demonstrably justified by those urging the infringement. Sometimes a  
2549 proposed infringement or derogation will not be justified for research  
2550 purposes. Justified derogations from or infringement of ethics principles and  
2551 standards should correspond directly, and be calibrated, to the benefit  
2552 targeted by the goal of the policy. Derogations should be narrowly tailored to  
2553 address the necessities occasioned by the public emergency, such that the  
2554 least restrictive or least intrusive means necessary to achieve the policy goal  
2555 are relied on. This approach – consistent with international bioethics and  
2556 human rights norms – maximizes respect of ethical principles and helps to  
2557 ensure that exceptions or infringements and the means to implement them are  
2558 not unduly broad, overreaching or unjustifiably invasive.

2559 Recognizing and respecting the principle of equal moral status means that  
2560 research ethics review policies and procedures for publicly declared  
2561 emergencies shall be used in a manner that is not discriminatory or arbitrary.  
2562 The commitment to equal moral status advances a fair and balanced  
2563 distribution of burdens and benefits even in the face of public emergencies.

2564 REBs and researchers should be aware that individuals, potential participants,  
2565 researchers, and institutions that may not normally be considered vulnerable  
2566 may become so by the very nature of public emergencies. Those already  
2567 vulnerable may become acutely so. REBs and researchers should ensure  
2568 appropriate evaluation of the risks and potential benefits posed by any  
2569 proposed research, including provisions for greater-than-normal attention to  
2570 risk, where applicable. The increased public risks and devastation on which  
2571 public emergencies are declared threaten autonomy and physical, emotional,  
2572 institutional and social well-being or safety. They also bring inherent tensions  
2573 and pressures that may impact deliberative decision-making. Research ethics  
2574 policy and review for public emergencies should recognize that in such  
2575 situations the affected population, as individuals or as a body, may become  
2576 more vulnerable. Therefore, the need to promote, protect and respect the  
2577 welfare and autonomy of participants must be accordingly addressed (see  
2578 Article 4.4 in Chapter 4 [“Research Involving Vulnerable Persons or  
2579 Groups”]).



# Chapter 7

2580

2581

## CONFLICT OF INTEREST

2582 Researchers and research ethics boards (REBs) hold trust relationships with research  
2583 participants, research sponsors, institutions, their professional bodies and society. These trust  
2584 relationships can be put at risk by conflicts of interest that may compromise independence,  
2585 objectivity or ethical duties of loyalty. Although the potential for such conflicts has always  
2586 existed, pressures to commercialize research or suspend dissemination of research outcomes  
2587 heighten concerns.

2588 Research institutions, too, hold trust relationships with research participants, research  
2589 sponsors, researchers and society. Research institutions may have financial or reputational  
2590 interests that conflict with the institution's obligations to protect and respect human dignity  
2591 as characterized by the core principles of this Policy. Institutions have an interest in ensuring  
2592 that the conduct of research is not compromised by real, potential or perceived conflicts of  
2593 interest.

2594 Conflicts of interest that jeopardize the integrity of research and the protection of potential  
2595 research participants are contrary to the core principles on which this Policy is based.  
2596 Conflicts that create divided loyalties may distract researchers, REBs and institutions from  
2597 the welfare and well-being of participants. Failures to disclose and manage conflicts may  
2598 impede the informed and autonomous choices of individuals to participate in research.  
2599 Conflicts of interest may also undermine the respect for participants that is fundamental to  
2600 the principle of equal moral status. Researchers, their institutions and REBs should identify  
2601 and address conflicts of interest – real, potential or perceived – to maintain public  
2602 confidence and trust, discharge professional and institutional obligations, and ensure  
2603 accountability.

### 2604 **A. Institutions and Conflicts of Interest**

2605 **Article 7.1** Institutions should develop conflict of interest policies and procedures to  
2606 identify, prevent, disclose and manage conflicts of interest that may affect  
2607 research involving humans. Institutions should act in a transparent manner in  
2608 addressing conflicts of interest and should make their written conflict of  
2609 interest policies and procedures publicly available.

2610 **Application** When developing institutional policies and procedures on conflicts of interest,  
2611 institutions should clarify the roles and the distribution of responsibilities, and  
2612 clarify associated potential for conflicts. This clarity should reduce or eliminate

2613 the possibility for confusion of roles that may ultimately lead to conflicting  
2614 obligations. Ideally, institutional policies will organize roles, responsibilities,  
2615 reporting lines and accountabilities to minimize, manage or avoid conflicts of  
2616 interest. (See Articles 6.1 and 6.2 in Chapter 6 [“Governance of Research Ethics  
2617 Review”] and Article 7.2.) Institutions must respect the autonomy of the REB  
2618 and ensure the REB has the appropriate financial and administrative  
2619 independence to fulfil its duties. (See Articles 6.1 and 6.2 in Chapter 6  
2620 [“Governance of Research Ethics Review”].)

2621 Measures to manage conflicts of interest should be proportionate to potential  
2622 harms and should be founded on an assessment of relevant institutional  
2623 operations. Institutions should consider the following measures to address  
2624 conflict of interest at the institutional level:

- 2625 • Apply firewalls to insulate potentially conflicting roles and duties;
- 2626 • Refine or redesign roles and responsibilities to minimize or avoid the  
2627 potential for conflicts;
- 2628 • Prevent or minimize conflict of interest in institutional design and  
2629 structuring when creating new roles, responsibilities or relationships;
- 2630 • Withdraw from, or not participate in, roles or functions unduly  
2631 compromised or disabled by perceived or real conflict; and
- 2632 • Create central institutional mechanisms such as a conflict of interest  
2633 committee or other delegated body within the institution to help identify  
2634 and manage conflicts of interest.

2635 Conflict of interest policies and procedures should be developed in a transparent  
2636 manner and should be publicly available to all members of the research  
2637 enterprise, including research participants, REBs, researchers, administrators,  
2638 research sponsors and others.

2639 The goal of such policies is to identify and disclose potential, perceived or real  
2640 institutional conflicts of interest to make them transparent and open to scrutiny.

2641 **Article 7.2** Institutions should ensure that the research ethics board is informed of real,  
2642 potential or perceived institutional conflicts of interest that may affect research  
2643 involving humans.

2644 **Application** An institutional conflict of interest involves a conflict between at least two  
2645 substantial institutional obligations that cannot be adequately fulfilled  
2646 without compromising one or both obligations. Conflicts may be real,  
2647 potential or perceived. Institutional conflicts of interest may compromise  
2648 duties of loyalty and lead to biased judgments. Conflicts may also undermine  
2649 public trust in the ability of the institution to carry out its missions, operations  
2650 and ethical responsibilities in research involving humans.

2651 An individual acting in a professional role with the institution is in a conflict of  
2652 interest when he or she is subject to competing incentives or functions that  
2653 significantly interfere with the impartial exercise of duties, including legal and  
2654 ethical obligations within the institutional structure. An institutional conflict of  
2655 interest may thus directly divide one's professional duties and loyalties when the  
2656 incentive structure of the institution places individuals acting in institutional  
2657 roles in conflicts of loyalty and function. The conflict may be chronic, relating  
2658 to recurring situations occasioned by the institutional structure, or it may be  
2659 triggered by a unique situation that is not likely to recur.

2660 To meet obligations to protect research participants, institutional policies  
2661 should address the roles, responsibilities and process for disclosing and  
2662 managing institutional conflicts of interests relevant to research involving  
2663 humans, including disclosure to REBs. Institutions may consider establishing  
2664 relevant structures such as a competent institutional authority, a delegated  
2665 body, or conflict of interest committee within the institution (see Article 7.1).

2666 A senior administrator, researcher, REB member or other individual who is  
2667 aware of potential sources of institutional conflicts of interest that may affect  
2668 research involving humans should refer to the institutional policy to inform  
2669 the REB of such conflicts. Likewise, when a significant real, potential or  
2670 perceived institutional conflict of interest is disclosed and brought to its  
2671 attention, the REB should be guided by the central institutional mechanisms  
2672 for consulting with the relevant body to manage the conflict.

## 2673 **B. REB Members and Conflicts of Interest**

2674 **Article 7.3** Research ethics board (REB) members must disclose real, potential or perceived  
2675 conflicts of interest to the REB, and, where necessary, members must withdraw  
2676 from REB deliberations and decisions.

2677 **Application** To maintain the independence and integrity of ethics review, members of the  
2678 REB must avoid and disclose real, potential or perceived conflicts of interest.  
2679 For example, REB members are in a conflict of interest when their own research  
2680 projects are under review by their REB.

2681 When REB members are or have been in direct conflict with researchers on  
2682 academic or scientific issues, or when they have collaborated with the researcher  
2683 whose proposal is under review, REB members should disclose and fully  
2684 explain to the REB the conflict of interest to prevent bias or undue influence in  
2685 the outcome of the review process. In such cases, the researcher should be able  
2686 to raise with the REB any concerns with respect to conflict of interest. To  
2687 manage such conflicts, REB members should withdraw from the committee  
2688 when such projects are under consideration.

2689 While the presence of administrative staff may be relevant and appropriate to

2690 support REB procedures, an institutional senior administrator should not serve  
2691 on an REB, attend meetings, or influence the REB decision-making process.  
2692 (See Articles 6.2, 6.4 and 6.10 in Chapter 6 [“Governance of Research Ethics  
2693 Review”].) The presence of a non-voting institutional senior administrator at  
2694 REB meetings may undermine the independence of the REB by unduly  
2695 influencing REB deliberations and decisions.

2696 Research involving small communities or community-based organizations with  
2697 scarce human resources may present particular issues related to multiple roles of  
2698 some individuals. In some cases, securing informed advice on cultural or other  
2699 aspects of research rests with the researcher or the sponsoring institution and  
2700 requires engagement with a community advisor, who may assume various roles  
2701 in the research process. The same individual may be involved in providing  
2702 preliminary information as well as reviewing the ethics of a research proposal at  
2703 the community level and even co-managing the approved research. As outlined  
2704 in Article 7.1, an approach proportionate to the level of harms, such as  
2705 disclosure of the possible conflicts between multiple roles, may be sufficient to  
2706 manage the conflict.

2707 Institutional conflicts of interest may give rise to professional conflicts or  
2708 divided loyalties for individuals working in affected institutions. Reasonable  
2709 compensation by institutions for REB members is appropriate. However, in  
2710 some instances, individual members of the REB may have a conflict of interest  
2711 in accepting undue or inappropriate honoraria for their participation in the REB.  
2712 The REB must avoid or manage such conflicts of interest.

2713 **C. Researchers and Conflicts of Interest**

2714 **Article 7.4** Researchers should disclose to the research ethics board real, perceived or  
2715 potential individual conflicts of interest, as well as any institutional conflicts of  
2716 interest of which they are aware that may have an impact on their research.

2717 **Application** Individual conflicts of interest may arise from interpersonal relationships (for  
2718 example, family or community relationships), financial partnerships, other  
2719 economic interests or any other incentives that may compromise integrity,  
2720 confidence of the research participant, or respect for the core principles of this  
2721 Policy. Conflicts may arise from an individual’s involvement in dual and  
2722 multiple roles within or outside an institution. While generally it is impossible to  
2723 eliminate all conflicts of interest, researchers are expected to recognize,  
2724 disclose, limit and manage their individual conflicts in a manner that is  
2725 satisfactory to the REB.

2726 Managing conflict of interest is a process, of which the first step is disclosure.  
2727 Upon disclosure to the REB, the steps taken by the REB to manage the conflict  
2728 should be context-based and proportionate to potential harms. For example, in  
2729 some cases, the REB might conclude that the identified conflict of interest

2730 does not warrant specific actions. In other cases, when disclosure to the REB is  
2731 not enough to manage the conflict of interest, the REB, guided by established  
2732 institutional policies, may require that the researcher abandon one of the  
2733 interests in conflict by withdrawing from the research or allowing others to  
2734 make research-related decisions.

2735 Dual roles of researchers (for example, acting as both a researcher and a  
2736 therapist, caregiver, teacher, advisor, consultant, supervisor, student or  
2737 employer) may create conflicts, undue influences, power imbalances or coercion  
2738 that could affect relationships with others and affect decision-making  
2739 procedures (for example, free and informed consent of participants). Article  
2740 3.2(e) reminds researchers of relevant ethical duties that govern potential,  
2741 perceived or real conflicts of interest as they relate to the free and informed  
2742 consent of participants. To preserve and not abuse the trust on which many  
2743 professional relationships rest, researchers should be fully cognizant of conflicts  
2744 of interest that may arise from their dual or multiple roles, and they should  
2745 attempt to manage the conflict.

2746 Care should also be exercised in developing relationships between researchers  
2747 and authorities, so as not to compromise the free and informed consent and  
2748 privacy of participants and the confidentiality obligations of researchers, and to  
2749 maintain public confidence and trust.

2750 As part of the research plan for REB review, researchers should provide  
2751 details on the research project, budgets, commercial interests, consultative  
2752 relationships and other relevant information and documentation, and identify  
2753 strategies to prevent, disclose and manage conflicts properly. Disclosure of  
2754 the kinds and amounts of payments, and other budgetary details, especially if  
2755 the researcher also holds a therapeutic, clinical or other fiduciary relationship  
2756 with research participants, will assist the REB, or other delegated body within  
2757 the institution, to assess potential conflicts of interest and will help the  
2758 researcher in resolving them. (See Articles 11.8 and 11.9 in Chapter 11  
2759 [“Clinical Trials”].)

2760 The appearance of a conflict may in many cases be as damaging as a real  
2761 conflict. The REB should assess the likelihood that the researcher’s judgment  
2762 may be influenced or appear to be influenced by private or personal interests,  
2763 and it should assess the level of harm that is likely to result from such  
2764 influence or from the perception of undue influence.

2765 In addressing conflicts of interest, disagreements may arise about the scope  
2766 and reach of disclosure, including disclosure of new information to  
2767 participants, or other aspects of managing the conflict. Resolution of  
2768 disagreements should be guided by a paramount principle of respecting the  
2769 autonomy and welfare of participants and by relevant institutional policies. If  
2770 disagreement cannot be resolved by the researcher and REB, recourse to the  
2771 appeals process should be considered. (See Articles 6.19 and 6.20 in Chapter





# Chapter 8

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## MULTI-JURISDICTIONAL RESEARCH

2775 Modern research often involves collaborative partnerships among researchers from multiple  
2776 institutions or countries. It may call upon the participation of a number of local populations  
2777 and involve multiple research ethics boards (REBs).

2778 Collaborative research may require institutions to adopt policies and procedures that permit  
2779 arrangements for REB review off-site at other institutions. To be effective, these review  
2780 arrangements should ensure that research involving humans is designed, reviewed and  
2781 conducted in a way that is informed by the core principles of welfare, respect for autonomy  
2782 and equal moral status for all humans. These core principles should be balanced with a  
2783 proportionate approach to the research ethics review process for research being undertaken  
2784 in Canada or abroad.

### 2785 **G. Review Mechanisms for Research Involving Multiple** 2786 **Institutions and Research Ethics Boards**

2787 This section primarily addresses research involving multiple sites and at least one institution  
2788 that adheres to this Policy.

2789 Institutions are accountable for research conducted under their auspices, irrespective of the  
2790 location where it takes place. Prior ethics review of the proposed research at each  
2791 collaborating institution affords the opportunity for local issues and values to be considered.  
2792 However, multiple, independent reviews may lead to different decisions, which may delay  
2793 or jeopardize the implementation of the research.

2794 Research involving humans that may require the involvement of multiple REBs includes,  
2795 but is not limited to, the following situations:

- 2796 (a) A research project conducted by a team of researchers affiliated with different  
2797 institutions;
- 2798 (b) Several research projects independently conducted by researchers affiliated with  
2799 different institutions, with data combined at some point to form one overall research  
2800 project;
- 2801 (c) A research project conducted by a researcher affiliated with one institution, but that  
2802 involves collecting data or recruiting research participants at different institutions;
- 2803 (d) A research project conducted by a researcher who has multiple institutional  
2804 affiliations (e.g., two universities, a university and a college, or a university and a  
2805 hospital);

- 2806 (e) A research project conducted by a researcher at one institution that requires the  
2807 limited collaboration of individuals affiliated with different institutions or  
2808 organizations (e.g., statisticians, lab or X-ray technicians, social workers, and school  
2809 teachers); or
- 2810 (f) Researcher(s) working under the auspices of a Canadian research institution but  
2811 conducting research in another province, territory or country.

## 2812 **Adoption of Alternative Review Models is an Institutional Responsibility**

2813 **Article 8.1** An institution that has established a research ethics board (REB) may define  
2814 specific review models for research involving multiple REBs or institutions, in  
2815 accordance with this Policy.

2816 **Application** In addition to the traditional review processes (see Point 1, below), the  
2817 following models for multiple REBs or multi-institutional review are  
2818 intended to provide flexibility and efficiency and avoid unnecessary  
2819 duplication of review without compromising the protection of research  
2820 participants. All other provisions of this Policy remain applicable.

### 2821 *1. Independent Review by Several Single REBs*

2822 The REBs involved at each participating institution conduct their independent  
2823 research ethics review and provide their separate decisions, either  
2824 concurrently or sequentially.

2825 When several REBs consider the same proposal from their own institutional  
2826 perspectives, they may reach different conclusions on one or more aspects of the  
2827 proposed research. REBs may therefore wish to coordinate their review of  
2828 projects requiring multiple REB involvement, and to communicate any concerns  
2829 that they may have with other REBs reviewing the same project. When multiple  
2830 REBs are involved, the REB of the principal investigator should define  
2831 mechanisms to address inconsistencies or disagreements, defining criteria, roles  
2832 and responsibilities.

2833 Researchers should provide their REB with the name and contact information of  
2834 the other REBs that will also review the project.

### 2835 *2. Research Ethics Review Delegated to a Specialized or Multi-institutional* 2836 *REB*

2837 Institutions allow research on specific content areas (e.g., clinical oncology  
2838 research, research involving Aboriginal peoples) or research methods (e.g.,  
2839 qualitative research) to be reviewed by an external, specialized or multi-  
2840 institutional REB, where such a body exists. In the agreements between the  
2841 selected REB and the institutions submitting research for review, the  
2842 specialized or multi-institutional REB must agree to adhere to this Policy.

2843 Specialized or multi-institutional REBs may be established regionally,  
2844 provincially/territorially, or nationally, as necessary.

2845 Another situation would include two or more institutions pooling their  
2846 resources to create a single joint REB to whom the research ethics review is  
2847 delegated. Such a delegation may be based on geographical proximity or  
2848 other considerations such as capacity, volume of reviews, or shared expertise.

2849 Some provinces have introduced legislation that designates one or more  
2850 REBs for the review of certain types of research within the province. In  
2851 addition to other provisions, provincial legislation may require adherence to  
2852 this Policy.

2853 Roles and responsibilities should be clearly defined in the agreement between  
2854 institutions or in the legislation. The specialized or multi-institutional REB  
2855 may act as the responsible REB, for any given review, if formally mandated  
2856 as such by the institutions in question. Where relevant, agreements should  
2857 specify how the specialized or multi-institutional REB will assure familiarity  
2858 with particular populations that may be involved in the research. Central  
2859 review by a specialized or multi-institutional REB need not be preceded or  
2860 followed by local REB review.

2861 *3. Reciprocal REB Review*

2862 Multiple institutions may enter into agreements under which they will accept,  
2863 with an agreed level of oversight, the ethics reviews of each other's REBs. This  
2864 might involve specific agreements between institutions for sharing the workload  
2865 of reviewing collaborative research.

2866 Institutions may also decide that reciprocity agreements between institutions  
2867 involved in such research are to be established for each research proposal on  
2868 a case-by-case basis.

2869 Whether the review is done by a single REB or reciprocal REB, researchers  
2870 should ensure that the reviewing REB is provided with any relevant  
2871 information about the local populations and circumstances that would  
2872 ordinarily be available to the local REB and that may have a bearing on its  
2873 review. Otherwise, local REBs might be called upon to provide such  
2874 information, in addition to the information provided by the researchers.

2875 **Article 8.2** Every institution remains responsible for the ethical acceptability of research  
2876 undertaken within its jurisdiction or under its auspices, regardless of the  
2877 model adopted for multi-jurisdictional review of any given research project.

2878 **Application** The selection, establishment and implementation of alternative models for  
2879 REB review is a collective/collaborative responsibility within and between

2880 the participating institutions, their REBs, and the investigators whose  
2881 research is reviewed. Regardless of the review model adopted for any given  
2882 research purpose, the institution remains responsible for the ethics review and  
2883 for decisions regarding research involving human participants that is carried  
2884 out under its auspices or within its jurisdiction, irrespective of the location  
2885 where the research is conducted. The ultimate responsibility for the REB  
2886 reviews and decisions remains with the individual institutions.

2887 Alternative procedures can range from multiple reviews of the same project  
2888 to accepting the review of other REBs constituted in accordance with this  
2889 Policy. An institution may authorize its REB to accept reviews of another  
2890 institution's REB if both institutions have an official agreement that includes  
2891 at least the following components:

- 2892 • All institutions involved must agree to adhere to the requirements of this  
2893 Policy, and the cross-institutional agreement must be formalized and  
2894 documented;
- 2895 • The decision to allow an REB to recognize decisions made by another  
2896 institution's REB must be made at the highest institutional level, by the  
2897 body that originally defined the jurisdiction of the REB and its  
2898 relationship to other relevant bodies or authorities (in accordance with  
2899 Article 6.2 in Chapter 6 ["Governance of Research Ethics Review"]); and
- 2900 • Approvals based on cross-institutional agreements should be brought to  
2901 the attention of the full REB in each institution, in the same way as  
2902 decisions made by delegated review.

2903 Researchers should use the review models defined by their institution and  
2904 facilitate coordination of ethics review when submitting their proposal to the  
2905 REB. Whatever model is chosen, roles and responsibilities of all involved in  
2906 the process should be defined and agreed to at the outset. Institutions might  
2907 decide to adopt different models for the review of different research projects.

