Designing Empirical Research in Scientific Ethics

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Ask yourself…

- Why is the question/issue an ethical matter?
- Why is this question of interest with a particular population?
- How could the information I generate be used?
- Why should other people care?
SEXUAL LIBERATION AND ETHICAL STANDARDS

Don’t try to control us!
We can make our own sexual choice decisions.

- In 1976-78 – proposed APA ethics code revisions included a prohibition on sexual intimacies between students and their psychologist educators.
- Sexually “liberated” female APA members complained that such a standard amounted to efforts at paternalistic control.
- The APA ethics committee backed down, but some wondered about the actual circumstances and aftermath of such relationships.
Sexual intimacy in psychology training: Results and implications of a national survey

- National survey of the APA Psychotherapy Division (48% return rate; N=481):
  - 10% of respondents reported sexual contact as students with their educators.
  - 13% reported entering sexual relationships as educators with their students.
  - 2% believed that such relationships could be beneficial to trainees and educators.
- Gender differences were significant:
  - 16.5% of women, compared with 3% of the men, reported sexual contact as students.
  - 19% of men, compared with 8% of the women, reported such contact as psychology educators.
  - 12% of the males, compared with 3% of the females, reported sexual contact as psychotherapists with their clients.
Sexual contact in psychology training programs seemed to be increasing:

- 25% of the recent female graduates had had sexual contact, compared with only 5% of those with degrees for more than 21 yrs.

- The literature on ethics, standards, research, theory, and practice leaves both psychology graduate students and those psychologists responsible for their education without clear expectations, information, or guidelines concerning sexual intimacy in psychology training. This article represents an attempt to raise the issue and to present some initial information.

The Relationship Between Perceived Organizational Justice and Scientific Dishonesty, funded by a cooperative grant from the Office of Research Integrity and NIH. Grant No. R01 NS42454.
IRBs from an Organizational Justice Model

- Some IRBs exercising appropriate oversight may contribute to deceit on the part of investigators who feel unjustly treated.

- An organizational justice paradigm provides a useful context for exploring why certain IRB behaviors may lead investigators to believe that they have not received fair treatment.

- Such feelings may lead to intentional deception by investigators that IRBs will rarely detect.

- Paradoxically, excessive protective zeal by IRBs may actually encourage misconduct by some investigators.

- By fostering a climate in which investigators perceive that they receive fair and unbiased treatment, IRBs optimize the likelihood of collegial compliance with appropriate participant protections.
Illustrative Examples

- An investigator regards her IRB as unresponsive and arrogant. Now she purposely collects most of her research data as “regular educational assignments” carried out in the classroom or as required homework. When a data set looks interesting enough to publish, she submits a protocol requesting use of data already collected for non-research purposes.

- An investigator became frustrated because her institution’s IRB takes extended periods of time to render decisions on her protocol submissions, even when they fell into an “exempt” category. In response, she routinely begins data collection before the IRB has rendered a decision.

- An investigator has experienced numerous problematic interactions with the IRB, most involving what he perceives as demands for picky changes that compromise the quality of his designs. He now writes, in elaborate detail, content he knows will likely bore readers and make no waves, while omitting or distorting elements of his projects which he believes might cause his IRB to balk. He has used this technique for his last seven proposals, and every one gained approval without question.
An investigator’s institution imposes strict requirements for consent and allowable risks that considerably exceed federal guidelines. The investigator believes his proposal will fail to gain approval by this IRB, so he does not seek it. He reasons that he has no moral obligation to obey the dictates of what he regards as “a rigid and anti-scientist authority.” As a prolific publisher, he willingly takes the chance that a publication based on a protocol never submitted to the IRB will pass unnoticed.

An investigator felt badly mistreated when, even after two appeals to the IRB, his research proposal could not gain approval without what he and several colleagues with whom he consulted believed were unnecessary and time-consuming changes. He needs another publication to bolster his upcoming tenure review, but the IRB has taken over four months to review his appeals. Despite guilt-ridden qualms, he submits a paper for publication reporting his procedure as conforming to IRB mandates using data he contrived.
The Institutional Research Board – Researcher Assessment Tool (IRB-RAT) is available free for downloading at:

http://www.ethicsresearch.com/freeresources/irbmmaterials.html
HOW OFTEN TO SCIENTISTS NOTICE CHEATING AND WHAT HAPPENS WHEN THEY DO?

doi:10.1038/466438a
NIH focuses on FF&P, but there’s more…

- We surveyed more than 5,000 names in the NIH CRISP data base.
- 2,599 respondents reported 3,393 accounts of suspected wrongdoing and other errors related to the conduct of research.
- Only 406 of those responding stated that they had no incidents to share.
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<thead>
<tr>
<th>Type</th>
<th>Number of Incidents</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Fabrication/falsification</td>
<td>608</td>
<td>17.3%</td>
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<tr>
<td>Questionable publication practices (e.g., disputed authorship credits)</td>
<td>601</td>
<td>17%</td>
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<tr>
<td>Plagiarism</td>
<td>462</td>
<td>13.1%</td>
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<tr>
<td>Difficult or stressful work environment (e.g., mistreatment of subordinates, sexual harassment or other forms of exploitation)</td>
<td>432</td>
<td>12.3%</td>
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<tr>
<td>Incompetence (e.g., poor research design or inappropriate analysis, insufficient skills relative to the study technique)</td>
<td>420</td>
<td>11.9%</td>
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<tr>
<td>Type</td>
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<td>Carelessness (e.g., cutting corners, sloppy record keeping)</td>
<td>334</td>
<td>9.5%</td>
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<td>Intentional bias (e.g., rigging a sample or method to favor a certain outcome)</td>
<td>176</td>
<td>5%</td>
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<td>Failure to follow the rules of science (e.g., violating human research participant requirements, sidestepping or ignoring IRB directives)</td>
<td>169</td>
<td>4.8%</td>
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<tr>
<td>Inadequate supervision of research assistants</td>
<td>136</td>
<td>3.9%</td>
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*Respondents could report more than one type of incident.*
JANE NOTICED THAT BOB SEEMED TO BE DELETING THE DATA THAT DIDN'T FIT....

SHE DECIDED TO GENTLY INTERVENE.

You know, I think some data may have been left out of our analysis...
Suggestions based on your interests

- How do understudied or under-reported PPPs (potential participant populations) view research?
  - Consent/assent/permission?
  - Cultural/religious values?
  - Therapeutic misconception?

- Differences in how PPPs and investigators perceive “risk.”

- What actual risks (if any) followed participation in particular research projects.
Suggestions based on your interests

- How do PPPs view potential harms attributed by investigators (e.g., stigma)?
- How do the risk perspectives of PPPs align or diverge from those of IRB members?
- What decision making priorities influence PPPs’ consent behavior or participation decisions? How do these priorities vary across national boundaries, gender, rural/urban environs, and other key demographics?
Suggestions based on your interests

☐ Which factors have the greatest population salience in communicating information about research participation (e.g., language, communicator variables, delivery mechanism)?

☐ What salutary effects follow research participation (e.g., enhanced adherence, enhanced self-esteem, nothing good)?

☐ What benefits or harms follow participation in studies that involve social networking.