Ethics in Psychological Research

As behavioral scientists, there are two domains of ethical responsibility:

1. Truthfulness, integrity, etc. in the collection, interpretation and dissemination of data and theory.
2. Humane (ethical) treatment of participants (animal or human).

I. Integrity

It is the scientist’s responsibility to present the data and not alter, fabricate or suppress it. It is the scientist’s responsibility not to deliberately misstate a theory or other scientists’ data. Finally, it is the scientist’s responsibility not to deliberately omit relevant, prior work.

When fraudulent data are published, it is eventually discovered because others try to replicate the results.
II. Ethical Treatment of Subjects

A) Human Participants

The basic principles from the Belmont Report are Beneficence, Respect for Persons (Autonomy), and Justice.

Beneficence – The research should lead to a benefit (to science, the participants, the society) relative to the risks to the participant from the research.

Respect for Persons – This principle is also called autonomy. People have the right to run their own lives.

Justice – The research should benefit as many people/groups as possible. The risks should also be “spread out” and not just dumped on some individuals/groups.
In order to deal with these three principles and see how a research project would be evaluated with respect to these principles, we will look at 7 topics.

- Evaluation of the risk/benefit ratio
- Informed consent
- Use of deception
- Individual freedom to withdraw
- Subject selection
- Debriefing
- Privacy & Confidentiality of data
1. Risk/Benefit ratio. Do the benefits outweigh the risks? Are there psychological, social, financial, and/or physical risks to the participants from the study? What steps are taken to minimize the risks? What are the benefits to the participant or society from the research? If the risk to the participants is no greater than that in daily life, the study is deemed to have minimal risk.

Note here that risk is the “net” risk. Basically, what is the state of the participant at the end of the study.

2. Informed Consent. Explain the procedures to be used and any details that the participant needs to know to decide whether or not to participate. Extra steps are needed here for minors (parental consent), cognitively impaired individuals, and others who might feel coerced into participating (coercion is unacceptable).
3. Use of Deception. Are there aspects of the study that are concealed from the participant? Are they misled during the study? Is this necessary for the conduct of the study? Is the risk to the participant greater than minimal? (If so, deception is not allowed.)

4. Freedom to Withdraw. Individuals have the right not to participate and may withdraw at any time even if they do consent to participate.

5. Subject selection. Who are the participants and why? If it is not the general population, why a specific subpopulation? Is this scientifically justified? Does this limit the generality of the results (who benefits)? Does this expose a subgroup to excess risk?
6. Debriefing. Any aspects not explained in the initial informed consent should be explained in debriefing. The use of deception should be explained. However, debriefing should not increase the risk to the participant.

7. Privacy & Confidentiality. How is the privacy of participants protected? How is the confidentiality of the data protected? Individual data (linked to individual identity) and the identity of participants are confidential and not to be revealed (unless authorized by the participant). Limits on this include mandated reporting of child or sexual abuse and situations where the participant is a threat to themselves (suicide) or others.
There are gray areas and situations where one rule will conflict with another.

Is the risk to the subjects worth the benefit to either the subjects or society?

What if maintaining confidentiality would harm the subject (or others)?

What if a full debriefing would (could) produce more undesirable consequences than it prevents?

What if the subject feels coerced into participating or is not capable of giving informed consent? Alternatively, what if even telling the participant, in advance, that they are in a study would alter their behavior?
Example: Informed consent and deception/incomplete disclosure.

You are interested in the speed of reading for various types of material. Your instructions to the subjects emphasize that they will read material but be tested for comprehension. No mention of speed is made since you are concerned that subjects would alter their reading if you did.

This is done to control subject reactivity.

The issue is that humans change their behavior depending upon the instructions that they are given to reflect social or group norms and to make a particular impression on other individuals. However, this is often NOT what the experimenter is interested in.
The key here is whether any information is being withheld from the individual that is necessary for them to make an informed decision about participation and the level of risk to the participants. In this case, there is no substantive risk to the participant. The actual study is explained to them. The omission of what the experimenter is interested in does not alter the risk. The participant does have sufficient information to give informed consent. The real question being investigated would be explained in the debriefing.

This is a simple example of incomplete disclosure. However, the underlying issue remains – human and animal behavior can change when the conditions of observation are changed. Deception is one method of attempting to control this.
Example: *Freedom to withdraw and Coercion.*

You are an Introductory Psychology student. As a course requirement, you can participate in 8 hours of experiments or write a series of short papers describing research from journal articles or mix these two to achieve 8 credits. Are you free to participate or not? Is this coercion?

1. No student has to participate in any study. An alternative that achieves a similar educational goal is available.

2. The students choose which study(s) to participate in. Further, they receive credit for participation if they show up, listen to the instructions and then decline to continue. They are also told of this as part of the instructions.
Example: Uses of Debriefing

Most studies are straightforward. However, in a study of the influence of mood on problem solving where the experimenter manipulates mood, the experimenter might not tell the subject the true purpose (deception), to avoid reactivity. So, after the experiment, the experimenter is to fully debrief the subject about the purpose of the experiment and the methods and ameliorate any mood change induced by the experiment (net risk).

What if participants had been prescreened for "risk" for depression? Should they be told about why they were selected? Does telling the participant that they are at risk for depression have the potential for causing more harm than not telling them?
B) Use of “drugs” in human research

Additional issues here center around the effects of drugs so the research will be as safe as possible.