### 2908 **Adoption of a Review Model Relevant to the Research Project is a Shared** 2909 **Responsibility Between Researchers and REBs**

2910 **Article 8.3** Researchers and research ethics boards (REBs) should, together, determine  
2911 which review model is the most appropriate for proposed research involving  
2912 multiple institutions and REBs.

2913 **Application** When planning for research involving multiple institutions and REBs,  
2914 researchers and REBs should identify which review models have been  
2915 approved by their institution and determine which one would be most  
2916 relevant for the proposed research. Researchers should consider alternative  
2917 review models at the planning and design stage of their research, and they

2918 should consult with their REB to facilitate the selection and coordination of  
2919 the appropriate review model.

2920 Sensitivity to context is a key issue in the application of the core principles of  
2921 this policy in ethics review of research involving multiple institutions and  
2922 REBs. In choosing the appropriate review model, the researcher and the REB  
2923 should pay attention to characteristics of the populations targeted by the  
2924 research and the research context. When choosing alternative REB review  
2925 models, researchers and REBs should consider the following:

2926 • The discipline and content area of the research and the availability of  
2927 appropriate experience and expertise within, or available to, the reviewing  
2928 REB;

2929 • The potential for conflict of interest and undue influence, including from  
2930 funding sources;

2931 • The scope of the project to be reviewed and appropriateness of the  
2932 proposed review mechanism;

2933 • The vulnerability of the study population overall and the local population  
2934 at individual sites, and the level of risk associated with the research under  
2935 review;

2936 • Any relevant differences in laws and/or guidelines pertaining to the  
2937 research in question if the institutions are in different  
2938 provinces/territories/countries;

2939 • Relationships between institutions and REBs, and conflict resolution  
2940 mechanisms;

2941 • Any differences in the standard of care or access to services that might be  
2942 relevant to the conduct of the research, normally followed at the  
2943 participating institutions; and

2944 • Any operational issues that need addressing.

2945 **B. Review of Research Conducted Outside a REB’s Jurisdiction**

2946 Researchers affiliated with Canadian institutions are undertaking research in numerous  
2947 countries around the world or sites within Canada. Such research may be carried out with or  
2948 without any collaboration with host institutions and local researchers. Researchers should  
2949 familiarize themselves with the rules applicable in the host institution and conduct their  
2950 research in conformity with them. Most developed countries, and many developing  
2951 countries, have laws, policies or guidelines governing the conduct of research involving  
2952 humans. However, for some types of research, such formal frameworks or requirements for  
2953 review do not exist.

2954 National and international standards for research involving human participants are evolving  
2955 continually, but methods for comparing the precise levels of protection afforded participants in  
2956 different countries or jurisdictions, and different institutions within those countries and  
2957 jurisdictions, have not yet been developed. In exercising its responsibilities for the initial and  
2958 continuing ethics review of research conducted under its auspices outside its jurisdiction, the  
2959 Canadian REB must satisfy itself that the requirements of this Policy are met, both within the  
2960 Canadian institution and within the host country or site, taking appropriate steps to ensure they  
2961 are responsive to ethically relevant aspects of the research context.

2962 **Article 8.4** (a) Subject to Article 8.4(b), research conducted under the auspices of a  
2963 Canadian research institution and conducted outside its jurisdiction, whether  
2964 elsewhere in Canada or outside Canada, shall undergo prospective ethics  
2965 review both by the research ethics board (REB) at the Canadian institution  
2966 under whose auspices the research is being conducted and by the REB or  
2967 similar body, where such exists, at the collaborating institution(s) in the host  
2968 research site.

2969 (b) Where research conducted under the auspices of a Canadian research  
2970 institution and performed in whole or in part outside Canada is covered by  
2971 an ethics review model involving multiple institutions or REBs consistent  
2972 with this Policy, the terms of that model apply.

2973 **Application** An institution is responsible for the ethical conduct of research undertaken by its  
2974 faculty, staff or students regardless of where the research is conducted (see  
2975 Article 6.1). Thus, for a Canadian research institution, review of the research by  
2976 the institution’s REB is required in addition to review by an REB having  
2977 jurisdiction at the research site in the host country or elsewhere in Canada,  
2978 where such exists. Approval of a research proposal by an REB at the host  
2979 research site does not constitute sufficient authorization to conduct the research  
2980 without the approval of the relevant Canadian REB(s). Conversely, approval by  
2981 the Canadian REB(s) is not sufficient warrant to begin the research without the  
2982 approval of the REB or other appropriately constituted review body at the host  
2983 site.

2984 In some cases, researchers undertake research in Canada or abroad without  
2985 seeking formal collaboration with other academic institutions. In such cases, in  
2986 addition to the REB review at their own institution, researchers may need to  
2987 obtain access to the site and prospective participants from a responsible agency,  
2988 where such exists. They should inform the REB whether or how they will seek  
2989 permission to proceed with the research at that site and with the target research  
2990 participants. Some organizations or groups have established mechanisms or  
2991 guidelines (e.g., school boards, Aboriginal communities, correctional services,  
2992 service agencies and community groups) to review requests for research prior to  
2993 allowing access to their members or individuals, or access to data about them,  
2994 under their authority. When designing their research, researchers should  
2995 consider such provisions. This article does not apply to research using critical

2996 inquiry about organizations or institutions. (See Article 3.6 in Chapter 3 [“Free  
2997 and Informed Consent”].)

2998 In other cases, no such provisions or requirements exist. Researchers should  
2999 inform the REB about the absence of any other review mechanisms available  
3000 at the research site. In such cases, researchers and REBs should apply the  
3001 core principles outlined in this Policy.

3002 Some countries have not established formal ethics review mechanisms for  
3003 some types of research. REBs should not prevent such research from  
3004 proceeding solely because the research cannot be reviewed and approved  
3005 through a formal REB review process in the foreign country. Under these  
3006 circumstances, researchers should be aware of relevant cultural practices,  
3007 such as those normally followed to seek entry into the relevant communities,  
3008 and be respectful of them.

3009 Researchers and REBs should afford the prospective participants no less  
3010 protection and respect than what this Policy requires. Respect for the welfare,  
3011 autonomy and equal moral status of all humans considered in the context of  
3012 the particular research project and setting should guide researchers in the  
3013 design of their research and REBs in their review.

3014 **Article 8.5** (a) Subject to Article 8.5(b), when conducting research outside the  
3015 jurisdiction of their home institution, whether at a site abroad or in  
3016 Canada, researchers should provide their home research ethics board(s)  
3017 (REBs) with:

- 3018 • the relevant information on the rules governing human research and  
3019 the ethics review requirements at the host site;
- 3020 • the names and contact information for the relevant REBs or  
3021 comparable ethics bodies, if known, that will review the proposal at  
3022 the host site; and
- 3023 • relevant information about the target populations and circumstances  
3024 that might have a bearing on the ethical review by the researcher’s  
3025 home REB.

3026 (b) Where a review model involving multiple institutions and REBs is in  
3027 place, the information to be provided to the home REB will be  
3028 determined by the provisions of that model.

3029 **Application** As Canada’s role in national and international research and research funding  
3030 continues to grow, researchers and REBs should be aware of the research ethics  
3031 requirements and the types of protection afforded to human research participants  
3032 in proposed research locations. Researchers and REBs should consult relevant  
3033 resources for details of policies and for appropriate REBs in the host country or

3034 research site in Canada (see References, below). Applicable policies at the  
3035 proposed site may differ considerably from this Policy, and therefore it is the  
3036 responsibility of the researchers and REB(s) to ensure that the provisions of this  
3037 Policy for the particular research project are followed at such sites, within the  
3038 host country or in Canada, at a minimum.

3039 Subject to Article 8.5 (b), disagreements may arise when one of the REBs or  
3040 equivalent review body (Canadian or foreign) grants approval while the other  
3041 does not. Such disagreements require open communication among the  
3042 investigator(s) and the REBs or equivalent review body involved. (See also  
3043 Section A [“Review Mechanisms for Research Involving Multiple Institutions  
3044 and Research Ethics Boards”], above.) In keeping with the context-sensitive  
3045 approach to research ethics review embodied in this Policy, the Canadian REB  
3046 should ensure that it has a clear understanding of the differing rationales that  
3047 might underlie divergent REB positions or decisions on a given proposal. Where  
3048 the REB is uncertain about the appropriate course of action in a given research  
3049 proposal, it should make contact with its counterpart REB in the host country.  
3050 The REBs should engage in dialogue and may even establish a specific  
3051 mechanism, such as a joint subcommittee of the two REBs (e.g., for situations in  
3052 which institutions collaborate regularly), to facilitate appropriate deliberation in  
3053 order to reach a thoughtful and well-informed judgment on a given research  
3054 proposal (see also Article 8.2).

3055 **C. Other Ethics Considerations When Reviewing Research**  
3056 **Conducted Outside the Jurisdiction of the REB**

3057 **Benefit Sharing and Obligations of Care for Research Participants and Communities**

3058 Researchers should consider the implications of the core principles for sharing the benefits of  
3059 the research. (See Chapter 1 [“Ethics Framework”] and Chapter 9 [“Research Involving  
3060 Aboriginal Peoples”].) They should be familiar with the social and economic circumstances in  
3061 the host site or country. As well, they should anticipate, to the best of their ability, obligations  
3062 of care that might arise in any given research proposal. In general, researchers should ensure  
3063 that any services or care necessary to complete a given study, or to respond effectively to any  
3064 foreseeable harms that may be experienced by research participants, are provided at the site of  
3065 the research. But researchers should also anticipate, and prepare to the best of their ability and  
3066 based on available resources, for demand for ancillary care that might arise in the course of the  
3067 research. Joint planning with local collaborators and/or advisors can help to clarify the most  
3068 likely nature of the ancillary care demand, as well as the most appropriate division of  
3069 responsibility for meeting it, where appropriate.

3070 Researchers should also be sensitive to the expectations and opinions of participants regarding  
3071 potential benefits of the research, and they should arrive at agreements with the community  
3072 about the scope and nature of the benefits that will be provided to participants and/or their  
3073 communities during and after the research. The agreements should, to the extent possible, be  
3074 explicit about the planned division of responsibilities for realizing these benefits. In many



3075 cases, benefits may be delivered most effectively in partnership with local organizations.  
3076 Benefit sharing may, for example, take the form of information sharing, training for local  
3077 personnel both in the host country and in Canada, or health care or similar services. Where  
3078 applicable, these benefit-sharing agreements, whether formal or informal, should be submitted  
3079 to the Canadian REB and the REB of the host site or country for review. Since researchers are  
3080 not aid agencies, REBs should be vigilant to ensure that the proposed distribution of benefits is  
3081 fair, without imposing undue burdens on the researcher that would make it too difficult or  
3082 costly to complete the research reliably.

3083 Researchers should pay special attention to cultural or other values that differ from their own.  
3084 They should also take care not to create unrealistic expectations among participants with  
3085 respect to the potential benefits of the research.

3086 Researchers should normally provide copies of publications or other research reports arising  
3087 from the research to the institution or organization – normally the host institution – that is best  
3088 suited to act as a repository and disseminator of the results within the participating  
3089 communities. This may not be necessary in countries when the results are readily available in  
3090 print or electronically.

### 3091 **Protection of Research Participants in Authoritarian Countries**

3092 Various international conventions and treaties have espoused the position that researchers  
3093 should be permitted free movement across national boundaries to conduct their research.  
3094 REBs should, therefore, not veto research about authoritarian countries on the grounds that  
3095 the regime or its agents have not given approval for the research project or have expressed a  
3096 dislike of the researchers. REBs should, however, legitimately concern themselves with the  
3097 safety of research participants and the security of research materials. (See Article 3.12 in  
3098 Chapter 3 [“Free and Informed Consent”]. When copies of field material are provided to  
3099 participants in countries with authoritarian regimes, researchers should concern themselves  
3100 with commitments concerning anonymity and confidentiality of participants to ensure that  
3101 human rights of the participants and the ethical principles set out in this Policy are not  
3102 compromised. (See Articles 5.1 - 5.4 in Chapter 5 [“Privacy and Confidentiality”].)

### 3103 **Risks to Researchers**

3104 Researchers undertaking research in other countries may be exposed to risks of harm. They  
3105 should consult the appropriate bodies within their institutions and abroad who may provide  
3106 advice on conditions in other countries prior to starting the research.

3107 In fulfilling their review role, REBs have access to details of the context within which the  
3108 research takes place in other jurisdictions and countries, and which may raise safety  
3109 concerns for the researcher. In those cases, and while it is not a formal part of their  
3110 responsibilities, REBs may raise such concerns as part of their communication to the  
3111 researchers of the results of the ethics review, and the REB should flag such concerns with  
3112 the institution.

3113 **References**

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- 3114 • Office for Human Research Protections (OHRP), International Compilation of  
3115 Human Subject Research Protections.  
3116 • ———, REB FWA Registry. <http://ohrp.cit.nih.gov/search/asearch.asp#ASUR> .

# Chapter 9

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## RESEARCH INVOLVING ABORIGINAL PEOPLES

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### A. Interpreting the Ethics Framework in Aboriginal Contexts

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This chapter interprets how the value of respect for human dignity and the core principles of concern for welfare, respect for autonomy and equal moral status of all humans, as articulated in Chapter 1 (“Ethics Framework”), apply in varied contexts of research involving Aboriginal peoples, including First Nations, Inuit and Métis.

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Ethical codes to protect human dignity have historically been concerned with the well-being of individual participants, interpreted in this Policy as concern for participants’ physical and mental health. Concern for welfare includes individual well-being, but broadens the focus of ethics to consider individuals imbedded in relationships in their physical, social, economic and cultural environments. This Policy acknowledges the important role of Aboriginal communities, particularly those that exercise local or regional governing authority, in promoting collective interests that also serve individual well-being. The Policy also directs attention to ethical protections for the autonomy of individual members within communities and to the interests of urban and other Aboriginal populations who may not have formal representation in an Aboriginal governance structure.

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Communities are particularly concerned that research should enhance their capacity to maintain their cultures, languages and identities as distinct peoples and to facilitate their full participation in Canadian society. The interpretation of welfare and the balance between concern for individual well-being and broader concerns for collective welfare may therefore differ significantly in an Aboriginal context, as compared with more individualistic social situations.

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Where the social, cultural or linguistic distance between the community and researchers from outside the community is significant, the potential for misunderstanding is likewise significant. Engagement between the community involved and researchers, initiated prior to the actual research activities and maintained over the course of the research, can enhance ethical practice and the quality of research by promoting mutual trust and communication, establishing mutually beneficial research goals, and ensuring that the conduct of research is respectful of the well-being of individuals and the welfare of the collective, as understood by all parties involved.

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Respect for autonomy is expressed principally through securing the voluntary, informed consent of research participants. First Nations, Inuit and Métis concerns for their continuity as peoples with distinctive origins, identities and rights have led to the development of

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3151 ethical protocols to guide community–researcher relations. These protocols typically assign  
3152 decision-making authority to a body or bodies acting for the collective. Community  
3153 engagement in these situations, particularly when First Nations, Inuit or Métis communities  
3154 with local governments are involved, may take the form of formal approval of a research  
3155 undertaking. While such endorsement may be required to enable research, group approval is  
3156 not a substitute for consent by participating individuals. A key consideration for researchers,  
3157 research ethics boards (REBs) and participants is determining when voluntary, informed  
3158 consent of individuals is sufficient and when the welfare of the relevant group is implicated,  
3159 making community engagement a priority.

3160 Respect for the equal moral status of all humans is easily compromised when a serious  
3161 imbalance of power prevails between the researcher and participants. Resulting harms are  
3162 seldom intentional. In the case of Aboriginal peoples, abuses have historically included  
3163 appropriation of cultural property such as songs, stories and artifacts, devaluing of  
3164 Indigenous knowledge as primitive or superstitious, violation of community norms  
3165 regarding the use of human tissue and remains, and dissemination of information that  
3166 stigmatized whole communities. Affirmation of Aboriginal rights and respect for community  
3167 ethics codes and protocols are means to better ensure balance in the relationship between  
3168 researchers and participants and mutual benefit in researcher–community relations.

## 3169 **B. Ethical Concerns in Research Involving Aboriginal Peoples**

3170 Aboriginal peoples have rights and interests that deserve recognition and respect by the  
3171 research community. The articulation of ethics guidelines for research involving Aboriginal  
3172 peoples is situated in a broader movement transforming the relationship between Aboriginal  
3173 peoples and Canadian society. Research has a critical role to play in creating the knowledge  
3174 base for mutually respectful relationships and full participation in Canadian life, with all its  
3175 responsibilities and benefits.

3176 The Aboriginal and treaty rights of Aboriginal peoples, including First Nations, Inuit and  
3177 Métis peoples, were recognized and affirmed in the *Constitution Act, 1982*, creating an  
3178 obligation on public institutions to acknowledge and support the desire of Aboriginal  
3179 peoples to maintain their collective identity and the continuity of their cultures. This  
3180 affirmation marks a break with Canada’s colonial past, in which the goal of public policy  
3181 was to absorb Aboriginal peoples into Euro-Canadian society and erase their distinctive  
3182 identities.

3183 Research conducted ethically can benefit Aboriginal people and communities. However,  
3184 intrusive or insensitive research can contribute to negative stereotypes of Aboriginal  
3185 peoples, as well as inaccurate perceptions of research and researchers in Aboriginal  
3186 societies. In the past, research concerning Aboriginal peoples has usually been initiated  
3187 outside the Aboriginal community and carried out by non-Aboriginal personnel. Aboriginal  
3188 people have had little opportunity to correct misinformation or to challenge ethnocentric and  
3189 racist interpretations. In light of such experience, many Aboriginal people feel apprehensive  
3190 about the activities of researchers.

3191 First Nations, Inuit and Métis communities and organizations are assuming an increasingly  
3192 active role in defining how they will relate to external researchers and sponsoring  
3193 institutions. Community initiatives are grounded in the assertion of inherent Aboriginal  
3194 rights and go beyond protective measures to ensure that research does no harm. They  
3195 propose participation as partners in all phases of research to protect their cultural heritage, to  
3196 ensure that their knowledge systems and understandings of the world are authentically  
3197 reflected in research practice, and to secure equitable distribution of benefits between  
3198 researchers and participant communities.

3199 Cultural heritage may include artifacts, cultural property, collective knowledge and skills, and  
3200 other intangibles that are transmitted from one generation to the next, such as folklore,  
3201 customs, representations or practices. International instruments such as the United Nations  
3202 Declaration on the Rights of Indigenous Peoples have helped to raise awareness of the  
3203 substance of cultural heritage, the risks of misappropriation, and ethical obligations to respect  
3204 and conserve the integrity of Indigenous knowledge systems.

3205 Aboriginal or Indigenous knowledge is usually described as holistic, involving body, mind,  
3206 feelings and spirit. Knowledge is specific to place, transmitted orally and rooted in the  
3207 experience of multiple generations. Indigenous knowledge is expressed in symbols, arts,  
3208 ceremonial and everyday practices, narratives and, most especially, in relationships. Indigenous  
3209 peoples value their relationship with the land as a living entity that reveals the way of right  
3210 living. Indigenous knowledge has gained recognition as a resource of potential benefit to  
3211 modern society – for example, through traditional techniques of sustaining environmental  
3212 systems in balance with human usage or knowledge of plant life for agricultural, medicinal and  
3213 cosmetic purposes. Commercialization of Indigenous knowledge without benefit to  
3214 communities from which the knowledge originated has prompted efforts to protect the interests  
3215 of holders of Indigenous knowledge.

3216 Aboriginal peoples in Canada encompass great diversity. First Nations, Inuit and Métis  
3217 representatives declare that the term “Aboriginal” glosses over the distinctions among them, as  
3218 peoples with their own histories, cultures and languages. Communities may be large and  
3219 urbanized or small and isolated. They may be relatively close to a traditional, land-based way  
3220 of life or integrated in a market economy. Governance may be exercised by a First Nation band  
3221 council, an Inuit hamlet council, a Métis settlement council or a regional authority. First  
3222 Nation, Inuit and Métis people who reside off a reserve, land claim territory or settlement now  
3223 make up the majority of the Aboriginal population of Canada. They do not ordinarily have a  
3224 governance or administrative structure to represent their interests. Communities are also  
3225 becoming more diverse internally, as a result of formal education, employment, mobility and  
3226 intermarriage with non-Aboriginal persons.

3227 In light of ethical obligations to respect the rights of Aboriginal peoples as expressed in  
3228 community codes and protocols; the local variations in cultural heritage and Indigenous  
3229 knowledge; and the diversity among and within First Nation, Inuit and Métis communities,  
3230 researchers should seek culturally informed advice appropriate to the context when their work  
3231 involves Aboriginal participants.

3232 **C. Applying Provisions of this Policy in Aboriginal Contexts**

3233 This Policy provides guidance on issues that have been raised frequently in public  
3234 consultations on revision of the original version of this Policy (1998), in the CIHR  
3235 *Guidelines for Health Research Involving Aboriginal People* (2007), and in community  
3236 protocols and ethics codes. The development of policy applications has also been informed  
3237 by international dialogue that increasingly acknowledges the unique interest that Aboriginal  
3238 peoples have in ensuring accurate and informed research concerning their heritage, customs  
3239 and communities.

3240 Applying this Policy in a way that accommodates the diversity of Aboriginal cultures and  
3241 communities is complex. The fit between community protocols and institutional policies  
3242 may be unclear, requiring researchers to adapt conventional practice or broker agreements.  
3243 Multiple geographic communities or an urban community of interest engaged in research  
3244 may not have representative bodies to provide guidance to researchers. Researchers and  
3245 REBs are reminded that ethical judgment must be attentive to the specific context of a  
3246 proposed project. Researchers and REB members unfamiliar with the changing context of  
3247 Aboriginal research are advised to consult reference documents that provide a fuller  
3248 exploration of the concerns cited in this chapter.

3249 **D. Research Processes and Ethics Review**

3250 **When Articles in this Chapter Apply**

3251 **Article 9.1** Researchers and research ethics boards should consider whether application  
3252 of the core principles of this Policy require interpretation or adaptation in the  
3253 context of proposed research involving Aboriginal participants, to  
3254 demonstrate respect for Aboriginal rights and cultural heritage, the integrity  
3255 of Indigenous knowledge systems, and the diversity among and within  
3256 Aboriginal communities.

3257 **Application** Protections for human research participants set out in this Policy apply to  
3258 research involving Aboriginal people, with the provision that application of  
3259 the principles and requirements may require interpretation or adaptation, in  
3260 situations such as the following:

3261 (a) Research is conducted on a defined First Nation territory, Inuit land  
3262 claims territory or Métis settlement;

3263 (a) The analysis of the research data will use Aboriginal identity or  
3264 membership in an Aboriginal community as a variable;

3265 (a) The research involves cultural property, Indigenous knowledge, or input  
3266 from an Aboriginal community;

3267 (a) There is a reasonable expectation that the research population will include  
3268 a significant number of Aboriginal individuals;

3269 (a) Recruitment criteria include Aboriginal identity as a factor for the entire  
3270 study or for a subgroup in the study;

3271 (a) The research question is concerned with Aboriginality or membership in  
3272 a formal or informal Aboriginal community, or with characteristics of the  
3273 community; or

3274 (a) The interpretation of the research results will refer to Aboriginal peoples,  
3275 language, history or culture.

3276 In some primary research, Aboriginal identity of participants may become  
3277 known only at the point of conducting the research. In such cases, researchers  
3278 will need to consult with individuals providing data to determine whether  
3279 cultural accommodations, such as access to a culturally informed advisor or  
3280 linkage with a community, are appropriate.

3281 **General Requirement to Inform REBs on Community Engagement**

3282 **Article 9.2** In research proposals involving one or more Aboriginal communities or a  
3283 significant number of Aboriginal participants, researchers shall inform the  
3284 research ethics board of how they have engaged or intend to engage the  
3285 community in approving, advising on or managing the project. The nature  
3286 and extent of community engagement should be appropriate to the type of  
3287 community and proportionate to the level of Aboriginal involvement in the  
3288 research.

3289 **Application** First Nation, Inuit, Métis, urban and rural communities differ significantly  
3290 from one another, and they are characterized by increasing internal diversity.  
3291 Engagement with the relevant community throughout the research process is  
3292 the preferred means of ensuring that the ethical protections incorporated in a  
3293 project respect the identities, interests and circumstances of participants. In  
3294 the following examples, List A illustrates degrees of Aboriginal involvement  
3295 in a variety of research projects and List B gives examples of community  
3296 engagement proportionate to the level of Aboriginal involvement in each type  
3297 of project cited.

3298 *List A: Examples of Aboriginal involvement*

3299 1. Research directly involving a defined Aboriginal community with formal  
3300 leadership. Example: a project that examines the incidence of diabetes in  
3301 Pond Inlet.

3302 2. Research involving Aboriginal people who comprise a sizable proportion  
3303 of the study or community and where Aboriginal-specific conclusions are  
3304 intended. Example: a comparative study of access to public housing in  
3305 Prince Albert, Saskatchewan.

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3. Research involving Aboriginal people who are part of a larger community (regardless of their proportion) that is the subject of research, and where Aboriginal-specific conclusions are anticipated. Example: a study of student retention in high schools in the Sault Ste. Marie district of Ontario.
- 3311  
3312  
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4. Research involving Aboriginal people who comprise a sizeable proportion of the larger community that is the subject of research even if no Aboriginal-specific conclusions will be made. Example: research on employment development programs serving residents of Winnipeg's inner city.
- 3316  
3317  
3318  
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5. Research that may incidentally involve a small proportion of Aboriginal individuals but is not intended to single out or describe characteristics of Aboriginal people in the study. Example: a study of the effectiveness of therapies to control high blood pressure in a sample of hospital out-patients.
- 3321  
3322  
3323  
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6. Natural sciences research on First Nation or Inuit territories where Aboriginal people may act as co-investigators or benefit from findings. Example: research on contaminants in sources of country food in northern Quebec.

3325 *List B: Examples of proportionate community engagement*

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3329
1. Permission of the land claims organization that carries authority to approve research in Nunavut is required. Agreement of the hamlet council in Pond Inlet will normally be a condition of approval. The local health committee may co-manage the project.
- 3330  
3331  
3332
2. The tribal council representing local First Nation communities may partner with the Prince Albert city council to sponsor, implement and use the results of the housing study.
- 3333  
3334  
3335  
3336
3. A committee to advise the District Board of Education and the researchers conducting the retention study may be convened, representing First Nations, Métis organizations and urban Aboriginal people whose children are affected.
- 3337  
3338  
3339  
3340
4. Aboriginal service agencies may be engaged to help recruit Aboriginal participants and secure community representation on an oversight committee, to ensure cultural sensitivity in collecting and interpreting data on employment program impacts.
- 3341  
3342  
3343
5. If Aboriginal individuals self-identify during the collection of primary data in the blood pressure study, researchers should inquire whether culturally appropriate assistance is desired to interpret or support



3344 compliance with protocols. Since Aboriginal participation is incidental  
3345 rather than scheduled, informing the REB is not required. However, it  
3346 should be noted that including markers of Aboriginal identity in data may  
3347 reveal anomalies that warrant further, more targeted, research.

3348 6. Research that involves the collection and analysis of tissue samples from  
3349 animals and does not involve human participants does not require REB  
3350 review under provisions of this Policy. Inuit and First Nations protocols  
3351 may, nevertheless, require regional and local permission and reporting of  
3352 findings to communities on whose traditional territories the research takes  
3353 place and who may benefit from the research.

3354 The evidence of community engagement in a project may vary from a formal  
3355 agreement setting out terms of co-management, to verbal approval of the  
3356 proposed research in a group setting (which should be recorded), to informal  
3357 advice from an ad hoc committee. Where a researcher has an ongoing  
3358 relationship with a community, a letter or equivalent evidence of  
3359 endorsement by a relevant leader or authority may signal approval to proceed  
3360 with the research.

3361 Communities vary widely in the level of human and material resources they  
3362 have available to collaborate with research initiatives. First Nation  
3363 communities have gone furthest in developing bodies to provide ethics  
3364 oversight. Inuit land claims organizations have the authority to oversee  
3365 research but have limited personnel available to fill the technical and  
3366 professional roles in research implementation. Small, remote communities  
3367 and urban populations have the most limited organizational resources to  
3368 advise or collaborate in research. The least organizationally developed  
3369 communities are the most vulnerable to exploitation and should be supported  
3370 in expanding their capacity to participate rather than suffering dilution of  
3371 ethical safeguards.

3372 Where Aboriginal participants or communities do not designate an  
3373 organization or individuals to represent their interests, the responsibility for  
3374 securing culturally informed advice on ethical protections rests with the  
3375 researcher or the sponsoring institution.

3376 Research involving multiple Aboriginal communities may adopt varied  
3377 models of community engagement. Regional bodies or national organizations  
3378 such as the Mi'kmaq Ethics Watch in Nova Scotia or the Assembly of First  
3379 Nations provide guidance on research and ethics for constituent communities.  
3380 Review and endorsement of a research initiative by such an organization may  
3381 facilitate but not substitute for local engagement.

3382 Historical, genealogical or analytical research that does not collect data from  
3383 living persons is not ordinarily subject to REB review. Findings of such  
3384 research nevertheless may have an impact on the identity or heritage of

3385 persons or communities. Seeking advice to ensure that cultural perspectives  
3386 are acknowledged would constitute good practice.

3387 **Research on First Nations, Inuit or Métis Territory Requires Consultation**  
3388

3389 **Article 9.3** Where a proposed research project is to be conducted on territory where a First  
3390 Nation or Métis government has authority or on territory included in an Inuit  
3391 land claim settlement, researchers are required to consult with formal leaders of  
3392 the territory or administrators of the settlement agreement, except as provided  
3393 under Articles 9.7 and 9.8.

3394 **Application** Community engagement is set out as a basic expectation in research involving  
3395 Aboriginal participants and communities (Article 9.2, above). Where Aboriginal  
3396 authorities exercise jurisdiction over designated territory provisions of Article  
3397 8.4 in Chapter 8 (“Multi-jurisdictional Research”) may also apply, requiring  
3398 ethics review of research proposals “by the REB or similar body, where such  
3399 exists, at the collaborating institution(s) in the host research site.”

3400 Representative Inuit organizations have mandates under land claims agreements  
3401 to review, approve and monitor research conducted on their territories. Many  
3402 First Nations have adopted ethical codes and research protocols as an expression  
3403 of self-determination and an inherent right to self-government, which has been  
3404 recognized in federal government policy. National bodies such as the First  
3405 Nations Information Governance Committee of the Assembly of First Nations  
3406 and regional bodies such as the Mi’kmaq Ethics Watch provide guidance on  
3407 ethical practices but defer to local communities to make decisions on endorsing  
3408 research activities.

3409 Mail-out, telephone and Internet surveys to poll members on First Nation or  
3410 Inuit territories are subject to the same requirements of community engagement  
3411 and ethics review as are other forms of research involving Aboriginal peoples.

3412 While the legal basis for governance of research may vary depending on the  
3413 community, the practical requirement of engaging community leaders and the  
3414 ethical obligation to respect community views on well-being and welfare remain  
3415 consistent.

3416 **Article 9.4** Researchers are required to obtain free, and informed consent of individual  
3417 participants in research projects involving Aboriginal people, in accordance  
3418 with provisions of Chapter 3 (“Free and Informed Consent”) and in addition  
3419 to group engagement, where appropriate.

3420 **Application** In no case is community or organizational agreement a substitute for  
3421 individuals’ informed consent to participate in a research project. Researchers  
3422 should be sensitive to the possibility that an individual’s decision to

3423 participate or withhold participation in research may be constrained by group  
3424 influence. While conformity to the group may be by choice, any undue  
3425 influence on the exercise of autonomy should be mitigated where possible.

3426 **Respect for Community Ethics Codes and Protocols**

3427 **Article 9.5** Where prospective participants signify that a community ethics code or  
3428 protocol is in effect, researchers and research ethics boards shall take into  
3429 consideration the code or protocol that applies in the territory or organization.  
3430 The similarity, divergence or overlap of such code or protocol with this Policy,  
3431 and clarification of mutual expectations, should be considered by all parties in  
3432 advance of launching a particular project.

3433 **Application** Where communities indicate that they endorse a particular ethics code or  
3434 research protocol, or when individuals participate in research as members of a  
3435 community or organization adhering to such protocols, researchers and REBs  
3436 should take into consideration the code or protocol that applies in the territory or  
3437 organization and seek to harmonize any differences that may arise between that  
3438 code or protocol and this Policy.

3439 Many First Nations communities across Canada have adopted an ethics code  
3440 identified by the principles of ownership, control, access and possession  
3441 (OCAP), which asserts ownership, control, access and possession of research  
3442 processes affecting them. The principle of ownership asserts that a community  
3443 or group owns information collectively in the same way that an individual owns  
3444 personal information and that the community or group can therefore choose to  
3445 share it (or not) under conditions that they specify. The principle of control  
3446 asserts that First Nations peoples, their communities and representative bodies  
3447 have a right to control all aspects of research and information management  
3448 processes that affect them. Control can extend to all stages of a research project,  
3449 from conception to completion. The principle of access asserts that First Nations  
3450 peoples must have access to data about themselves and their communities  
3451 collected in the course of research, and they have a right to make decisions  
3452 regarding access by others to their collective information. Possession of data  
3453 need not be exercised at the local level. In the case of the Regional Longitudinal  
3454 Health Survey funded by Health Canada and administered by First Nation  
3455 agencies, communities typically delegate stewardship of data to a regional  
3456 organization that has adequate infrastructure to manage confidential personal  
3457 data. OCAP principles together represent assertion of self-determination applied  
3458 to research.

3459 Inuit Tapiriit Kanatami, which represents four Inuit regions, has published a  
3460 guide for negotiating research relationships with Inuit communities.

3461 Métis communities, women's groups and urban organizations aspire to  
3462 assume a larger role in research affecting their members, but development of

3463 these research protocols is at an earlier stage. Without a land base or official  
3464 recognition of service entitlements, these sectors of the Aboriginal  
3465 community generally are limited to project-based funding for research and  
3466 similarly limited opportunities to develop policy on research.

3467 Community review of research may have distinct purposes and procedures,  
3468 and it will not replace REB review within institutions supporting particular  
3469 projects. Having reference to parallel codes and protocols in institutions and  
3470 communities is likely to pose questions of which code should prevail when  
3471 expectations and/or requirements diverge. Maintaining respectful  
3472 relationships will be dependent on all partners being prepared to reflect on  
3473 what is essential to achieving common goals and on what degree of flexibility  
3474 is consistent with their core values.

3475 **Article 9.6** Researchers should consider entering into research agreements with those  
3476 Aboriginal communities who have adopted ethics codes or protocols, as a means  
3477 of clarifying and confirming mutual expectations and commitments between  
3478 researchers and communities.

3479 **Application** Research agreements serve as a primary means of clarifying and confirming  
3480 mutual expectations and commitments between researchers and communities.  
3481 Expanding on information normally provided to an individual participant (see  
3482 Article 3.2), agreements typically set out the purpose of the research and  
3483 detail mutual responsibilities in project design, data collection and  
3484 management, analysis and interpretation, production of reports and  
3485 dissemination of results.

3486 The level of community engagement desired and achieved will depend on the  
3487 organizational infrastructure in place in the community or group and the  
3488 willingness and capacity of all parties to develop the necessary supports for  
3489 shared direction and responsibility. Particularly in First Nations and Inuit  
3490 communities, collective endorsement of research initiatives has become a  
3491 standard requirement. Such agreements are increasingly being recognized by  
3492 academic institutions and the researchers associated with them as providing  
3493 reference points for ethics review and approval on such elements as consent  
3494 and confidentiality. Agreements that specify procedures for community ethics  
3495 review, included as part of the institutional ethics application, can provide  
3496 contextual information and guidance for REBs conducting initial review of  
3497 applications and continuing ethics review throughout the project.

3498 **Community Engagement at Variance with Operative Protocols**

3499 **Article 9.7** Where alternatives to community, regional or organization protocols are deemed  
3500 necessary to ensure the inclusion or safety of participants or the achievement of  
3501 research objectives, the researcher shall describe such alternatives and provide a  
3502 rationale to the research ethics board for pursuing them.

3503 **Application** While protocols under the authority of formal leaders, such as chiefs and  
3504 band councils or hamlet councils, generally serve community interests, First  
3505 Nation, Inuit and Métis communities are far from homogeneous. Diverse  
3506 communities of interest often co-exist within geographic communities, and  
3507 formal leaders may not be the appropriate persons to act on their behalf.

3508 In the case of traditional leadership structures or sacred societies, legitimate  
3509 channels to endorse group participation exist. Examples are the Confederacy  
3510 Council of the Haudenosaunee, whose authority derives from the Great Law  
3511 of the Iroquois rather than the *Indian Act*, or sacred societies of the Blackfoot,  
3512 which are recognized as the authorities with respect to their knowledge.  
3513 REBs should respect such leadership structures when reviewing the consent  
3514 process and procedures in research proposals.

3515 In the case of persons or groups that may be vulnerable within communities,  
3516 alternative avenues for engaging participation may be more appropriate. For  
3517 example, women taking action against domestic violence have encountered  
3518 opposition from some community leaders and so may not have access to  
3519 formal approval of research to improve their safety, well-being or welfare.  
3520 Alienated youth may not trust that their voices will be respected if official  
3521 leadership is involved in approving the research.

3522 Where divergent group interests within a community appear to be in conflict,  
3523 problem-solving on site will be required to avoid deepening divisions or  
3524 increasing the vulnerability of groups and individuals. The good offices of  
3525 trustworthy persons who have moral authority in the community can often be  
3526 enlisted to find ways to proceed with research that preserves respect for all  
3527 parties. However, in some cases the risks involved simply outweigh the  
3528 benefits to be derived from proceeding with the research.

3529 Where alternatives to seeking approval of formal leaders are to be pursued,  
3530 researchers should provide a rationale and document the nature of the process  
3531 to be followed.

3532 **Critical Inquiry**

3533 **Article 9.8** Research that critically examines the conduct of public institutions or persons in  
3534 authority may do so ethically, notwithstanding the usual requirement, in research  
3535 involving Aboriginal peoples, of engaging representative leaders. In such cases  
3536 care should be taken to ensure sensitivity to culture and community contexts.

3537 **Application** The general provision that guidance for ethical conduct of research should be  
3538 obtained through engagement with the relevant community should not be a  
3539 bar to critical inquiry in which the objective may be to uncover unjust or ill-  
3540 conceived behaviour on the part of public institutions or persons in authority.  
3541 Considerations in conducting critical inquiry are discussed more fully in  
3542 Article 3.6 of Chapter 3 (“Free and Informed Consent”).

3543 As in the case of research involving vulnerable subgroups within an  
3544 Aboriginal community, critical inquiry will require creative approaches to  
3545 ensure cultural appropriateness and integrity of the research. The Sisters in  
3546 Spirit project of the Native Women’s Association of Canada (NWAC)  
3547 illustrates successful mounting of research that incorporates a critical  
3548 dimension and multiple ways of validating goals and methods of the research.

3549 The Sisters in Spirit Project is national in scope, interviewing the families of  
3550 missing and murdered Aboriginal women in urban and rural settings, on and  
3551 off First Nations territory. The purpose is to document the experience of the  
3552 disappeared women and their families to effect policy change and improve  
3553 the safety and well-being of Aboriginal women in Canada. The research is  
3554 funded by Status of Women Canada and has been endorsed by resolution of  
3555 the Assembly of First Nations. NWAC assumes responsibility for monitoring  
3556 the ethical conduct of its researchers. The project examines, among other  
3557 matters, the adequacy of public institutions and services to protect the  
3558 women’s well-being and support families in their efforts to deal with their  
3559 losses. NWAC acts as its own ethical review body, builds on its established  
3560 moral authority to investigate sensitive matters, welcomes endorsement by a  
3561 national political organization, engages the cooperation of regional health  
3562 directors where available, and informs local authorities of the presence of its  
3563 researchers on First Nations territory.

3564 **Privacy and Confidentiality**

3565 **Article 9.9** In the context of community-based research collaboration, researchers,  
3566 research ethics boards and community partners should consider early in the  
3567 design of the research how community protocols on data custody and  
3568 confidentiality fit with provisions for privacy set out in Chapter 5 (“Privacy  
3569 and Confidentiality”) in order to resolve any inconsistencies.

3570 **Application** Researchers should inform communities and individuals what arrangements  
3571 are made in partnered research to respect privacy of individuals and  
3572 communities.

3573 Privacy and confidentiality of identifiable personal and community  
3574 information may be affected in some First Nation communities by application  
3575 of the principles of ownership, control, access and possession (OCAP) (see  
3576 definition under Article 9.5). Negotiation of research agreements permits  
3577 Aboriginal parties and academic researchers to explore the practical  
3578 implications of the OCAP principles in First Nation communities or  
3579 comparable principles operative in Inuit and Métis communities, to reach  
3580 mutual accommodations. Where research agreements provide that  
3581 community partners will have limited or full access to identifiable personal  
3582 data, the consent of participants to such disclosure shall form part of the  
3583 consent procedure.

3584 Many Aboriginal communities are small and characterized by dense networks  
3585 of relationships, with the result that anonymizing individual data is often not  
3586 sufficient to mask identities. Some Aboriginal research participants are  
3587 reluctant to speak to interviewers from their own community because of  
3588 privacy concerns. Other participants, in qualitative studies or life histories,  
3589 may wish to be acknowledged individually for their contributions.  
3590 Communities themselves have distinguishing characteristics, which in some  
3591 cases have compromised efforts to disguise the site of research and led to the  
3592 communities' being stigmatized.

3593 The Regional Health Survey administered by regional First Nations  
3594 organizations has addressed the problem of balancing confidentiality and  
3595 access by having communities designate a regional organization to hold data  
3596 while local authorities make decisions on who can access the data and under  
3597 what conditions. In practice, the organization that serves as data steward  
3598 evaluates requests for information, and its recommendations to community  
3599 authorities have considerable influence.

3600 Privacy protections within the research context are evolving within the  
3601 federal granting Agencies, with attention to harmonization with federal,  
3602 provincial and territorial legislation. The Canadian Institutes for Health  
3603 Research has published *CIHR Best Practices for Protecting Privacy in  
3604 Health Research*. Accommodation of Aboriginal initiatives to maintain  
3605 access to data for community use, applying principles such as OCAP, will be  
3606 situated within the larger framework of law and policy to protect privacy.

3607 **Protection of Indigenous and Cultural Knowledge**

3608 **Article 9.10** Researchers should consider, and research ethics boards should review, whether  
3609 tangible or intangible cultural property of Aboriginal persons or communities is  
3610 at risk of misuse or misappropriation when collected in the context of research  
3611 involving Aboriginal participants or communities. Researchers should include  
3612 measures to mitigate such risks of misuse or misappropriation in the research  
3613 ethics review proposal.

3614 **Application** Researchers should negotiate with communities mutual understandings of  
3615 appropriate respect for cultural property including Indigenous knowledge, how  
3616 to proceed with community review of findings, terms of ownership of research  
3617 products, and any limits on publication of materials, including how intellectual  
3618 property rights to research products will be assigned: whether to community  
3619 sources, to researchers, or to both on a shared basis.

3620 REBs should review the measures researchers put in place to recognize and  
3621 protect Indigenous or local knowledge in the conduct of the project and the  
3622 dissemination of findings.

3623 Cultural property often does not fit the criteria of sole ownership, innovation  
3624 and representation in a tangible work that are necessary to claim protection  
3625 for intellectual property rights. National laws and international consensus on  
3626 these issues are evolving. The definitions of tangible and intangible cultural  
3627 property over which Indigenous peoples arguably have rights are broader  
3628 than the definitions of intellectual property protected under national law and  
3629 international agreements. Intangible cultural property, such as traditional  
3630 knowledge of the medicinal properties of plants or traditional clothing design,  
3631 that is collectively held is often regarded as “folk knowledge” that is  
3632 available in the public domain and that may be adapted through commercial  
3633 processes to produce marketable commodities without consent of the  
3634 originators.

3635 Researchers should afford the community an opportunity to react and respond  
3636 to research findings before the completion of the final report, in the final  
3637 report, or even in all relevant publications. (See Article 3.2 in Chapter 3  
3638 [“Free and Informed Consent”] on information disclosure.) Collaborative  
3639 research reports are regarded as a product of both community and researcher  
3640 contributions rather than the sole property of the researcher. Communities  
3641 consider that their review and approval of reports and academic publications  
3642 is essential to validate findings, protect against misinterpretation, and  
3643 maintain respect for Indigenous knowledge, which may entail limitations on  
3644 its disclosure. If disagreement arises between researchers and the community,  
3645 researchers should afford the group an opportunity to make its views known,  
3646 or they should accurately report any disagreement about the interpretation of  
3647 the data in their reports or publications.

3648 **Secondary Use of Data**

3649 **Article 9.11** Consistent with the general provisions set out in Chapter 5 (“Privacy and  
3650 Confidentiality), secondary use of data collected initially for other purposes,  
3651 from which personal identifiers have been removed, does not require research  
3652 ethics board (REB) review. Secondary use of data that is identifiable as  
3653 originating from a specific community, or a segment of the Aboriginal  
3654 community at large, requires REB review and may warrant seeking culturally  
3655 informed advice about protection of cultural property or representations of  
3656 Indigenous knowledge or society.

3657 **Application** The privacy of individual participants in research is normally protected by  
3658 removing information that would identify them personally. Anonymized data  
3659 are added to a data pool and are available for analysis and sometimes for  
3660 secondary use.

3661 As discussed in Chapter 5 (“Privacy and Confidentiality), access to data  
3662 containing identifiable personal information may be needed for some types of  
3663 research. For example, longitudinal studies require access to identifiable  
3664 information contained in data banks, although consent for additional studies



3665 was not obtained from original informants and it may be impractical to obtain  
3666 it subsequently. Such secondary usage requires REB review (see Articles 5.5  
3667 to 5.7 in Chapter 5 [“Privacy and Confidentiality”]), and the REB may allow  
3668 a waiver of consent under certain conditions (see Article 3.8).

3669 Misrepresentation of Aboriginal peoples, unauthorized use of data, and lack  
3670 of reporting to communities on research outcomes have created ongoing  
3671 sensitivity about secondary use of data collected for approved purposes. For  
3672 example, members of Nuu-chah-nulth communities in British Columbia  
3673 provided blood samples for research on rheumatic disease. They vigorously  
3674 protested use of the blood components for subsequent genetic research that  
3675 pronounced on their ancient origins and challenged traditional knowledge  
3676 about their identity. There are additional fears in First Nation communities  
3677 that general consent to use health data for purposes other than treatment will  
3678 facilitate unauthorized government surveillance.

3679 In light of sensitivity about harms ensuing from identification of  
3680 communities, potential misuse of cultural property or misrepresentation of  
3681 Indigenous knowledge when interpretation of data is no longer guided by  
3682 community representatives, secondary use of data identifiable as originating  
3683 from Aboriginal participants or communities should be subject to REB  
3684 review. Any constraints imposed on use of the data in the original project  
3685 should be noted if such information is available. Consistent with Article 5.6,  
3686 the researcher should propose to the REB an appropriate strategy for securing  
3687 agreement of the relevant individuals or group, or, if this is impossible or  
3688 impracticable, there should be consultation with one or more organizations  
3689 that are likely to represent the views and interests of the original participants.

3690 **Benefits of Research**

3691 Community benefit may include relevant knowledge, evidence-based policy and social  
3692 interventions, and increased capacity to conduct partnered or autonomous research. In most  
3693 research relationships, a primary benefit sought by communities is increased capacity to  
3694 conduct autonomous research that can more readily be conducted in Aboriginal languages  
3695 and oral modes. Autonomous research would enhance the exploration, articulation and  
3696 application of Indigenous knowledge in its own context, with translation to other contexts  
3697 following a parallel process. Articles 9.12 and 9.13 specify benefits that may accrue in the  
3698 context of partnerships between Aboriginal communities and external researchers. (See  
3699 reference to benefit-sharing in Section B of Chapter 1 [“Ethics Framework”].)

3700 **Article 9.12** Communities should have access to data important to their own planning and  
3701 development processes, with protections for privacy and confidentiality of  
3702 personal data as noted in this chapter.

3703 **Application** Communities participating in research place a high priority on access to  
3704 research data that will allow them to address pressing issues through  
3705 community-generated policies, programs and services. Divergence between

3706 community priorities and provisions of this policy should be the subject of  
3707 negotiation and agreement at initial stages of the research.

3708 **Article 9.13** Researchers should endeavour, where appropriate and possible, to share costs  
3709 and benefits of research equitably between researchers, institutions and  
3710 Aboriginal communities, including personnel and administrative costs of  
3711 collaborating in ethics review and project oversight.

3712 **Application** Aboriginal people also seek to share in the benefits of research activities  
3713 themselves in the form of direct research grants, overhead levies on shared  
3714 projects, and commercialization of research discoveries. In recent times,  
3715 community-based projects have made provisions for sharing grant resources  
3716 with community partners. Elders are now being recognized in research  
3717 proposals and grant applications as providing access to community networks,  
3718 ethical guidance to researchers, and advice in interpreting findings in the  
3719 context of traditional knowledge. Advice from the community will be  
3720 valuable in determining appropriate compensation for the time of participants  
3721 and observance of conventions of gift-giving or feasting that are important to  
3722 successful collaboration with communities. Employing Aboriginal research  
3723 assistants and translators is already common practice in community-based  
3724 projects. Implementing a rational program of training to enhance autonomous  
3725 research initiatives is less common.

3726 Direct and indirect costs of collaborative, community-based research are  
3727 cited by researchers and Aboriginal agencies as impediments to community  
3728 engagement as endorsed in this Policy. Such costs are sometimes offset by  
3729 securing in-kind contributions from service-oriented programs engaged with  
3730 the same population – for example, counselling and shelter programs serving  
3731 urban Aboriginal youth participating in a project. The obligation to reach  
3732 agreement on ethical safeguards for participants in such cases extends to third  
3733 parties.

3734 Direct funding to community entities conducting research is anticipated in  
3735 some current programs, although the requirement for ethics review is still met  
3736 through researcher affiliation with institutions adhering to this Policy,  
3737 collaborating with the community organizations.

3738 **Human Genetic Research**

3739 Genetic researchers and their sponsors demonstrate a high level of interest in research  
3740 among Indigenous populations, especially those that are socially isolated and homogeneous.  
3741 Genetic research has potentially important implications for Aboriginal communities.  
3742 Particular considerations in ethics review of human genetic research are discussed in  
3743 Chapter 13 (“Human Genetic Research”). In such research involving Aboriginal peoples, the  
3744 provisions of Chapter 13 should be read in conjunction with the ethical safeguards set out in  
3745 the present chapter. Attention is directed specifically to the implications of genetic research  
3746 for communities, as specified in Article 13.7.

3747 **Research Involving Indigenous Peoples in Other Countries**

3748 Although the present chapter addresses research involving Aboriginal peoples in Canada,  
3749 researchers, REBs, research participants and the research community at large should  
3750 consider the principles articulated here in the context of research involving Indigenous  
3751 peoples in other countries or in research settings where collective decision-making is the  
3752 preferred procedure supporting individual consent for research participation. For  
3753 considerations that apply to research conducted in another country, see Sections B and C in  
3754 Chapter 8 (“Multi-jurisdictional Research”).

3755 **REB Review**

3756 **Article 9.14** Research ethics boards (REBs) reviewing research involving Aboriginal  
3757 participants and communities on a recurring basis should ensure that they have  
3758 access to relevant expertise within regular REB membership, through ad hoc  
3759 consultation with knowledgeable academic and community advisors, or through  
3760 collaboration with community ethics review bodies.

3761 **Application** In accordance with Article 6.5 in Chapter 6 (“Governance of Research Ethics  
3762 Review”), an REB should have provisions for membership such that when  
3763 context-specific expertise is lacking for the review of particular research  
3764 proposals, ad hoc advisors are appointed. In cases where review of research  
3765 involving Aboriginal peoples is regularly required, the REB membership should  
3766 be modified to ensure cultural expertise within its regular complement.

3767 **Article 9.15** Researchers and research ethics boards should recognize that ethics review by  
3768 community bodies will often pursue purposes and apply criteria that differ from  
3769 the provisions of this Policy. It is therefore inappropriate to insist on uniformity  
3770 between community practices and institutional policies. The objective of  
3771 engagement between researchers and community entities should be to find  
3772 common ground, anticipate differences, and resolve conflicts that might  
3773 interfere with ethical protection of participants and achievement of research  
3774 goals.

3775 **Application** The express purpose of most Aboriginal community ethics codes is to ensure  
3776 relevance of research undertakings to community needs and priorities and  
3777 respect for Aboriginal identities, cultures and knowledge systems. While  
3778 community codes and institutional policies may share many goals, the  
3779 approaches to achieving those goals may differ significantly.

3780 The membership of community review bodies will not necessarily duplicate the  
3781 membership criteria set out in this Policy. In the context of scarce resources in  
3782 community organizations, the same personnel may be involved in reviewing the  
3783 ethics of a proposal and co-managing the research. An expectation that conflict  
3784 of interest will be managed by separating ethics review and project management  
3785 functions may impose unsupportable demands on small communities.  
3786 Community processes may apply to research beyond the scope of REB

3787 responsibilities. For example, research on the interface between environmental  
3788 and human systems that does not involve individual participants does not  
3789 require REB review.

3790 Ethics review by community entities will not be a substitute for review by  
3791 institutional REBs except where the community is the direct recipient of funding  
3792 and has constituted a local REB recognized by the sponsor of the research  
3793 initiative. This does not exempt researchers affiliated with an institution and  
3794 collaborating with the community from seeking REB approval at their  
3795 institution.

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# Chapter 10

3818

3819

## QUALITATIVE RESEARCH

3820 Researchers in social sciences and humanities, such as sociology, psychology, criminology,  
3821 business administration, political science, communications, education and history, have a  
3822 common belief in the desirability of trying to understand human action through systematic  
3823 study and analysis. Some researchers use quantitative research approaches, others opt for  
3824 qualitative research methods, and some use a combination of both.

3825 Qualitative research has a long history in many well-established disciplines in the social  
3826 sciences and humanities, as well as many areas in the health sciences (e.g., nursing).  
3827 Research developments point to an increasing prevalence of qualitative approaches, whether  
3828 in health research or in social sciences and humanities disciplines. Within specific  
3829 disciplines, ethics guidelines have also been created to address the issues inherent in the use  
3830 of particular methods, technologies, settings, etc. Qualitative research approaches are  
3831 inherently dynamic and are grounded in different assumptions than those that shape the  
3832 biomedical model of research. Many of the research practices and methodological  
3833 requirements that characterize qualitative research approaches parallel those that  
3834 characterize quantitative approaches – concerns regarding research quality (e.g.,  
3835 dependability and trustworthiness of data), for example – but, as is the case with ethics  
3836 principles, the criteria are adapted to the particular subject matter, context and  
3837 epistemological assumptions (i.e., related to the nature and production of knowledge in a  
3838 specific area of research) of the specific project.

3839 This chapter seeks to provide some guidance on qualitative research and its implications for  
3840 the ethics review process. In particular, it addresses issues of consent, privacy and  
3841 confidentiality that are particular to qualitative research. Some procedural issues related to  
3842 the dynamics and characteristics of qualitative research that affect the timing and scope of  
3843 the research ethics review process are detailed below. Researchers and research ethics  
3844 boards (REBs) should also consult other relevant chapters of the Policy for additional details  
3845 on principles, norms and practices applicable to qualitative research.

### 3846 **A. The Nature of Qualitative Research**

3847 Qualitative approaches reflect a human-centred approach that highlights the importance of  
3848 understanding how people think about the world and how they act and behave in it. This  
3849 approach requires researchers to understand how individuals interpret and ascribe meaning  
3850 to what they say and do, and to other aspects of the world (including other people) they  
3851 encounter.

3852 Some qualitative studies extend beyond individuals' personal experiences to explore  
3853 interactions and processes within organizations or other environments. Knowledge at both  
3854 an individual and cultural level is treated as socially constructed. This implies that all  
3855 knowledge is at least to some degree interpretive and hence dependent on social context. It  
3856 is also shaped by the personal standpoint (and possibly also the values) of the researcher as  
3857 an observer.

3858 The section below provides a summary of general principles and methodological  
3859 requirements and practices of qualitative research.

## 3860 **General Principles and Methodological Requirements and Practices**

3861 (a) **Inductive Understanding:** Many forms of qualitative research entail gaining an  
3862 inductive understanding of the world of research participants to acquire an analytical  
3863 understanding of how they view their actions and the world around them. In some  
3864 projects, this approach also applies to the study of particular social settings,  
3865 processes and experiences.

3866 To the extent that the methods involve direct interaction with participants, there is  
3867 often an emphasis on gaining insights into participants' perceptions of themselves  
3868 and others, and of the meanings that research participants attach to their thoughts and  
3869 behaviours.

3870 (b) **Diversity of Approaches:** There is no single approach in qualitative research. Each  
3871 field or discipline, and even individual scholars within a discipline, have different  
3872 perspectives on and approaches to the use of qualitative methods. Qualitative  
3873 research uses a variety of epistemological approaches, methodologies and techniques  
3874 that allow researchers to enter the research participants' world or to engage with  
3875 particular social environments. Methodological approaches include, but are not  
3876 limited to, ethnography, participatory action research, oral history, phenomenology,  
3877 narrative inquiry, grounded theory and discourse analysis. The term "qualitative  
3878 research" covers a wide range of overlapping paradigms or perspectives.

3879 (c) **Dynamic, Reflective and Continuous Research Process:** The emergence in the  
3880 course of the research itself of questions, concepts, strategies, theories and ways to  
3881 gather and engage with the data requires a constant reflective approach and  
3882 questioning from the researcher. Such flexibility, reflexivity and responsiveness  
3883 contribute to the overall strength and rigour of data analysis.

3884 (d) **Diverse, Multiple and Often Evolving Contexts:** Qualitative research takes place in  
3885 a variety of contexts, each of which present unique ethical issues. As knowledge is  
3886 considered to be context-contingent in qualitative research, these studies tend to focus  
3887 on particular individuals, sites or concepts that are empirically derived from other social  
3888 settings – and the researcher's priority is to understand *that* social setting involving  
3889 *those* people at *this* time.

3890 Researchers sometimes engage in research that questions social structures and activities  
3891 that create or result in inequality and injustice. They may involve research participants  
3892 who are highly vulnerable because of the social and/or legal stigmatization that is  
3893 associated with their activity or identity and who may have little trust in the law, social  
3894 agencies, or university authorities, or they may involve research participants, such as  
3895 business executives or government officials, who may be more powerful than the  
3896 researchers.

3897 (e) **Data Collection and Sample Size:** There is generally a greater emphasis placed on  
3898 depth of research than on breadth. Most qualitative researchers would emphasize  
3899 gathering diverse but overlapping data on a limited number of cases or situations to  
3900 the point of data saturation or thematic redundancy. Samples and research sites in  
3901 these studies are chosen because they are viewed as strategically useful or rich  
3902 sources of information for furthering one’s understanding of phenomena of interest,  
3903 not because they are necessarily statistically significant.

3904 A researcher may rely on multiple sources of information and data-gathering  
3905 strategies (e.g., triangulation) as one mechanism for enhancing data quality.  
3906 Researchers use a variety of methods for data gathering, including interviews,  
3907 participant observation, focus groups and other human-focused techniques.  
3908 Gathering of trustworthy data comes best from closeness and extended contact with  
3909 research participants. Textual qualitative studies also use a variety of content  
3910 analysis techniques, whether with published books, websites, interview transcripts,  
3911 images or other textual forms.

3912 Appropriate treatments of data after they are gathered may vary greatly. For some  
3913 research, protection of research participants requires confidentiality, anonymity, and  
3914 the destruction of data after they are used. In other cases, the data may provide a  
3915 valuable historical record that must be preserved or they may make a valuable  
3916 contribution by publicly attesting to the role played by particular individuals. (See  
3917 Chapter 2 [“Scope and Approach”] and Chapter 5 [“Privacy and Confidentiality”].)

3918 (f) **Research Goals and Objectives:** The aims of qualitative research are very diverse,  
3919 both within and across disciplines. The intended goals of qualitative projects may  
3920 include “giving voice” to a particular population, engaging in research that is critical  
3921 of settings and systems or the power of those being studied, affecting change in a  
3922 particular social environment, or exploring previously understudied phenomena to  
3923 develop new theoretical approaches to research.

3924 (g) **Dynamic, Negotiated and Often Ongoing Free and Informed Consent Process:**  
3925 Entry into a particular setting for research purposes sometimes requires negotiation  
3926 with the population of interest; the process sometimes cannot be ascertained in  
3927 advance of the research, in part because the relevant contexts within which the  
3928 research occurs evolve over time.

3929 In some cases, research participants hold equal or greater power in the researcher–  
3930 participant relationship – for example, in community-based and/or organizational  
3931 research when a collaborative process is used to define and design the research  
3932 project and questions, or where participants are public figures or hold other positions  
3933 of power (for example, research involving economic, social, political or cultural  
3934 elites). In other cases, researchers themselves may hold greater power when access to  
3935 prospective participant populations is gained through gatekeepers with whom the  
3936 researcher has established a relationship (e.g., when a researcher engages with the  
3937 police to do research in relation to a problem population, or when researchers engage  
3938 with prison authorities to do research with offenders).

3939 (h) **Research Partnerships:** Access to particular settings and populations is often  
3940 developed over time, and the relationships that are formed may well exist outside the  
3941 research setting per se, which sometimes makes it difficult to determine exactly  
3942 where the “research” relationship begins and ends. In many cases, despite in-depth,  
3943 advanced preparation, a researcher may not know until the actual data collecting  
3944 starts just where the search will lead. Indeed, the emergent nature of many qualitative  
3945 studies makes the achievement of rapport with participants and feelings of  
3946 interpersonal trust crucial to the generation of questions considered important or  
3947 interesting by both parties and of dependable data. Research often becomes a  
3948 collaborative process negotiated between the research participant(s) and the  
3949 researcher, requiring considerable time spent initially simply figuring out the focus  
3950 of the research.

3951 In many cases, contacts between researchers and participants can extend over a  
3952 lifetime, and these individuals may engage in a variety of relationships over and  
3953 above their specific “research” relationship.

3954 (i) **Research Results:** Transferability of results from one setting to another is  
3955 considered, but is often viewed as more of a theoretical issue than a procedural or  
3956 sampling issue.

## 3957 **B. Research Ethics Review in the Context of Issues** 3958 **Distinctive to Qualitative Research**

3959 This section seeks to provide guidance on particular implications of the use of qualitative  
3960 approaches for the ethics review process. This section should also be read in conjunction with  
3961 other chapters of this Policy.

3962 Qualitative research can pose unique ethical issues around gaining access, building rapport,  
3963 using data and publishing results. Researchers and REBs should consider issues of consent,  
3964 confidentiality and privacy, and relationships between researchers and participants in the  
3965 design, review and conduct of the research. Some of these may be identified in the design  
3966 phase, but others will arise during the research itself, which will require the exercise of  
3967 discretion, sound judgment and flexibility in the context of a proportionate approach to the  
3968 level of risk and benefit arising from the research, the well-being of the individual, and welfare



3969 defined in a broad sense.

3970 **Modalities of Expression of Free and Informed Consent**

3971 **Article 10.1** Research ethics boards should consider the range of strategies for  
3972 documenting the consent process that may be used by researchers using  
3973 qualitative research approaches. Researchers should explain in their research  
3974 design the consent procedures and strategies they plan to use.

3975 **Application** The consent process should usually reflect trust between the research  
3976 participants and the researcher. Often this is based on mutual understanding  
3977 of the project’s intentions. The research participant may sense attempts to  
3978 legalize or formalize the process as a violation of that trust. Under a variety  
3979 of circumstances, written consent is not required in qualitative research.  
3980 Qualitative researchers use a range of consent procedures, including oral  
3981 consent, field notes, and other strategies such as recording (audio or video, or  
3982 other electronic means) for documenting the consent process. Evidence of  
3983 consent may also be via completed survey questionnaires (in person, by mail  
3984 or by email or other electronic means).

3985 REBs may need to consider the power relationship that might exist between  
3986 researchers and research participants. In cases where the research participant  
3987 holds a position of power or routinely engages in communicative interactions  
3988 similar to those involved in the research by virtue of his or her position or  
3989 profession, informed consent can be inferred by the participant’s agreeing to  
3990 interact with the researcher for the purpose of the research. No further  
3991 verification of consent is needed. For example, “elite” research focuses on  
3992 power structures and persons in positions of power (for example, a senior  
3993 partner in a law firm, a cabinet minister, or a senior corporate officer). In this  
3994 type of research, the fact that a potential participant agrees to be interviewed  
3995 by a researcher may be sufficient to signify consent to participate in the  
3996 research.

3997 Researchers and REBs should consult Chapter 3 (“Free and Informed  
3998 Consent”) for additional details and considerations.

3999 **Observational Studies**

4000 *Exemption from REB Review*

4001 **Article 10.2** Research ethics board review is not required for observation of people in  
4002 public places that does not involve collecting personal identifiable  
4003 information through direct interaction with the individuals, and that does not  
4004 involve any intervention staged by the researcher. Such research does not  
4005 involve human participants as defined by this Policy.

4006 **Application** Research involving observation of people in public spaces where there is no  
4007 presumption of privacy and where no personal identifiable information is  
4008 being collected directly from the individuals – for example, political rallies,  
4009 demonstrations, or other public events or settings (e.g., a free concert in a  
4010 public park, a shopping mall) – does not require REB review, since it can be  
4011 expected that participants are aware of the public nature of the event or  
4012 gathering. Where individuals should reasonably expect that their identities  
4013 will be evident – for instance, as a result of their celebrity – research that  
4014 refers to their presence does not require REB review. (See also Article 2.5 in  
4015 Chapter 2 [“Scope and Approach”] and Chapter 5 [“Privacy and  
4016 Confidentiality”].)

4017 **Article 10.3** Web-based research that uses exclusively publicly available information for  
4018 which there is no presumption of privacy does not require REB review. Such  
4019 research does not involve human participants as defined by this Policy.

4020 **Application** Research that is non-intrusive, does not require direct interaction between the  
4021 researcher and individuals through the Internet medium, and that draws its  
4022 data primarily from postings on websites is not required to obtain REB  
4023 review. Cyber-material such as documents, records, performances, on-line  
4024 archival materials or published third-parties interviews to which the public is  
4025 given access on the Internet or that clearly seeks public visibility might be  
4026 considered as publicly available information (see Chapter 2 [“Scope and  
4027 Approach”]). Researchers may need to consider other factors when using this  
4028 information, such as copyright, dissemination restrictions, privacy and  
4029 intellectual rights. These, however, fall outside of the scope of the REB  
4030 review.

4031 *Proportionate Approach to Review of Observational Studies*

4032 **Article 10.4** When considering research involving observation, including web-based research  
4033 where personal identifiable information is being collected or where individuals  
4034 have a presumption of privacy, research ethics boards should apply a  
4035 proportionate approach to ethics review.

4036 **Application** In qualitative research, observation is used to study behaviour in a natural  
4037 environment. It often takes place in living, natural and complex communities  
4038 or settings; in physical environments; or in virtual settings such as the  
4039 Internet. Observational studies may be undertaken in public spaces or in  
4040 virtual settings where individuals might have some limited expectation of  
4041 privacy or in private or controlled spaces where individuals have an  
4042 expectation of privacy. The spectrum of settings where observational  
4043 research typically requiring review may occur include, for example,  
4044 classrooms, hospital emergency wards, private Internet chat rooms, or within  
4045 members-only communities or organizations.

4046 Observational research is of two kinds: “non-participant” (i.e., where the  
4047 researcher observes, but is not a participant in, the action) and “participant”  
4048 (i.e., where the researcher engages in, and observes, the action).

4049 Participant observation often is identified with ethnographic research, in  
4050 which the researcher’s role is to gain a “holistic” overview of the studied  
4051 context through engagement in and observation of the setting to describe its  
4052 social environments, processes and relationships. Participant observation may  
4053 or may not require permission to observe and participate in activities of the  
4054 setting studied. In some situations, researchers will identify themselves and  
4055 seek free and informed consent from individuals in that setting; in others,  
4056 researchers will engage in covert participant observation. Where specific  
4057 disciplines and methodological approaches provide guidelines relating to the  
4058 ethics issues involved in these types of research, researchers and REBs  
4059 should consider the similarity, divergence or overlap of such codes or  
4060 guidelines with this Policy and seek mutual understanding and clarification to  
4061 address the ethical issues that may arise in a particular project.

4062 Observational studies raise concerns of the privacy of those being observed.  
4063 REBs and researchers need to consider the ethical implications associated with  
4064 observational approaches, such as the possible infringement of free and  
4065 informed consent or privacy, as well as the disciplinary and methodological  
4066 norms of the proposed research project. They should pay close attention to the  
4067 ethical implications of such factors as the nature of the activities to be observed,  
4068 the environment in which the activities are to be observed, whether the activities  
4069 are staged for the purpose of the research, the expectations of privacy that  
4070 potential participants might have, the means of recording the observations,  
4071 whether the research records or published reports involve identification of the  
4072 participants, and any means by which those participants may give permission to  
4073 be identified.

4074 Because knowledge that one is being observed can be expected to influence  
4075 behaviour, research involving non-participant or covert observation generally  
4076 requires that the participants not know that they are being observed (typically  
4077 there is not direct interaction with the individuals being observed), and  
4078 therefore they cannot give their free and informed consent. Some forms of  
4079 qualitative research seek to observe and study criminal behaviours, violent  
4080 groups, or groups with restricted membership or access. For example, some  
4081 social science research that critically probes the inner workings of criminal  
4082 organizations might never be conducted if the participants know in advance  
4083 that they are being observed. Similarly, observing queuing behaviours in  
4084 shopping malls is one example of a study that may be deemed minimal risk,  
4085 where the research could not be completed if shoppers knew that they were  
4086 being observed. Researchers should justify whether the needs for such covert  
4087 research justify an exception to the general principle of free and informed  
4088 consent, and REBs should exercise their judgment in this type of situation.

4089 Such research should also be carried out according to professional and  
4090 disciplinary standards.

4091 Researchers should demonstrate to the REB that necessary precautions and  
4092 measures have been taken to address privacy and confidentiality issues in the case  
4093 of observational studies, commensurate with the level of risk and the research  
4094 context. Researchers and REBs should also be aware that, in some jurisdictions,  
4095 publication of identifying information – for example, a photograph taken in a  
4096 public place, but focused on a private individual who was not expecting this action  
4097 – may be interpreted in a civil suit as an invasion of privacy.

4098 REBs should focus on projects above the threshold of minimal risk, or they should  
4099 modulate requirements and protection proportionate to the magnitude and  
4100 probability of harms, including the likelihood that published reports may identify  
4101 individuals or groups. Observational research that does not allow for the  
4102 identification of the participants and that is not staged and is non-intrusive should  
4103 normally be regarded as of minimal risk.

4104 Researchers should be aware that web-based research may pose concerns  
4105 outside the scope of the research ethics review process. Such concerns may  
4106 arise, for example, when the web-based setting involves minors or other  
4107 populations that may become vulnerable because of the lack of surveillance  
4108 in this electronic setting. Such issues, which are not related to the ethics of  
4109 the research proposal itself, are not covered by this Policy.

4110 Researchers and REBs should consult Chapter 3 (“Free and Informed  
4111 Consent”) and Chapter 5 (“Privacy and Confidentiality”) for additional  
4112 details and considerations.

4113 *Privacy and Confidentiality in the Dissemination of Research Results*

4114 **Article 10.5** Subject to the research context and the scholarly traditions used in the  
4115 research proposal, research ethics board review should acknowledge that  
4116 individuals may want to be identified for their contribution.

4117 **Application** In much social science and some humanities research, the biggest possible  
4118 risk for researchers and REBs to manage is the harm that can result from  
4119 violations of research confidentiality. This can pose a particular challenge in  
4120 qualitative research because of the depth, detail, sensitivity and uniqueness of  
4121 information obtained. The default approach is to guarantee confidentiality of  
4122 the research data. In some cases, anonymity of the research participant may  
4123 be used in publications or dissemination of research results to ensure  
4124 confidentiality of data.

4125 In some types of qualitative research, respect for the participant’s  
4126 contribution is shown by identifying the individual in research publications or

4127 other means of dissemination of the results from the research. If failing to  
4128 identify participants would be unethical because of the disrespect it would  
4129 involve, or if informed participants assert their desire to be named, then  
4130 researchers should do so, according to the normal principles and practices of  
4131 their discipline. Where confidentiality is preferred or where there is no  
4132 compelling reason to the contrary, confidentiality would be maintained in a  
4133 manner commensurate with the needs of the research participants and the  
4134 project.

4135 Reviewers need to be sensitive to which principle is operative in any given  
4136 research context, and which disciplinary traditions are being invoked.

4137 Researchers and REBs should consult Chapter 5 (“Privacy and  
4138 Confidentiality”) for additional details and considerations.

### 4139 **Timing of the REB Review**

4140 **Article 10.6** Research ethics board (REB) review is not required for the initial exploratory  
4141 phase when the researcher is developing the research design. Research ethics  
4142 review is required once the terms of the research are established. The researcher  
4143 must receive REB approval prior to the start of the formal data collection in the  
4144 field.

4145 **Application** It is sometimes difficult to ascertain the beginning and end of a qualitative  
4146 research project. Access to particular settings and populations often develops  
4147 over time, and it is not unusual for researchers to be passive observers or simply  
4148 passively interested in a setting for some time before any formal effort is made  
4149 to establish a “research” relationship. Preliminary activities may include note  
4150 taking, scribbling, diary writing, and observation made long before the  
4151 researcher has any inkling that these would turn into formal research projects.  
4152 These types of preliminary activities are not subject to REB review.

4153 Researchers need to have the opportunity to engage in preliminary visits and  
4154 dialogue to explore possible research relationships and define research  
4155 collaborations with particular settings or communities, including the  
4156 determination of research questions, methods, targeted sample and sample size,  
4157 and inclusion of community-based concerns into the project design and data  
4158 collections. REBs should be aware that dialogue between researchers and  
4159 communities at the outset and prior to formal REB review is an integral  
4160 component of the research design. Researchers may need to consult informally  
4161 the REB when ethics issues arise prior to the data collection or inform the REB  
4162 of such issues over the course of the research.

4163 Qualitative research approaches involving a community, group or population of  
4164 interest (e.g., marginalized or privileged groups) follows a process of prior  
4165 dialogue, exchanges and negotiation of the research, which precedes the formal

4166 data collection involving human participants. For instance, in research in  
4167 Aboriginal communities or with Aboriginal populations (see Chapter 9  
4168 [“Research Involving Aboriginal Peoples”]) or other types of community-based  
4169 collaborative research, it may be desirable to obtain permission to proceed from  
4170 community leaders, elders or representatives before seeking individual consent.  
4171 A researcher might use a community gathering to inform the group about the  
4172 research and gain agreement from the group to proceed with the actual research  
4173 before seeking to obtain individual consent as a second step of the research  
4174 implementation.

4175 Although initial research questions may be outlined in the formalized research plan,  
4176 REBs should be aware that it is quite common for specific questions (as well as  
4177 shifts or discovering of data sources) to emerge only during the research project.  
4178 Due to the inductive nature of qualitative research and the emergent design  
4179 approach of the research, some of these elements may evolve as the project  
4180 progresses. Some resulting changes to the research design will not merit requiring  
4181 additional REB review, as they are not necessarily significant changes to the  
4182 approved research. Research ethics issues may also arise over the course of the  
4183 research, and it might be sufficient for the researcher to inform the REB about such  
4184 issues. (See Chapter 2 [“Scope and Approach”] and Article 6.16 in Chapter 6  
4185 [“Governance of Research Ethics Review”].)

4186 **Article 10.7** When researchers are using emergent designs in data collection, research ethics  
4187 boards should review and approve the general procedure in accordance with  
4188 appropriate professional and disciplinary standards.

4189 **Application** In qualitative research involving data collection with emergent designs (e.g.,  
4190 unstructured interviews or focus groups), specific questions or other elements of  
4191 data collection cannot be known or articulated fully in advance of the project’s  
4192 implementation. In these cases, REBs may ask to review a draft set of sample  
4193 questions or other outlines of the procedures to be followed in data collection.  
4194 REBs should not require researchers to provide them with a full questionnaire  
4195 schedule in advance of data collection. Rather, REBs should ensure that the data  
4196 collection is conducted according to disciplinary and professional standards.

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# Chapter 11

4212

4213

## CLINICAL TRIALS

### 4214 **A. Overview**

4215 A clinical trial is “an investigation in respect of a drug for use in humans that involves human  
4216 subjects and that is intended to discover or verify the clinical, pharmacological or  
4217 pharmacodynamic effects of the drug, identify any adverse events in respect of the drug, study  
4218 the absorption, distribution, metabolism and excretion of the drug, or ascertain the safety or  
4219 efficacy of the drug.”<sup>1</sup>

4220 Clinical trials are most frequently undertaken in biomedical or health research, although other  
4221 clinically related disciplines, such as psychology, also conduct research that evaluates  
4222 interventions, usually by comparing two or more approaches.

4223 Clinical trials may include questions that are not directly related to therapeutic goals – for  
4224 example, cost effectiveness or drug metabolism – in addition to those that directly evaluate the  
4225 treatment of study participants. They may take the form of “n of 1” studies or multi-centre  
4226 randomized controlled trials. Although the various types and forms of clinical trials naturally  
4227 have methodological differences, the ethical principles and procedures articulated in this Policy  
4228 can be adapted for each of them.

4229 Clinical trials most commonly involve testing new drugs or testing established drugs for new  
4230 uses. For this reason, and for convenience, references in this chapter are made primarily to drug  
4231 testing. However, clinical trials also involve medical devices, biologics, radiopharmaceuticals,  
4232 genetic therapies and natural health products, as well as behavioural and psychological  
4233 therapies. The guidance provided in this chapter applies also, as appropriate, to trials involving  
4234 these other therapies or interventions.

4235 Researchers undertaking clinical trials intended for use in seeking regulatory marketing  
4236 approval must comply with Health Canada regulations<sup>2</sup> and should also respect the ICH Good  
4237 Clinical Practice Guidelines,<sup>3</sup> which have been adopted by Health Canada, and other applicable  
4238 policy or guidance documents.

4239 The accelerating pace of new pharmaceutical drug and device development in Canada, as  
4240 well as increasing clinical trial activity in non-traditional research venues, including  
4241 physicians’ offices and contract research organizations, brings the need for heightened  
4242 vigilance in the clinical trial review process. Research ethics boards (REBs) must carefully  
4243 monitor all aspects of clinical trials, including free and informed consent, confidentiality,  
4244 safety and recruitment.

4245 With respect to the recruitment of participants for clinical trials, it is often not possible to  
4246 recruit, within a reasonable time, sufficient numbers of eligible participants from a single  
4247 clinical site. It may also be desirable to draw participants from a variety of geographically  
4248 diverse places to avoid bias. So, it is common that clinical trials are carried on at a number of  
4249 different sites and that data collected from all of the sites are pooled for analysis. Ethical issues  
4250 relating to such multi-centre clinical trials are discussed in Chapter 8 (“Multi-jurisdictional  
4251 Research”).

## 4252 **B. Phases of Clinical Trials**

4253 Clinical trials are commonly categorized into four phases, each of which gives rise to particular  
4254 ethical issues.<sup>4</sup>

4255 **Article 11.1** When reviewing a clinical trial protocol, the research ethics board should be  
4256 aware of its phase and the special ethical issues that different phases of  
4257 research may raise.

### 4258 **Application**

4259 Phase I In Phase I clinical trials, researchers test a new drug or treatment in a small  
4260 group of people, often for the first time, to evaluate its toxicity and other side  
4261 effects, and to determine a safe dosing range.

4262 **Ethical Concerns:** Safety concerns are particularly acute in Phase I research,  
4263 because it may be the first time human participants are exposed to the new drug  
4264 (“first-in-human” trials), and there may be little or no experience with the drug.  
4265 Phase I trials often depend on healthy participants who are compensated for their  
4266 participation, though this is not usually the case in, for example, cancer trials. The  
4267 combination of clinical risk with uncertain or no likelihood of clinical benefit, and  
4268 the often substantial compensation made to participants, raises ethical concerns  
4269 about safety, the selection and recruitment of participants, and the process of free  
4270 and informed consent. For safety, it is important to ensure that the drug is initially  
4271 given to a small number of participants and that dosing is increased in clearly  
4272 defined increments only after participants’ responses to the initial dose is known.  
4273 Recruitment and consent procedures should ensure that participants are aware of  
4274 the untested nature of the therapy and that participants do not accept, because of  
4275 the compensation being paid, risks they would otherwise refuse.

4276 Phase I clinical trials now increasingly include participants with specific  
4277 diseases for whom conventional therapies have failed. Such studies may be  
4278 designated as Phase I clinical trials, but the boundaries between trial phases are  
4279 not always clear. Such studies may be designated as combined Phase I/II or pure  
4280 Phase II clinical trials (see below).

4281 Phase II Phase II clinical trials primarily examine the efficacy of new drugs and their  
4282 short-term side effects. They are conducted in populations with the disease or  
4283 condition sought to be treated by the drug.

4284 **Ethical Concerns:** Combined Phase I/II clinical trials raise particular ethical  
4285 concerns, because they are often conducted with populations whose therapeutic  
4286 options have been exhausted. Patients with cancer that is incurable by standard  
4287 therapies and HIV/AIDS are examples. These circumstances may affect the  
4288 perceptions of patients and their families as to the balance between the harms  
4289 and benefits of the study and thus may affect their decision whether to  
4290 participate. Researchers should be encouraged to consult with the REB at an  
4291 early stage about any recruiting, consent or safety issues that arise.

4292 Phase II and III clinical trials, unlike combined Phase I/II clinical trials, often  
4293 include a placebo control to help detect and quantify the toxicity and efficacy  
4294 of an experimental drug or device. In such studies, and in addition to the  
4295 other ethical concerns raised for Phase II clinical trials, the use of placebos  
4296 (discussed in Section G [“Placebo-Controlled Studies”]) makes it particularly  
4297 important for researchers to assess and monitor the safety of participants and  
4298 ensure that the quality of their treatment is not compromised by participation  
4299 in the study.

4300 Phase III The drug or treatment is given to a large group of patients to confirm its  
4301 efficacy, monitor side effects, compare it with commonly used treatments,  
4302 and collect information that will allow the drug or treatment to be used  
4303 safely. These studies may lead to a new drug’s being marketed in Canada or  
4304 to the use of an approved drug for a new indication.

4305 **Ethical Concerns:** The REB must carefully examine Phase III clinical trials  
4306 to ensure that the care of patient-participants is not compromised in the  
4307 random assignment to any arm of the study (including the placebo arm), that  
4308 there are no conflicts of interest in the selection and recruitment of  
4309 participants (see Article 7.4 in Chapter 7 [“Conflict of Interest”]), that  
4310 payments by sponsors to researchers are reasonable, and that no financial  
4311 incentives in the nature of finder’s fees are made or offered for the  
4312 recruitment of participants. The REB should also address the issue of  
4313 continuing access to the experimental therapy after the trial. If the treatment  
4314 proves to be effective and reasonably safe for participants, will it continue to  
4315 be provided? If not, what provision will be made to ensure that participants  
4316 continue to receive adequate treatment? The REB should be aware that  
4317 numerous safety standards (for example, mechanical and electrical) apply to  
4318 medical devices, and the REB should be assured that these standards will be  
4319 met.

4320 Phase IV Phase IV clinical trials, also known as post-regulatory approval studies,  
4321 primarily examine the long-term effectiveness and toxicity of already-marketed  
4322 drugs. They may also be designed to look at the use of the treatment or  
4323 intervention in different populations, or to look at quality-of-life issues.

4324 **Ethical Concerns:** Phase IV studies can be extremely valuable for assessing  
4325 the long-term safety and effectiveness of marketed drugs and devices.

4326 Earlier-stage studies are of limited duration, and subsequent research can  
4327 identify toxicities and drug interactions that only emerge over time. However,  
4328 in some cases, Phase IV trials may be designed to serve primarily as  
4329 marketing initiatives – to encourage the prescription and continued use of an  
4330 approved drug. For example, a physician may be paid a per capita fee by a  
4331 sponsor to collect data on the side effects and acceptance by patients of a  
4332 drug being marketed by that sponsor. However, the financial terms associated  
4333 with these trials may compromise physicians’ professional integrity by  
4334 skewing prescription practices and encouraging finders’ fees, as well as  
4335 encouraging improper billing practices, inappropriate utilization of public  
4336 resources, and other problems. Researchers and REBs must examine Phase  
4337 IV clinical trials in light of these potential conflicts to ensure that trials are  
4338 undertaken for a bona fide scientific purpose, that free and informed consent  
4339 is given, that physician-researchers have the requisite expertise or experience,  
4340 and that potential conflicts of interest are adequately addressed.

### 4341 **C. Assessing Safety and Minimizing Risk**

4342 Participants enrolled in clinical trials are commonly exposed to experimental medications or  
4343 devices, each of which carries specific risks. Indeed, the most severe research-related harms  
4344 often arise in clinical trial research.

4345 **Article 11.2** Research ethics boards should ensure that drugs and other therapies used in  
4346 clinical trials do not pose undue risk to human participants.

4347 **Application** The approach of proportionate review (Chapter 2 [“Scope and Approach”])  
4348 dictates that studies with greater risks should be subject to proportionately  
4349 greater scrutiny. In all clinical trial research, the REB should carefully  
4350 evaluate previous laboratory, animal and human research with the drug or  
4351 other therapy, or have an expert evaluation undertaken on its behalf, to ensure  
4352 that the risk of harm from its use (a) is justified by the potential benefits to be  
4353 gained, and (b) is appropriately minimized.

4354 Where appropriate, based on reports of safety issues arising in the study, an  
4355 REB may discontinue the study at its institution, require the disclosure of  
4356 relevant safety information to existing and future participants (see Section D  
4357 [“Sharing New Information”], below), or take other steps reasonably  
4358 necessary to promote the safety of participants.

### 4359 **Monitoring Safety and Reporting Adverse Events**

4360 The ICH-GCP defines an adverse event as “any unfavourable and unintended sign, symptom  
4361 or disease temporally associated with the use of a medicinal product, whether or not  
4362 considered related to the product.” For research carried on at a single site, the principal  
4363 investigator is obliged to report any safety problems and serious adverse events to the local  
4364 REB, the sponsor, and regulatory authorities. Where clinical trials are carried on at multiple  
4365 sites, Health Canada and ICH-GCP require that unexpected serious adverse events suffered

4366 by participants at any site be reported to the regulatory body, the researchers and REBs at all  
4367 institutions taking part in the research.

4368 In practice, these reports have proved challenging for many REBs, because the reports often  
4369 lack context, informed analysis or explanation of their significance to the safety of  
4370 participants. In addition, in many clinical trials, researchers at individual sites do not have  
4371 access to detailed safety data, such as the rates of similar events at other sites or the  
4372 background epidemiology necessary to determine whether an adverse event is truly  
4373 unexpected. It is important, then, that mechanisms be put in place to ensure the safety of  
4374 trials. In some cases, a researcher's plan for reporting safety data to the REB and acting on it  
4375 may serve this purpose. A Data and Safety Monitoring Board (DSMB) is another such  
4376 mechanism.

4377 DSMBs are multi-disciplinary expert panels organized to monitor clinical trials, particularly  
4378 large, late-stage multi-centre trials involving randomized designs. They are composed of  
4379 scientists with expertise in the clinical area, statisticians, pharmacists and individuals with  
4380 expertise in ethics. Although the DSMB reports its findings and recommendations to the  
4381 sponsor, it should act independently of the sponsor. The DSMB has intermittent access to  
4382 the accumulated unblinded trial data, and it also audits unblinded safety reports from all sites  
4383 taking part in the trial. Based on that information, and in accordance with its trial-specific  
4384 stopping rules, the DSMB can recommend that the study be stopped early for reasons of  
4385 safety, efficacy or futility. The DSMB can also recommend that sponsors change the  
4386 procedures, methods or consent form information to ensure the safety of participants and the  
4387 validity and reliability of the data being collected.

4388 **Article 11.3** Researchers should provide the research ethics board (REB) with an  
4389 acceptable plan to monitor the safety of trial participants, including a plan for  
4390 the tabulation, analysis and reporting of safety data to the REB.<sup>5</sup>

4391 **Application** REBs must ensure that every clinical trial protocol includes a plan to assess  
4392 safety concerns and protect the ongoing safety of research participants. Such  
4393 a plan should include the requirement that REBs be provided, by researchers,  
4394 sponsors and/or DSMBs, with clear and up-to-date information about the  
4395 safety of participants taking part in clinical trials. Such reports should be  
4396 provided in a timely way and include information about the context and  
4397 significance of reported data to permit a fair interpretation and meaningful  
4398 review by the REB for the protection of trial participants. Where possible,  
4399 REBs should be provided with individual adverse event reports, accompanied  
4400 by an evaluation, by the sponsor, of their relevance and significance to the  
4401 trial.

4402 A safety monitoring plan should include a mechanism by which participants  
4403 may be withdrawn for safety reasons and by which studies may be stopped or  
4404 amended if they are found to be unsafe, or for reasons of futility or efficacy.  
4405 For some trials, the researcher may be expected to perform this monitoring  
4406 function. Depending on the circumstances of the trial, safety reports may be  
4407 submitted on an annual or semi-annual basis, supplemented by notices of

4408 serious safety threats to participants requiring urgent consideration. All  
4409 information supplied to the REB should include an analysis of its significance  
4410 and sufficient context to permit meaningful determinations to be made by the  
4411 REB.

4412 **Article 11.4** Research ethics boards should develop procedures to review safety reports  
4413 and to take appropriate steps in response.

4414 **Application** For more complex trials, an institutional or external DSMB may be appointed  
4415 to provide a more comprehensive mechanism for monitoring the safety of  
4416 multi-centre clinical trials. The REB should be satisfied that it will receive  
4417 copies of all DSMB reports and recommendations. A DSMB must be  
4418 independent of the trial and its members free of conflicts of interest with the  
4419 study therapy, the trial sponsor, and the outcome of the research. Where a  
4420 DSMB has been appointed to oversee a clinical trial, it will be mostly  
4421 responsible for reviewing safety data and making appropriate  
4422 recommendations about informing participants of safety concerns or stopping  
4423 the trial for safety, futility or efficacy. Even when there is a DSMB, the  
4424 researcher still has a responsibility to provide reports directly to the REB of  
4425 serious adverse events at his or her site, upon which the REB may be obliged  
4426 to act urgently.

#### 4427 **Balancing Risks**

4428 As part of their ongoing medical care, patients with serious medical conditions are often  
4429 treated with therapies or undergo interventions or procedures having significant risks. These  
4430 patients may be invited to participate in clinical trials.

4431 **Article 11.5** In clinical trials, with appropriate scientific and clinical justification, it may  
4432 be acceptable to allow research involving higher risk interventions with  
4433 patient-participants in which such heightened risk is primarily attributable to  
4434 the therapy and not to the research, or which is consistent with the risk  
4435 normally undertaken by participants in their usual clinical care.

4436 **Application** Some kinds of standard or recognized treatments (for example, surgery,  
4437 chemotherapy or radiation therapy) themselves pose substantial risks. An  
4438 REB may approve a study that involves such high-risk therapies if there are  
4439 no other reasonable alternative therapies available to patient-participants and  
4440 if the research-attributable risk is no greater, or only minimally greater, than  
4441 that to which participants would routinely be exposed. Such risks may be  
4442 regarded as within the range of minimal risk for these patient-participants,  
4443 since they are inherent in the treatment that patients undergo as a part of their  
4444 everyday life. Eligible participants for such studies are those:

- 4445 • who are routinely exposed to similarly high-risk treatments in the course  
4446 of their usual care and for whom there is a favourable balance of risk to  
4447 potential benefits;

4448 • for whom there are no other reasonable treatment options available and  
4449 for whom there is a favourable balance of risk to potential benefits; or

4450 • for whom the incremental risk of research interventions (the research-  
4451 attributable risk) is minimal.

4452 Informed consent to such studies must include a description of the risks  
4453 involved as well as a description of any available alternative treatments –  
4454 including no treatment. REBs should also seek to ensure that participants are  
4455 aware of the risks and benefits attributable to research, as distinct from those  
4456 arising from indicated therapy. (See Article 2.7 in Chapter 2 [“Scope and  
4457 Approach”], dealing with comparative risk.)

#### 4458 **D. Sharing New Information**

4459 In the course of a clinical trial, new information may arise that is relevant to participants’  
4460 free, informed and continuing consent to participate in the research. Section C addresses the  
4461 REB’s obligation to ensure that the safety of participants is monitored and protected. Section  
4462 D describes the obligations of REBs to ensure that any new information, including  
4463 information about newly discovered risks and toxicities, that may affect the willingness of a  
4464 participant to enter or continue in the trial be promptly disclosed.

4465 **Article 11.6** Researchers should share with the research ethics board, the participants and  
4466 other appropriate regulatory or advisory bodies, in a timely manner,  
4467 information that may be relevant to participants’ continuing consent to  
4468 participate in the research.

4469 Researchers should also share new information with former participants in  
4470 the research to the extent that it may be relevant to their welfare.

4471 **Application** Researchers should share with the REB and trial participants, in a timely  
4472 manner, new information relating to the safety and efficacy of the study  
4473 therapy, significant changes to study procedures, and other relevant  
4474 information. Article 11.6 outlines a researcher’s continuing duty to share new  
4475 and relevant information from the clinical trial. The more serious and urgent  
4476 the information, the more promptly it should be disclosed.

4477 New information requires disclosure if it may affect the willingness of  
4478 participants to continue in the trial, or is otherwise relevant to participants’  
4479 welfare or free, informed and continuing consent (see Articles 2.8, 3.3, 3.4).  
4480 To understand its particular relevance, the information should be considered  
4481 from a participant-centred perspective. New information that arises outside  
4482 the trial (for example, new findings in other related research), when that  
4483 information is relevant to the participant’s informed and continuing  
4484 participation, should also be disclosed. New information thus covers a range  
4485 of matters that includes, but is not limited to, the following:

- 4486                   • changes to the research protocol;
- 4487                   • evidence of new risks, determined to be serious enough to warrant
- 4488                   disclosure;
- 4489                   • new information that decisively shows that the benefits of one
- 4490                   intervention exceed those of another;
- 4491                   • new research findings, including relevant non-trial findings; or
- 4492                   • unanticipated problems involving lack of efficacy, recruitment issues, or
- 4493                   other matters determined to be serious enough to warrant disclosure.

4494                   The duty to report such new information to the REB, along with the  
 4495                   necessary analysis and evaluation to make the new information interpretable,  
 4496                   lies with the researcher and the sponsor. The REB should encourage  
 4497                   researchers to raise potentially relevant developments with the REB at an  
 4498                   early stage to better determine the appropriate scope and timing of  
 4499                   information-sharing with participants and regulatory authorities.

4500                   Significant information affecting the welfare of former participants may arise  
 4501                   after the completion of the trial or after the participants' involvement is  
 4502                   finished. If so, the researcher should share the information with the REB and  
 4503                   other appropriate regulatory or advisory bodies. The REB and researcher  
 4504                   should consider whether, given its nature and urgency, the information would  
 4505                   be relevant to any former participants' welfare and informed choices. If so,  
 4506                   reasonable steps should be taken to inform such participants in a meaningful  
 4507                   and timely manner.

4508                   When sponsors refuse to report new and significant information that is  
 4509                   relevant to the welfare of participants, then researchers and/or REBs have a  
 4510                   duty to do so. The more relevant, serious and urgent the information, the  
 4511                   stronger is the duty to report. Before REBs or researchers act on such duties,  
 4512                   they should afford sponsors a reasonable opportunity to report the  
 4513                   information to the appropriate regulatory authorities.

4514                   **E. Therapeutic Misconception**

4515                   With the exception of some Phase I studies, clinical trials usually involve individuals in need  
 4516                   of treatment, for whom the experimental therapy is hoped to be effective. In addition, often  
 4517                   the patient's physician, or someone associated with the patient's physician, makes the initial  
 4518                   approach or provides preliminary information about trial participation. Research has shown  
 4519                   that participants may confuse the purposes of research and therapy.

4520                   As a result, some patient-participants may assume that there must be therapeutic value in the  
 4521                   research procedures they are undergoing, or that they have been invited to participate  
 4522                   because their physician believes it would contribute to their welfare. Therapeutic



4523 misconception refers to the tendency of trial participants to believe that the primary intention  
4524 of research tests and interventions is to provide a therapeutic benefit to the patient-  
4525 participant. Even when research risks, benefits and alternatives are explained to them, it is  
4526 common that trial participants do not fully appreciate the differences between clinical care  
4527 and research participation. This may be particularly true when the researcher is the  
4528 participant's own physician.

4529 **Article 11.7** Research ethics boards and clinical trial researchers should be conscious of  
4530 the phenomenon of therapeutic misconception and ensure that procedures for  
4531 recruitment and informed consent emphasize which specific elements of a  
4532 clinical study are required for research purposes, as well as the differences  
4533 between research and the standard clinical care they might otherwise receive.

4534 **Application** Chapter 3 (“Free and Informed Consent”) describes the requirements for  
4535 informed consent to research participation. In particular, Article 3.2 provides  
4536 that participants must be provided with relevant information, including a  
4537 clear description of those elements of participation that are experimental in  
4538 nature and those not primarily intended to benefit the participant directly.  
4539 One way to help avoid therapeutic misconception is to ensure that the health-  
4540 care professionals involved in the patient's care are involved as little as  
4541 possible in recruitment, to ensure that clearly different people perform  
4542 treatment and research functions.

4543 When a treating clinician conducts research on his or her patients, special  
4544 efforts may be required, as part of the consent process, to distinguish between  
4545 these two roles and to ensure that patient-participants understand the research  
4546 elements of the study. While the physician is ultimately responsible for  
4547 patient care, participants should understand that a physician who conducts  
4548 research is acting in a capacity that is outside the traditional physician-patient  
4549 relationship.

## 4550 **F. Financial Conflicts of Interest**

### 4551 **Industry-Sponsored Research**

4552 Clinical trials are commonly undertaken under contract with pharmaceutical or  
4553 biotechnology companies in order to secure marketing approval for the drug being tested.  
4554 These companies make drugs and devices in order to generate profits. This may be a source  
4555 of conflict with researchers' obligations of scientific integrity and participant welfare.

4556 **Article 11.8** Research ethics boards should ensure that clinical trial research is designed to  
4557 meet appropriate standards of participant safety and respectful treatment, and  
4558 that financial considerations do not affect these standards or the scientific  
4559 validity and transparency of study procedures.

4560 **Application** Clinical trial research raises special challenges for the protection of human  
4561 participants and the validity of research results because of the financial  
4562 considerations associated with clinical trials. The profit motive of

4563 commercial research can conflict with participant protection and the scientific  
4564 validity of clinical trials. The financial benefits of demonstrating efficacy and  
4565 safety in a novel therapy may have the effect of compromising standards of  
4566 human protection and scientific validity (see Chapter 7 [“Conflict of  
4567 Interest”]).

#### 4568 **Clinical Trial Budgets**

4569 Budgets for clinical trials are usually calculated based on per capita costs – that is, the  
4570 sponsor pays the researcher a fixed sum for each research participant, based on the duration  
4571 and complexity of the study and the tests and procedures it requires.

4572 **Article 11.9** Research ethics boards should ensure that clinical trial budgets are reviewed to  
4573 ensure that conflicts of interest are identified and appropriately managed.

4574 **Application** As a general guide, payments for clinical trial procedures should be no greater  
4575 than the usual amounts charged by health-care providers for the provision of  
4576 comparable services. Budgets should also be examined to ensure that no  
4577 inappropriate payments are to be made, such as finder’s fees or other  
4578 unexplained expenses that may raise questions about conflict of interest.  
4579 Further, payment provisions should be scrutinized to ensure they do not create  
4580 ethically inappropriate incentives to recruit quickly, at the expense of a careful  
4581 review of the suitability of potential participants. Differential compensation paid  
4582 for different levels of recruitment, such as higher per-participant payments for  
4583 those recruited above a set target, may also encourage inappropriate recruitment  
4584 practices. Unreasonable payments or undue inducements may place the  
4585 researcher, and sometimes the institution, in a conflict between maximizing  
4586 financial remuneration on the one hand and protecting participants and meeting  
4587 the scientific requirements of the study on the other. Disclosure of the kinds and  
4588 amounts of payments and other budgetary details assists the REB to assess  
4589 potential conflicts of interest and encourages the researcher to manage them  
4590 appropriately.

#### 4591 **G. Placebo-Controlled Studies**

4592 In studies of new drugs or other therapies, a placebo study arm allows the researcher to control  
4593 for factors that may confound a valid assessment of the value of an experimental therapy, and it  
4594 also has other methodological advantages over non-placebo designs. Placebo-controlled studies  
4595 have long been the gold-standard design for testing the efficacy and safety of new drugs and  
4596 other clinical interventions. However, the primacy of the placebo-controlled study has been  
4597 challenged, and opinions differ as to its methodological superiority for all types of clinical  
4598 trials. In addition, where there is an established effective treatment, use of a placebo may  
4599 deprive participants of needed therapy. The following article is designed to ensure that placebo  
4600 controls are used only in situations that do not compromise the safety of participants.

4601 **Article 11.10** (a) A new therapy or intervention should generally be tested against an  
4602 established effective therapy.

- 4603 (b) As with all alternative choices of a control, a placebo control is ethically  
4604 acceptable in a randomized controlled clinical trial if:
- 4605 • its use is scientifically and methodologically sound to establish the  
4606 efficacy or safety of the test therapy or intervention;
  - 4607 • it does not compromise the safety or well-being of participants; and
  - 4608 • the researcher articulates to the research ethics board (REB) a valid  
4609 scientific justification for the use of the placebo control.
- 4610 (c) For clinical trials involving a placebo control, the researcher and the REB  
4611 must ensure that participants or their surrogate decision-makers are well  
4612 informed:
- 4613 • about any therapy that will be withdrawn or withheld for purposes of the  
4614 research; and
  - 4615 • of the anticipated consequences of withdrawing or withholding the  
4616 therapy.

4617 **Application** The use of an active treatment comparator in a clinical trial of a new therapy is  
4618 generally the appropriate study design when an established effective therapy  
4619 exists for the population and clinical indication under study.

4620 However, a placebo comparator is acceptable in any of the following  
4621 situations:

- 4622 1. There are no established effective therapies for the population or for the  
4623 indication under study, and existing evidence raises substantial doubt  
4624 within the community of treating physicians regarding the net therapeutic  
4625 benefit of available therapies.
- 4626 2. Patients are refractory to the available therapies by virtue of their past  
4627 treatment history or known medical history.
- 4628 3. The study involves adding a new investigational therapy to established  
4629 effective therapies – established effective therapy + new therapy vs.  
4630 established effective therapy + placebo.
- 4631 4. Patients have determined that the response to the established effective  
4632 therapies for their condition is unsatisfactory to them.\*
- 4633 5. Patients have previously refused established effective therapies for their  
4634 condition.\*

4635 \* For (4) and (5), the determination of response satisfaction and refusal of  
4636 treatment must take place outside the context of recruitment for the clinical

4637 trial and prior to offering trial participation to the potential participant, and  
4638 they must be documented in a standardized manner.<sup>6</sup>

4639 **H. Analysis and Dissemination of the Data and Results of Clinical**  
4640 **Trials**

4641 The rights of sponsors with respect to the ownership, analysis, interpretation and publication  
4642 of study data are typically described in industry-researcher contracts (often referred to as  
4643 Clinical Trial Agreements or Clinical Study Agreements), which may not always be  
4644 available for REB review. These contracts may also place restrictions on the publication of  
4645 findings, either directly or through provisions that seek to protect, in favour of the sponsor,  
4646 the intellectual property of study procedures, data or other information.

4647 **Article 11.11** With respect to research findings:

4648 (a) Institutions and research ethics boards should take necessary measures to  
4649 ensure that researchers and institutions share research results and publish  
4650 or otherwise disseminate the analysis and interpretation of research  
4651 findings in a timely manner without undue restriction.

4652 (b) Any prohibition or undue limitation on the publication or dissemination  
4653 of scientific findings from clinical trials is ethically unacceptable.

4654 (c) Institutions should develop reasonable written policies regarding  
4655 acceptable and unacceptable clauses in research contracts relating to  
4656 confidentiality, publication and access to data.

4657 **Application** To justify the use of human participants, and the risks and other burdens they  
4658 are asked to bear, research must be valuable. That is, it must have a  
4659 reasonable likelihood of promoting social good. If research findings are not  
4660 disseminated within a reasonable time, their value may be diminished or lost,  
4661 betraying the contributions and sacrifices of participants. For this reason, and  
4662 based on respect for participant expectations and protection of the public  
4663 good, researchers and institutions have an ethical responsibility to make  
4664 reasonable efforts to publicly disseminate the results of clinical research in a  
4665 timely manner.

4666 However, negative results of research are not always published or otherwise  
4667 disseminated. Failing to publish such results may lead to publication bias and  
4668 thus contribute to a series of harms, including misinformed clinical decision-  
4669 making based on incomplete or skewed data, inappropriate and potentially  
4670 harmful clinical practices and injury to health, needless and wasteful  
4671 duplication of research with associated risks to participants, and fraud or  
4672 deception in the clinical trials process and erosion of public trust and  
4673 accountability in research.

4674 REBs should require the satisfactory amendment or removal of any  
4675 confidentiality clauses or publication restrictions that unduly limit either the

4676 content of the scientific information that may be disseminated, or the timing  
4677 of dissemination. Contracts should also ensure that researchers have the  
4678 necessary access to trial data, and the opportunity to analyze them, to ensure  
4679 that they can report study findings fairly and accurately, particularly with  
4680 respect to both efficacy and safety.

4681 Article 11.11 requires (a) that REBs and institutions take reasonable steps to  
4682 ensure that research findings are published in a timely way, (b) that such  
4683 publication may be done without undue limitation, and that (c) institutions  
4684 and REBs adopt reasonable written, publicly available policies with respect  
4685 to the publication and dissemination of results. Contracts and relevant  
4686 documents for proposed research should be reviewed for consistency with  
4687 these policies and principles. Such policies should ensure that sponsors'  
4688 legitimate interests are reasonably balanced against the researcher's ethical  
4689 and legal obligations to participants, and to the scientific and public good to  
4690 disseminate data and research findings.

4691 Such policies should require that clinical trial research contracts be examined  
4692 to ensure that contractual provisions comply with institutional policy  
4693 standards. They should do all of the following:

4694 1. Require that confidentiality and publication clauses be submitted to a  
4695 responsible authority (for example, the REB or research administration)  
4696 for a determination of their consistency with the policy.

4697 2. Require that any ethical concerns arising in the review be referred to the  
4698 REB as an integral part of the ethics review process.

4699 3. Provide that any proposed restrictions on publication should include an  
4700 ethically acceptable justification.

4701 4. Provide that all confidentiality and publication clauses:

4702 (a) Are consistent with the researcher's duty to share new information  
4703 from clinical trials with REBs and trial participants in a timely  
4704 manner (Section D ["Sharing New Information"]);

4705 (b) Are reasonable in terms of any limitations or restrictions on the  
4706 publication or other dissemination or communication of  
4707 information; and

4708 (c) Permit researchers to access study data.

4709 Review of ethical aspects of researcher–industry contracts should be  
4710 undertaken by a duly composed REB, or by or under the auspices of another  
4711 competent institutional authority as an integral part of the ethics review  
4712 process. If done under the latter process, the review of contracts should be  
4713 conducted in a manner that (1) conforms to the special ethical duties,

4714 mandate and purposes of REB review, and (2) consults with the REB when  
4715 necessary.

4716 In the review process, the onus to justify restrictions on dissemination or  
4717 access to data should lie with the one seeking such restriction, usually the  
4718 researcher or sponsor. The reasonableness of restrictions on either the content  
4719 or timing of dissemination should be measured against the written  
4720 institutional policies. For example, some existing institutional policies deem  
4721 unacceptable any publication restrictions that exceed a time limit of three to  
4722 six months after the close of the trial. Such policies should also address  
4723 restrictions on the dissemination of particular kinds of information, such as  
4724 information that may be considered proprietary or trade secrets. Restrictions  
4725 on information that participants would reasonably consider relevant to their  
4726 welfare (see Article 11.6), or that are required to give appropriate context to a  
4727 manuscript or other publication, are seldom if ever justified.

## 4728 **Clinical Trial Registration**

4729 Clinical trial registries permit web-based access to information about ongoing clinical trials  
4730 so that anyone may have information about trials and their results.

4731 **Article 11.12** All clinical trials should be registered with a recognized and easily web-  
4732 accessible public registry.<sup>7</sup>

4733 **Application** Clinical trial registries are one way to help ensure that negative trial results  
4734 are widely available. These, in addition to editorial policies,<sup>8</sup> ethical policy  
4735 reforms, and revised national and institutional ethics policies, contribute to a  
4736 multi-faceted approach to combating non-disclosure, publication bias, and the  
4737 suppression of data in clinical research.

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### **Endnotes**

<sup>1</sup> Part C, Division 5 of the Food and Drug Regulations

<http://gazetteducanada.gc.ca/partII/2001/20010620/html/sor203-e.html>.

<sup>2</sup> See note 1 and Medical Devices Regulations (SOR/98-282). <http://laws.justice.gc.ca/en/f-27/sor-98-282/text.html>.

<sup>3</sup> International Conference on Harmonization, Guidance E6: Good Clinical Practice – Consolidated Guideline (of ICH Technical Requirements for the Registration of Pharmaceuticals for Human Use) 1996, adopted by Health Canada in 1997.

[http://www.hc-sc.gc.ca/dhp-mps/prodpharma/applic-demande/guide-ld/ich/efficac/e6\\_e.html](http://www.hc-sc.gc.ca/dhp-mps/prodpharma/applic-demande/guide-ld/ich/efficac/e6_e.html).

<sup>4</sup> The description of the clinical trial phases above has been adapted from the U.S. National Library of Medicine of the National Institutes of Health, “FAQ: What are clinical trial phases?” <http://www.nlm.nih.gov/services/faqctgov.html>.

<sup>5</sup> The NIH has developed guidance on data and safety monitoring of clinical trials. See <http://grants.nih.gov/grants/guide/notice-files/not98-084.html> and <http://grants.nih.gov/grants/guide/notice-files/not-od-00-038.html>.

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<sup>6</sup> These conditions are drawn from the recommendations of the National Placebo Working Committee on the Appropriate Use of Placebos in Clinical Trials in Canada, 2004. <http://www.cihr-irsc.gc.ca/e/25139.html> with minor amendments approved by the CIHR Standing Committee on Ethics.

<sup>7</sup> The CIHR requires that randomized clinical trials be registered with an International Standard Randomized Controlled Trial Number (ISRCTN) at [www.controlled-trials.com](http://www.controlled-trials.com).

<sup>8</sup> International Committee of Medical Journal Editors, *Sponsorship, Authorship and Accountability*. <http://www.icmje.org/sponsor.htm>.





# Chapter 12

4739

4740

## HUMAN TISSUE

4741 The use of human tissue for research contributes greatly to the advance of biomedical  
4742 science. Ethical considerations raised by such research centre on acceptable access and  
4743 consent to the use of tissue and potential privacy concerns arising from the disclosure of  
4744 information derived from donor tissue.

4745 Human tissue here refers to any biological material and includes blood or other body fluids.  
4746 The status accorded the human body and its parts varies among individuals and cultures.  
4747 This variation, in part, reflects how people perceive, identify with, and relate to their bodies.  
4748 It is important, then, to assess the ethics of research involving human tissue with an  
4749 awareness of, and sensitivity to, the relevant cultural context.

### 4750 A. Identifiability of Tissue

4751 Five categories of human tissue can be distinguished, based on the extent to which they are  
4752 identifiable. These categories, with minor variations, are also found in Chapter 5 (“Privacy and  
4753 Confidentiality”) with respect to the identifiability of personal information:

- 4754 • **Identified tissue:** Tissue donors can be identified through direct identifiers  
4755 associated with the sample (e.g., name, address, social insurance number or personal  
4756 health number);
- 4757 • **Identifiable tissue:** Tissue donors can be identified by a combination of indirect  
4758 identifiers (e.g., date of birth, place of residence, or unique personal characteristic)  
4759 using reasonably foreseeable means;
- 4760 • **De-identified/coded tissue:** Identifiers are removed from tissue samples and  
4761 replaced with a code that permits individual donors to be identified only by use of  
4762 that code, access to which may be restricted;
- 4763 • **Anonymized tissue:** Tissue is irrevocably stripped of any means of identification  
4764 and a code is not kept to allow future re-linkage; and
- 4765 • **Anonymous tissue:** Information that never had identifiers associated with it.

4766 These categories, however, are not fixed. Identified, identifiable and de-identified tissue can  
4767 be anonymized by well-accepted technical or administrative means. For purposes of  
4768 assessing privacy, identified and identifiable tissue may be treated in much the same way,

4769 since these categories of tissue can be straightforwardly associated with a particular  
4770 individual. Likewise, anonymous and anonymized tissue also may generally be treated the  
4771 same, since they cannot be associated with an individual.

4772 However, due to continuing technological development in genetics, individuals with access  
4773 to stored tissue are increasingly able to discover the identity of individual donors using  
4774 genetic markers. For this reason, genetic testing has made it more difficult to categorize  
4775 tissue as anonymous or anonymized. Researchers and research ethics boards (REBs) should  
4776 be aware of, and guard against, this potential threat to donors' privacy.

4777 From the perspective of confidentiality, it may seem desirable to anonymize or de-identify  
4778 collected tissue to the extent possible. However, there are considerations that may justify  
4779 retaining some identifiers, which include the scientific requirements of some studies and the  
4780 need to avoid using different samples from the same donor. Anonymity may not always be  
4781 desirable for other reasons as well. Rendering tissue anonymous has the disadvantage of  
4782 making it impossible to offer the benefits of research findings to donors and their families or  
4783 to alert them to relevant clinical findings. This is particularly significant when research may  
4784 disclose a previously undiagnosed condition, such as HIV infection or an inherited  
4785 predisposition to breast cancer, for which potentially effective treatments are available.

## 4786 **B. Tissue Collection**

4787 Tissues samples may be obtained in different ways:

- 4788 1. They may be collected expressly for a specific research purpose;
- 4789 2. They may be collected incidentally to medical or diagnostic procedures with no  
4790 initial intent to be used in research; or
- 4791 3. They may be collected for research or medical or diagnostic purposes with some  
4792 expectation that they may or will also be used in future research, although the  
4793 precise research project(s) may not be known at the time.

4794 The first category above refers to the initial collection of tissue for research, which is  
4795 described in this section. The latter two categories are relevant to subsequent, secondary  
4796 uses of tissue for research that may not have been conceived at the time the tissue was taken.  
4797 These are described in Section D ("Secondary Use of Previously Collected Tissue"), below.

4798 **Article 12.1** Research proposing the initial collection and use of human tissue requires  
4799 ethics review by a research ethics board and consent of the tissue donor.

- 4800 (a) The collection and use of human tissue for research purposes should be  
4801 undertaken with the free and informed consent of the donor;
- 4802 (b) In the case of donors who lack capacity, consent may be given by advance  
4803 directive or by an authorized third party; and
- 4804 (c) In the case of deceased donors, consent may be given by advance  
4805 directive or by an authorized third party.

4806 **Application** Article 12.1 applies prospectively – that is, prior to the collection of tissue  
4807 intended for research purposes. It applies the general elements of free and  
4808 informed consent in Chapter 3 (“Free and Informed Consent”) to tissue  
4809 donation. The consent process permits individuals to protect themselves  
4810 against unwanted or potentially harmful invasions of privacy. Individuals  
4811 who do not wish to contribute tissue to particular research projects should be  
4812 free to withhold consent without penalty and without prejudicing access to  
4813 any treatment they would otherwise receive. For individuals unable to give  
4814 consent, the principles developed in Chapter 3 regarding third-party  
4815 authorization should be observed.

4816 When informed consent to the research use of tissue is being discussed, a  
4817 clear distinction should be made between consent to research use and that for  
4818 any clinical procedure or test. In practice, this may mean separate consent  
4819 forms, but in any event, the different uses must be clearly explained and  
4820 understood by donors.

4821 Advance directives may include instructions relating to the future donation of  
4822 tissue, and they should be respected. However, post-mortem donation of  
4823 tissue can be an extraordinarily sensitive topic in some families. In such  
4824 cases, if serious objections or divisions within a donor’s family become  
4825 known, researchers should be aware of family members’ concerns, and they  
4826 should respond in a way that respects that sensitivity. REBs and researchers  
4827 should be aware that provincial human tissue gift laws often make specific  
4828 provision for research use and should be consulted.

#### 4829 **Consent for Future Use**

4830 **Article 12.2** To facilitate the appropriate subsequent use of human tissue, consent forms  
4831 should provide potential participants with a range of choices relating to the  
4832 future use of their tissue.

4833 **Application** Where secondary use of donated tissue is anticipated, it is desirable that  
4834 individuals approached to donate be given a realistic opportunity to express  
4835 the specific nature and scope of the consent they wish to give. Accordingly,  
4836 offering a variety of choices, as suggested in Article 12.2, permits donors  
4837 flexibility in shaping the acceptable secondary use of their tissue. Options  
4838 might include, for example:

- 4839 • Refusing any future use of their tissue in research;
- 4840 • Permitting only anonymous or anonymized use of their tissue in research;
- 4841 • Permitting identified, identifiable or coded use of tissue for one particular  
4842 study only;

- 4843
- 4844
- 4845
- Permitting identified, identifiable or coded use of their tissue for any study relating to the condition for which the sample was originally collected;
- 4846
- 4847
- Permitting future contact by researchers to seek consent for other studies; or
- 4848
- 4849
- Permitting coded use of their biological materials for any kind of future study.

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At the same time, donors should be advised that, once given, their consent may be difficult to withdraw. They should also be advised of the potential for subsequent identification, including identification by means of increasingly sophisticated genetic technologies.

4854 **Article 12.3** For the purpose of obtaining free and informed consent, the full range of

4855 information set out in Article 3.2 in Chapter 3 (“Free and Informed Consent”)

4856 should be provided. In addition, researchers who seek to collect human tissue

4857 for research should provide potential donors or authorized third parties with

4858 the following information:

- 4859
- (a) The type and amount of tissue to be taken;
- 4860
- (b) The manner in which tissue will be taken, and the safety and
- 4861 invasiveness of the procedures for acquisition;
- 4862
- (c) Potential uses of the tissue, including any commercial uses;
- 4863
- (d) Measures to protect the privacy of individual donors, ensure
- 4864 confidentiality of the data, and minimize harms to donors;
- 4865
- (e) The length of time the tissue will be kept, how it will be preserved, and
- 4866 any limits on its use; and
- 4867
- (f) Where applicable, the researchers’ plan for disclosure of clinically
- 4868 relevant information derived from the tissue.

4869 **Application** Free and informed consent to tissue donation requires that all currently

4870 known relevant information be provided to potential donors. In general,

4871 consent must be based on an understanding of the specific uses of tissue for

4872 research anticipated at the time. Potential research participants should also be

4873 advised if there is the possibility that future studies, the nature of which is

4874 currently unknown, may be undertaken using the donated tissue. Researchers

4875 should submit to the REB an acceptable plan for maintaining the duty of

4876 confidentiality in regard to tissue donors. Reasonably anticipated harms, such

4877 as the possibility of future identification, must also be disclosed. This

4878 includes information on any identifying information to be attached to the

4879 tissue, its potential traceability, and how the use of the tissue could affect the

4880 donor’s privacy.

4881 In general, tissue samples should be used only for the agreed-on research  
4882 project. The law in some jurisdictions requires that research be restricted to  
4883 these purposes. Subject to Articles 12.5 and 12.6, if tissue is to be used for  
4884 any other research purpose, the individual's prior consent should be obtained.

4885 The research protocol and consent form should describe any incidental  
4886 findings that may be anticipated, as well as the way they will be managed.  
4887 Incidental findings are unanticipated discoveries, which may not have been  
4888 within the original focus of the research, that may have clinical,  
4889 psychological, social or other health-related significance. If incidental  
4890 findings are made, the question may arise whether, and how, they should be  
4891 communicated to the affected donor. The management of incidental findings  
4892 is more fully discussed in Article 3.4 in Chapter 3 ("Free and Informed  
4893 Consent").

4894 While all the basic guidelines of Chapter 3 regarding free and informed  
4895 consent apply to research involving human tissue, some deserve special  
4896 attention. Explaining the purpose of the research is of particular importance,  
4897 since the tissue donor will not be directly involved in the research. Explaining  
4898 the potential for financial conflict of interest is also important, as there may  
4899 be the potential for significant commercial gain.

### 4900 **C. Tissue Storage and Banking**

4901 This section applies to any storage of tissue. It includes tissue stored only for the duration of a  
4902 study as well as that which is stored or banked for future research use.

4903 Collection and retention of tissue in biological banks ("biobanks") creates an increasingly  
4904 important resource for research. Biobanks vary widely in their characteristics. Different types  
4905 of biological materials may be stored in biobanks, including blood and tissue samples, such as  
4906 tissues from tumours or organs. Biobanks may include or be linked with databases of  
4907 identifiable or non-identifiable information; they may be disease-specific or contain genetic  
4908 material from a wide population base; they may be established prospectively for use in a  
4909 specific research study or to provide biological materials for numerous studies.

4910 The creation of biobanks presents risk to individuals whose genetic and other personal  
4911 information may be accessed, used, retained and disclosed, and they also present risk to those  
4912 individuals' biological relatives and others with whom they have shared genetic characteristics.

4913 **Article 12.4** Institutions and researchers that maintain collections or repositories of tissue:

4914 (a) Should ensure that they have or use appropriate facilities, policies and  
4915 procedures to ensure that tissue is stored safely and in accordance with  
4916 applicable standards; and

4917 (b) Should establish appropriate physical, administrative and technical  
4918 safeguards to ensure that the privacy of tissue donors is protected.

4919 **Application** Institutions and researchers must ensure that their facilities, equipment and  
4920 procedures permit tissue to be stored safely so that its scientific value is  
4921 maintained. Procedures for storage and record-keeping must include effective  
4922 measures to ensure that donors' identities are protected. Such measures include  
4923 the security of facilities and effective procedures for data handling, record-  
4924 keeping and regulating access to tissue and associated information by outside  
4925 researchers and others.

4926 Organizations that maintain biobanks may have their own policies on privacy,  
4927 confidentiality and access to materials. Researchers should be aware of  
4928 requirements for compliance with such policies. For example, researchers may  
4929 be required to apply to the organization for permission to access biological  
4930 samples, and they may be required to enter into an agreement with the  
4931 organization that sets out conditions for research access and use of materials in  
4932 the biobank.

4933 Identified data derived from tissue may be linked to other research or public  
4934 databases. Such data linking can be a powerful research tool and valuable  
4935 resource for monitoring the health of populations, understanding factors  
4936 influencing disease, and evaluating health services and interventions. Data  
4937 linkage raises separate privacy issues, discussed in Section E ("Data Linkage")  
4938 of Chapter 5 ("Privacy and Confidentiality").

#### 4939 **D. Secondary Use of Previously Collected Tissue**

4940 A researcher may want to use tissue left over from earlier research, from a diagnostic  
4941 examination or surgical procedure, or from an established tissue repository. At the time  
4942 tissue was collected, individuals may have consented to a particular research purpose or  
4943 otherwise expressed a preference about future uses, such as an advance directive made in  
4944 accordance with laws governing gifts of human tissue for research or other purposes, or by  
4945 an instruction contained in a consent form, as described in Article 12.2. Researchers and  
4946 REBs should respect known preferences or instructions. Alternatively, future use of tissues  
4947 may not have been discussed with or even contemplated by the individual. It can be difficult  
4948 then to determine individual wishes regarding future uses of tissue for research. A  
4949 proportionate assessment of risks and benefits will help guide the research ethics process in  
4950 these cases.

4951 Chapter 5 ("Privacy and Confidentiality") provides detailed guidance on secondary use of  
4952 personal information for research purposes (in particular, see Articles 5.5 and 5.6). The  
4953 following section adapts the provisions in Chapter 5 to the specific context of research  
4954 involving secondary use of tissue.

4955 **Article 12.5** Researchers should seek research ethics board (REB) approval for the  
4956 secondary use of tissue. Researchers must satisfy the REB that:

4957 (a) Use of the tissue is essential to the research;

4958 (b) They will take appropriate measures to protect the privacy of and minimize

4959 harms to the individuals from whom tissue was collected, and to ensure  
4960 confidentiality; and

4961 (c) Individuals from whom the tissue was collected did not object to secondary  
4962 use at the initial stage of collection or otherwise make known their  
4963 objection.

4964 **Application** For research involving the secondary use of tissue that is anonymous,  
4965 anonymized, and de-identified or coded where no member of the research  
4966 team has access to the code that permits re-identification of individuals, the  
4967 REB may proceed by delegated review. (Under some circumstances,  
4968 delegated review may be available for secondary use of identifiable tissue.)  
4969 Researchers and REBs should be aware, however, that risks may arise even  
4970 in research involving anonymized or anonymous tissue. The research may  
4971 reveal potentially harmful information about groups or communities, even  
4972 though it may not be possible to identify the individuals who provided the  
4973 tissue. For example, as more fully described in Section E (“Genetic Research  
4974 Involving Communities”) of Chapter 13 (“Human Genetic Research”),  
4975 research on human tissue may involve an exploration of genetic variation  
4976 within specific groups or communities. Such research may raise ethical  
4977 concerns about stigmatization and exploitation of groups and social  
4978 disruption in communities. For this reason, researchers may have an  
4979 obligation to seek the engagement of community members or leaders in the  
4980 design, conduct and reporting of such research (see Article 12.6, below).  
4981 Should any of these concerns arise during the conduct of a study, the  
4982 researchers should bring such concerns to the REB for guidance and  
4983 direction.

4984 Subject to Article 12.6, if a researcher satisfies the conditions in Article 12.5  
4985 (a) to (c), the REB may approve the research without requiring the consent of  
4986 individuals from whom tissue was collected. Established tissue repositories  
4987 may have their own policies and procedures governing access to tissue for  
4988 research purposes. For example, repositories may release only anonymized  
4989 samples and may require researchers to sign material transfer agreements or  
4990 secure REB approval. Researchers should be aware of and abide by such  
4991 policies and procedures and obtain any other required permission.

4992 **Article 12.6** In highly sensitive situations involving secondary research use of tissue, the  
4993 research ethics board (REB) may require that a researcher’s secondary use of the  
4994 tissue be dependent on the informed consent of the individuals from whom the  
4995 tissue was collected or from authorized third parties, unless it is impossible  
4996 or impracticable to obtain consent. If the REB is satisfied that consent is  
4997 impossible or impracticable, access for secondary use may require either:

4998 (a) An appropriate strategy for notifying individuals or groups that tissue is  
4999 intended to be used for a specified research purpose; or

5000 (b) Consultation with representatives of individuals or groups from whom tissue  
5001 was collected.

5002 **Application** In considering the applicability of this article, REBs should apply a  
5003 proportionate approach to ethical assessment of research that considers the  
5004 likelihood and magnitude of harms for individuals from whom tissue was  
5005 collected, as well as the potential benefits of the research. Highly sensitive  
5006 situations may arise when identifying or identifiable results of the research will  
5007 be published or when the tissue was originally collected from individuals or  
5008 groups who may have special interests in regard to tissues, such as groups with  
5009 specific medical conditions or who attribute particular cultural or religious  
5010 significance to tissue. For this reason, according to the Canadian Institutes of  
5011 Health Research Guidelines for Health Research Involving Aboriginal People,<sup>1</sup>  
5012 secondary research use of tissue samples known to have originated with  
5013 Aboriginal people requires the specific consent of the individual donor and,  
5014 where appropriate, consultation with the community if the sample can be traced  
5015 back to the individual or the community. REBs should also be particularly  
5016 cautious when individuals or groups from whom the tissue was collected may be  
5017 significantly harmed by accidental or intentional disclosure.

5018 Article 12.6 provides that the REB may require researchers to seek consent from  
5019 individuals or their authorized third parties. It may, however, be impossible or  
5020 impracticable to contact all individuals or authorized third parties to obtain  
5021 informed consent, particularly when the group is large or its members are likely  
5022 to be deceased, geographically dispersed or difficult to track. Attempting to  
5023 locate and contact members of the group may raise additional privacy concerns,  
5024 especially when a relationship with individuals has not been maintained. Seeking  
5025 consent from only a partial set of group members may introduce undesirable bias  
5026 into the research. Financial, human and other resources required to contact  
5027 individuals and obtain consent may be so burdensome as to impose undue  
5028 hardship that jeopardizes the research.

5029 Where an REB is satisfied that consent is impossible or impracticable, Article  
5030 12.6(a) requires that the researcher propose an appropriate strategy for giving  
5031 notice to individuals or groups about the proposed research or, where such  
5032 notification is impossible or impracticable, that there be consultation with  
5033 representatives of the individuals or group, in accordance with Article 12.6(b).  
5034 For example, researchers may develop a way to sample the opinions of a subset  
5035 of individuals in the group or contact one or more organizations that are likely to  
5036 represent the views and interests of the individuals from whom tissue was  
5037 collected. The goal of notice or consultation is to provide an opportunity for  
5038 input regarding the proposed research.

5039 If researchers seek access to tissue in an established repository, the  
5040 organization that manages the repository may have already taken steps to  
5041 obtain consent from or notify individuals or authorized third parties, or to  
5042 engage in consultation with representative groups. The researcher should



5043 inform the REB of the extent to which the repository organization has  
5044 addressed these issues. If the REB is satisfied that issues of consent,  
5045 notification or consultation have already been addressed by the repository  
5046 organization, it may be unnecessary for the researcher to duplicate steps that  
5047 have already been undertaken.

5048 **Article 12.7** In the context of secondary research with tissue, researchers who wish to contact  
5049 individuals from whom tissue was previously collected must obtain research  
5050 ethics board approval prior to contact.

5051 **Application** Sometimes a research goal may be achieved only by follow-up contact with  
5052 individuals to collect additional information or biological samples. However,  
5053 contact with individuals whose previously collected tissue is sought for use in  
5054 secondary research raises privacy concerns, especially if a relationship with  
5055 these individuals has not been maintained. Individuals might not want to be  
5056 contacted by researchers. The research benefits of follow-up contact must clearly  
5057 outweigh the potential harms to individuals of follow-up contact, and the REB  
5058 must be satisfied that the proposed manner of follow-up contact is respectful and  
5059 minimizes potential harms to individuals.

## 5060 **E. Human Reproductive Tissue**

5061 This section sets out ethical guidelines relating to research involving human fetuses and fetal  
5062 tissue, embryos, stem cells and gametes. While research involving human reproductive tissue  
5063 has great promise for assisting the development of healthy pregnancies, curing illness, and  
5064 repairing or rebuilding tissue, some such research is objectionable to many. Accordingly, this  
5065 research has provoked vigorous debate. Discussion and reflection should continue as our  
5066 scientific understanding develops.

5067 Significant ethical issues include consent to research involving reproductive tissue, privacy  
5068 concerns of donors and research participants, and the potential for harm to an embryo or fetus.  
5069 Researchers and REBs have a continuing duty to remain mindful of the public interest in these  
5070 issues, and to respect policy, legal and regulatory requirements. In particular, researchers and  
5071 REBs should be aware of the detailed requirements and prohibitions found in the *Assisted*  
5072 *Human Reproduction Act*.<sup>2</sup>

5073 **Article 12.8** In addition to Articles 12.1 to 12.7 that apply to all research involving human  
5074 tissue, the following guidelines apply to research involving human  
5075 reproductive tissue.

5076 (a) Research using reproductive tissue or cells, in the context of an  
5077 anticipated or ongoing pregnancy, should not be undertaken if the  
5078 knowledge sought can reasonably be obtained by alternative methods.

5079 (b) No reproductive tissue should be obtained, for research use, through  
5080 commercial transaction.

5081 **Application** Because of the potential for harm to the woman or the fetus, Article 12.8(a)  
5082 recommends that the use of such reproductive tissue should be avoided where  
5083 pregnancy is anticipated or ongoing, if research goals may be accomplished  
5084 in some other way.

5085 Article 12.8(b) reflects concerns about the commercialization or  
5086 commodification of human reproduction. The purchase or sale, directly or  
5087 indirectly, of any human tissue for the purpose of creating a human being,  
5088 including any gamete or *in vitro* human embryo, is ethically unacceptable.

### 5089 **Research Involving Human Embryos**

5090 An embryo is a human organism during the initial period of its development following  
5091 fertilization or creation. It includes any cell derived from such an organism that is used for the  
5092 purpose of creating a human being. Any research in which fertilization occurs should be  
5093 regarded as research on embryos. The *Assisted Human Reproduction Act* prohibits the creation  
5094 of a human embryo specifically for research purposes.

5095 **Article 12.9** Research on embryos intended for implantation to achieve pregnancy is  
5096 acceptable if intended to benefit the embryo or to advance knowledge if:

5097 (a) Research interventions will not compromise the care of the mother, or  
5098 the subsequent fetus; and

5099 (b) Researchers closely monitor the safety and comfort of the mother and the  
5100 safety of the embryo.

5101 **Application** Research potentially altering the embryo by chemical or physical manipulation  
5102 should be distinguished from research directed at ensuring normal fetal  
5103 development. For example, the evaluation of potential teratogens and their  
5104 effects on certain cell lineages may use early embryos, but those embryos must  
5105 not be implanted for an ongoing pregnancy.

5106 **Article 12.10** Research involving human embryos that have been created for reproductive  
5107 purposes, but are no longer required by their donors for this purpose, may be  
5108 ethically acceptable if:

5109 (a) The ova and sperm from which they are formed were obtained in  
5110 accordance with Article 12.8;

5111 (b) Where the embryo was created using donor gametes, free and informed  
5112 consent was provided by the gamete donors; and

5113 (c) Embryos exposed to manipulations not directed specifically to their  
5114 ongoing normal development will not be transferred for continuing  
5115 pregnancy.

5116 **Application** Research on embryos requires the consent of the gamete donors. The REB may  
5117 not waive the requirement for such consent. In particular, researchers and REBs  
5118 should be aware of the Consent Regulation under the *Assisted Human*  
5119 *Reproduction Act*.<sup>3</sup>

## 5120 **Research Involving Fetuses and Foetal Tissue**

5121 The term “fetus” applies to the developing human being from fertilization to delivery,  
5122 whether alive or dead at delivery. Fetal tissue includes membranes, placenta, umbilical cord,  
5123 amniotic fluid and other tissue that contains the genetic information of the fetus.

5124 Research may be undertaken on methods to treat, *in utero*, a fetus that is suffering from  
5125 genetic or congenital disorders. Because the fetus and the woman cannot be treated  
5126 separately, any intervention to one involves an intervention to the other.

5127 **Article 12.11** With respect to fetal research:

5128 (a) Consistent with the requirements of Chapter 3 (“Free and Informed  
5129 Consent”), research involving a human fetus requires the free and  
5130 informed consent of the woman.

5131 (b) Research interventions should not compromise the woman’s ability to  
5132 decide whether to continue her pregnancy.

5133 **Application** Research involving a human fetus requires the free and informed consent of  
5134 the woman. Accordingly, research involving the use of fetal tissue should be  
5135 guided by respect for the woman’s dignity. Research methods on the  
5136 treatment of fetuses *in utero* thus pose no issues that are not addressed  
5137 elsewhere in this Policy. Researchers should ensure that a clear distinction is  
5138 made between consent to research use and consent for any clinical procedures  
5139 or testing. In practice, this may mean separate consent forms, but in any  
5140 event, the different uses must be clearly explained and understood by  
5141 participant-donors.

## 5142 **Pluripotent Stem Cell Research**

5143 **Article 12.12** Researchers who intend to conduct research to derive or use pluripotent stem  
5144 cells should follow the Canadian Institutes of Health Research Guidelines for  
5145 Human Pluripotent Stem Cell Research,<sup>4</sup> as amended from time to time.

## 5146 **Hybrids and Chimeras**

5147 Research involving the creation of hybrids and chimeras raise serious ethical concerns,  
5148 and federal legislation prohibits certain activities relating to their creation. Researchers  
5149 and REBs are referred to the *Assisted Human Reproduction Act* for guidance in this area.

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## Endnotes

<sup>1</sup> <http://www.cihr-irsc.gc.ca/e/29134.html>

<sup>2</sup> (2004, c. 2) <http://laws.justice.gc.ca/en/A-13.4/>.

<sup>3</sup> Assisted Human Reproduction (Section 8 Consent) Regulations (SOR 2007-137) <http://canadagazette.gc.ca/partII/2007/20070627/html/sor137-e.html> .

<sup>4</sup> The Guidelines for Human Pluripotent Stem Cell Research can be found at <http://www.cihr-irsc.gc.ca/e/15255.html>.

# Chapter 13

5150

5151

## HUMAN GENETIC RESEARCH

5152 Human genetic research involves the study of genetic factors responsible for human traits and  
5153 the interaction of those factors with each other and with the environment. Research in this area  
5154 includes identification of genes that comprise the human genome; functions of genes; and  
5155 characterization of normal and disease conditions in individuals, biological relatives, families  
5156 and groups; as well as studies involving gene therapy. Participants in clinical trials are  
5157 increasingly being asked to participate in genetic studies in addition to the primary clinical  
5158 trial. With the increasing prevalence of genetic research, researchers, research ethics boards  
5159 (REBs) and participants should be aware of the ethical issues that this research raises.

5160 Genetic research may have profound social impacts, both positive and negative. As genetic  
5161 research advances, genes and their alleles (versions) are being identified, but the function of  
5162 each gene and its relationship to disease conditions or other characteristics may not be clear.  
5163 In single-gene disorders, for example, an allele of a single gene is directly related to hereditary  
5164 disease. More commonly, diseases or personal characteristics are influenced by multiple genes  
5165 and environmental factors.

5166 Research may help us better understand the human genome and genetic contributions to health  
5167 and disease. It may lead to new approaches to preventing and treating disease. Individuals  
5168 may benefit from learning about their genetic predispositions if intervention strategies are  
5169 available to prevent or mitigate disease onset and symptoms, or otherwise promote health.  
5170 Genetic research also has the potential, however, to exploit or stigmatize individuals or  
5171 groups, who may experience discrimination or other harms because of their genetic status.

### 5172 **A. Application of Core Principles to Genetic Research**

5173 Genetic information has implications beyond the individual, because it may reveal  
5174 information about biological relatives and others with whom the individual shares genetic  
5175 ancestry. The participation of an individual in genetic research may therefore have  
5176 ramifications for these other persons or groups. In some cases, researchers specifically seek  
5177 to conduct genetic research with members of families or communities. Such research requires  
5178 particular attention to the social and cultural contexts in which participants live. Research  
5179 with families or communities may raise special considerations regarding recruitment of  
5180 participants, consent processes, privacy and confidentiality, and community engagement.

5181 **Article 13.1** Guidelines for informed consent, protections for privacy and confidentiality,  
5182 policies for research with human tissues, and other ethical guidance described in  
5183 earlier chapters of this Policy apply equally to human genetic research.

5184 **Application** In developing and reviewing proposals involving genetic research, researchers and

5185 REBs should refer to earlier chapters in this Policy, including Chapter 3 (“Free and  
5186 Informed Consent”), Chapter 5 (“Privacy and Confidentiality”) and Chapter 12  
5187 (“Human Tissue”). Other chapters relevant to the specific research proposal, such  
5188 as Chapter 9 (“Research Involving Aboriginal Peoples”) or Chapter 11 (“Clinical  
5189 Trials”) should also be consulted. This chapter does not reiterate principles set out  
5190 in earlier chapters. Rather, it focuses on issues that arise specifically in the context  
5191 of human genetic research and sets out ethical principles in regard to handling of  
5192 information revealed through genetic research, provision of genetic counselling,  
5193 participation of families and communities in genetic research, banking of human  
5194 biological materials, and research involving gene transfer.

## 5195 **B. Plans for Handling Information Revealed through Genetic** 5196 **Research**

5197 **Article 13.2** Researchers conducting genetic research must:

5198 (a) In their research proposal, develop a plan for handling information that may be  
5199 revealed through their genetic research;

5200 (b) Submit their plan to the research ethics board; and

5201 (c) Advise potential participants of the plan for handling information revealed  
5202 through the research, in order to obtain free and informed consent.

5203 **Application** The types of information that may be revealed through genetic research – and  
5204 implications of this information for participants and their biological relatives –  
5205 requires that researchers and REBs ensure that an appropriate plan is in place for  
5206 handling both anticipated and unanticipated information. In some cases, genetic  
5207 research may reveal known gene-disease associations or other information,  
5208 including incidental findings, that may be clinically relevant for individuals or their  
5209 biological relatives in treating or alleviating health conditions or risks. In other  
5210 cases, research may reveal information that is inconclusive in its scientific, clinical  
5211 or other implications. Genetic research may also reveal information about family  
5212 relationships, including non-paternity.

5213 This range of information varies in its possible implications for individuals. In  
5214 some cases, follow-up clinical testing and counselling may be recommended.  
5215 Information may also have implications for biological relatives and raise disclosure  
5216 considerations, as discussed in Articles 13.3(b) and 13.4. Genetic information may  
5217 also affect an individual’s eligibility for employment or insurance, for example, if  
5218 an individual who gathers genetic information is required to disclose disease  
5219 predisposition risks to participants’ employers or insurers.

5220 The plan for handling information should take into account factors such as  
5221 clinical relevance and anticipated benefits and harms for research participants  
5222 and other people whose interests are implicated. Plans may include return of  
5223 individual findings to participants or general notification of non-identifiable  
5224 research results through newsletters, websites or other means. In regard to release  
5225 or publication of research findings, the provisions of Chapter 5 (“Privacy and

5226 Confidentiality”) apply. In some cases, researchers may consider that the most  
5227 ethical course of action is not to return results of genetic research to participants  
5228 (for example, where clinical significance is unknown due to novelty of the  
5229 genetic investigation).

5230 **Article 13.3** Where researchers plan to return findings to individuals, participants in genetic  
5231 research should have an opportunity to:

5232 (a) Make informed choices about whether they wish to receive information  
5233 about themselves; and

5234 (b) To express preferences about whether information will be disclosed to  
5235 biological relatives or others with whom the participants share a family or  
5236 group relationship.

5237 **Application** An individual’s right to privacy includes a right not to know information  
5238 about himself or herself, and the principles on which this Policy is based  
5239 emphasize autonomous choices regarding research participation. To permit  
5240 participants to make informed choices about whether to receive information  
5241 about themselves, researchers should explain the types of findings that may be  
5242 revealed (as discussed in the Application of Article 13.2) and the potential  
5243 implications of these findings for the participant, and should give the  
5244 participant options for receiving different types of information. For example, a  
5245 participant may want to receive clinically important information, but decline  
5246 to receive information that is of unknown clinical significance.

5247 Where individual results will be returned to participants, researchers must  
5248 develop appropriate procedures for communicating results in accordance with  
5249 the participant’s preferences or instructions. These procedures should be  
5250 clearly described in the researcher’s plan. This may include direct  
5251 communication of results to the participant, or communication to a specified  
5252 health-care provider or other party authorized to receive the information. As  
5253 discussed below, provision of research results to individuals may give rise to a  
5254 need for genetic counselling.

5255 Participants in genetic research should have an opportunity to express their  
5256 preferences about disclosure of information to relatives or others, but these  
5257 preferences are subject to the researcher’s duty to warn, as described in  
5258 Article 13.4.

5259 **Article 13.4** Researchers may have an obligation to disclose information to biological  
5260 relatives of the research participant in exceptional circumstances. This may  
5261 include instances where genetic research reveals information about a serious  
5262 or life-threatening condition that can be prevented or treated through  
5263 intervention, even if the participant has expressed a preference against sharing  
5264 information. Researchers should inform participants of this obligation in the  
5265 plan for handling information.

5266 **Application** As discussed in Chapter 5 (“Privacy and Confidentiality”), researchers have  
5267 important obligations to maintain confidentiality of information. In genetic  
5268 research, however, situations may arise where researchers become aware that a  
5269 third party may be at high risk of a serious or life-threatening condition that can  
5270 be prevented or treated. In such exceptional circumstances, legal or ethical  
5271 imperatives may require that researchers disclose information they have obtained  
5272 in a research context. Researchers should explain this to participants during  
5273 informed consent discussions.

## 5274 **C. Genetic Counselling**

5275 **Article 13.5** Where researchers plan to return results of genetic research to participants, the  
5276 research protocol should make genetic counselling available at that time, where  
5277 appropriate.

5278 **Application** Where the plan for handling information revealed in genetic research involves  
5279 return of individual results to participants, genetic counselling may be required to  
5280 explain the meaning and implications of the information. For example, genetic  
5281 counselling can help explain the clinical significance of the information, whether  
5282 health-care interventions or lifestyle changes are recommended, and implications  
5283 of the information for biological relatives. Researchers should explain  
5284 differences between genetic testing in a research context and testing in a clinical  
5285 context. Clinical genetic testing may be needed to clarify or confirm results  
5286 obtained in research. Where researchers disclose information to biological  
5287 relatives or other family or group members, genetic counselling should be made  
5288 available to them and the research participants. While the service provider need  
5289 not necessarily be a genetic counsellor, he or she must have the experience or  
5290 training to provide genetic counselling.

## 5291 **D. Genetic Research Involving Families**

5292 **Article 13.6** Where researchers seek to recruit members of a family to participate in  
5293 genetic research, recruitment processes should be respectful of privacy and  
5294 other personal interests of family members. In seeking consent from members  
5295 of a family to participate in genetic research, researchers should ensure that  
5296 consent from each individual is free and informed.

5297 **Application** Recruitment of members of a family may take place in various ways. A family  
5298 group, such as parents and a child or several adult siblings, may all together  
5299 receive an invitation to participate in genetic research. Alternately, researchers  
5300 may ask an individual who has agreed to participate for permission to contact  
5301 family members who will receive a subsequent invitation to participate.  
5302 Family members may have conflicting views about participation in research,  
5303 and some may have specific sensitivities or objections. Researchers should  
5304 recognize the potential for conflict within families and be respectful of any  
5305 known sensitivities. They should also ensure that consent from each  
5306 individual is free and informed. Where researchers seek participation from  
5307 children or other members of a family who may lack capacity to give consent,



5308 applicable principles in Chapter 3 (“Free and Informed Consent”) must be  
5309 followed.

5310 In some situations, researchers may seek permission from an individual  
5311 participant to contact family members. Where appropriate to respect privacy  
5312 interests or known sensitivities, it may be preferable for the participant to  
5313 make initial contact with the family member. Alternately, the participant may  
5314 identify a third party who may be asked to make initial contact with the family  
5315 member to provide them with information about the opportunity to participate  
5316 in genetic research. An approach by someone in a position of authority over  
5317 the family member may raise concerns about undue influence or  
5318 manipulation. Refer to Chapter 3 (“Free and Informed Consent”) for further  
5319 guidance in regard to voluntariness of consent.

5320 **E. Genetic Research Involving Communities**

5321 **Article 13.7** Where researchers intend to recruit participants for genetic research based on  
5322 their membership in specific communities, it may be appropriate for  
5323 researchers to consult with community leaders or representatives, in addition  
5324 to seeking free and informed consent from individual participants. In these  
5325 cases, researchers must provide details to the research ethics board about their  
5326 proposed methods for seeking engagement or consultation.

5327 **Application** Some genetic research seeks to explore genetic variations within specific groups  
5328 or communities. Such research may raise ethical concerns regarding  
5329 stigmatization or exploitation of groups, as well as social disruption in  
5330 communities, especially if individual members disagree about participation in  
5331 research. Researchers may have an ethical obligation to seek the engagement of  
5332 leaders or representatives of the community or to consult with community  
5333 members about the proposed research. This duty will depend on factors such as  
5334 the objectives of the proposed research (in particular, the extent to which  
5335 membership in, or characteristics of, the community are a key aspect of the  
5336 research), the potential benefits and harms of the research to the community, the  
5337 nature of the community from which participants will be recruited, and the  
5338 community’s organizational structure.

5339 Individuals within a community may have conflicting views about participation  
5340 in research, including disagreements between leaders and members. Such  
5341 conflicts may involve attempts by some to influence or coerce choices of others  
5342 about whether to participate in research. Researchers should recognize the  
5343 potential for conflict within groups and ensure that consent and consultation  
5344 processes foster free and informed decisions by individual members of a  
5345 community. Refer to Chapter 3 (“Free and Informed Consent”) for further  
5346 guidance in regard to voluntariness of consent.

5347 Chapter 9 (“Research Involving Aboriginal Peoples”) articulates specific  
5348 applications of the principles relevant to research involving Aboriginal peoples,  
5349 which arise from historical examples of inappropriate treatment of Aboriginal

5350 peoples in research. Researchers who propose to conduct genetic research within  
5351 Aboriginal communities or to use materials obtained from Aboriginal peoples  
5352 and that have implications for Aboriginal peoples should refer to the detailed  
5353 discussion in that chapter for further guidance.

## 5354 **F. Genetic Material Banks**

5355 **Article 13.8** (a) Researchers who propose research involving prospective collection and  
5356 banking of genetic material must indicate in their research proposal, and  
5357 inform potential research participants, how they plan to address the  
5358 associated ethical issues, including confidentiality, privacy, storage, use of  
5359 the data and results, withdrawal by the participant, and future contact of  
5360 participants, families and groups.

5361 (b) Researchers who propose research involving secondary use of previously  
5362 collected and banked genetic material must, likewise, indicate in their  
5363 research proposal how they plan to address associated ethical issues.

5364 **Application** As discussed in Chapter 12 (“Human Tissue”), collection of human tissues and  
5365 genetic material and their retention in biobanks provides an increasingly  
5366 important research resource. Principles for research involving human tissue (see  
5367 Chapter 12) apply to banking of genetic material. Section C (“Tissue Storage and  
5368 Banking”) of Chapter 12 provides guidance for prospective creation of biobanks  
5369 of genetic material, and Section D (“Secondary Use of Previously Collected  
5370 Tissue”) addresses access to and use of previously collected genetic material.  
5371 Researchers who intend to bank genetic material should inform participants of  
5372 the potential for secondary use. Principles regarding secondary use set out in  
5373 Chapter 5 (“Privacy and Confidentiality”) are also relevant.

## 5374 **G. Gene Transfer**

5375 Principles set out in Chapter 11 (“Clinical Trials”) apply to clinical trial research involving gene  
5376 transfer. In the context of gene transfer research, researchers and REBs should pay careful  
5377 attention to the need to assess safety, minimize risk, and avert therapeutic misconception.  
5378 Researchers have obligations to share new information that may be relevant to continuing  
5379 consent, and to follow up with participants to identify adverse events.

5380 **Article 13.9** Gene transfer research that involves alteration of human germline cells is  
5381 governed by statute in Canada under the *Assisted Human Reproduction Act* and  
5382 its regulations. Researchers must be aware of how these apply to their work.

5383 **Application** Gene alteration involves the transfer of genes into cells to induce an altered  
5384 capacity of the cell. Viruses are commonly used vectors (carriers) to introduce  
5385 the gene into the host genome. Gene alteration is irreversible: the cell and its  
5386 descendants are forever altered and introduced changes cannot be removed. The  
5387 possible use of germline alteration in the embryo implies changes that could be  
5388 transmitted to future generations.

5389 In other research situations, the special circumstances of gene transfer must be  
5390 explained to potential research participants (or authorized decision-makers)  
5391 during the process of free and informed consent. This includes providing  
5392 information about uncertain and potentially latent risks of gene transfer and any  
5393 processes for long-term follow up of participants. Principles regarding inclusion  
5394 in research (see Chapter 4 [“Inclusion in Research”]) should be followed where  
5395 gene transfer research involves children or others who may lack capacity to  
5396 consent for themselves.

5397 Scientific research in these areas – and associated ethical debate – is evolving  
5398 rapidly, and researchers must be aware of current law and also be guided by the  
5399 core principles of this Policy.

#### 5400 **References**

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- 5401 • The *HumGen* database provides a comprehensive source of literature, policies and laws  
5402 regarding human genetics, including Canadian and international content.  
5403 <http://www.humgen.umontreal.ca/int/> .