For example, in research on the effects of alcohol on behavior, subjects stay in the laboratory until after the effects of the alcohol have dissipated. This is an example of aftercare.

Drugs or procedures that involve medical or health risks also involve using trained personnel as part of the research team.

What would/should happen if a participant in an alcohol study wanted to leave before their BAL had returned to a low and safe level?
C) Animal subjects

Two basic questions:

1. Is it ethical to use animals in research?

2. If yes, how do we treat them?

Against: Animals have rights.

1. Animals feel pain and their lives can be permanently altered or destroyed, just like humans.
2. Destroying or harming any living thing is dehumanizing.
3. Claims about scientific progress (at the expense of animals) are a form of racism.

To summarize, treating humans as having rights that don't extend to animals is a form of speciesism.
For:

1. Deliberate pain and suffering is not inflicted except where the benefit far outweighs the cost. Most behavioral research does not involve this.
2. Not everyone agrees that the destruction of animals is dehumanizing (at least not as a blanket statement).
3. Equating animals and animal rights with humans and human rights is just plain wrong.

Note that scientific progress at the expense of animals sometimes benefits animals (veterinary care) and has led to tremendous benefits to humans. Conversely, medical research with humans has also led to advances in veterinary care for animals (treatment of cancer, oral/dental care, allergies, etc).
Guidelines for treatment of animals include:

2. All personnel are trained in appropriate care & treatment of animals.
3. Housing, food, etc. for animals meets standards.
4. Pain and discomfort minimized and only allowed were alternatives do not exist and they are justified by benefits of research.

One of current issues is the extent to which new theoretical developments (computer models for new drugs, virtual reality for training neurosurgeons, etc.) can be used to replace animal research.
III. Monitoring Ethical Practices

Before any research is done involving humans or animals, there should be a review of the research procedures by an Institutional Review Board (IRB).

At UB, all research involving humans or animals as subjects must be reviewed and approved by the appropriate board before it is conducted.

Human subjects review boards (IRBs) must include people qualified to review the types of research. There needs to be a specialist in legal issues available. There needs to be someone who is not employed by the university or institution. There should be individuals trained in and familiar with issues related to ethics and morality. There must be a non-scientist on the board. The issue here is to get relevant perspectives included in the review.
The Social and Behavioral Sciences Institutional Review Board (SBSIRB) monitors behavioral sciences research with human participants at UB. There are separate (other) boards for biomedical research with humans, children, and research with animals.

These committees assess the risk to participants in the proposed study and the risk/benefit ratio and checks other requirements (informed consent, debriefing, etc.) for all proposals.

To see the requirements, review process and paperwork for the SBSIRB, go to:

http://www.research.buffalo.edu/rsp/IRB/Behavioral_Sciences/
Answers for Chapter 2 Review

The scientific literature, including journal articles, is much more likely to be accurate in its presentation of facts and conclusions than other sources from the internet.

First, the scientific method has been used. This means that the research is built upon what we already know, uses repeatable methods for collecting data and can be independently repeated (verified) by others.

Second, it has been peer reviewed. This review by other scientists is designed to ensure that the article has been done to the standards of the discipline and not overlooked previous findings or alternative interpretations and that all of the necessary details of the research are well described.
The Wikipedia is an interesting “hybrid”. The articles can be written and edited by anyone. Thus, it has a means for correction and a process of review. However, the standards for information collection are not “public” and the evaluation/editing is not done based on the same set of standards as behavioral science or (necessarily) expertise.
Sample Multiple Choice (chapter 2) Answers:
1. – d;  2. – a;  3. – a
Exercise for Chapter 3

There are web based tutorials and training modules on the use of human participants in research. UB requires that all research personnel that have contact with human participants complete the web-based training at:

https://www.citiprogram.org/default.asp

A link to the CITI web site and instructions can be found on the SBSIRB web page under educational requirements.

Investigators are also responsible for reading the Belmont Report (ethical principles and guidelines for the protection of human subjects). Both of these are a very useful review for the concepts involved with the ethics of human participant research. The Belmont Report can be found at:

http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.html
Other information about human participants in research and ethics can be found at:

http://www.hhs.gov/ohrp/index.html

This is the home page of the Office for Human Research Protection (OHRP) which a part of the National Institutes of Health.
Conceptual Review for Chapter 3

1. Can deception be used in a study with greater than minimal risk? If you think that this is inappropriate, explain why. If you think that it can, explain how you ensure that the standards for ethical treatment, including informed consent, are met.

2. A new drug has been developed for the treatment of viral infections such as AIDS. Would you allow it to be tested on human volunteers without prior testing with animals?

(Assume that there is an animal equivalent of AIDS in an animal with an immune system similar to humans.)
Sample Questions, Chapter 3

1. The use of a numeric code to identify each participant in a study is intended to: a) allow complete debriefing  b) reduce the risk to the participant  c) ensure the confidentiality of the participant and their data  d) b & c above

2. Which of the following are basic elements involved in the ethical treatment of human subjects? a) informed consent  b) the right of the subject to terminate participation at any time  c) the evaluation of the risk to the subject in relation to the benefit from the research  d) all of the above

3. Debriefing is given after an experiment: a) and includes giving all participants access to the results of their own data  b) in its entirety, under all circumstances  c) with both intention of removing any possible damaging effects of the experimental procedure, and not to leave the subject worse off than prior to participation  d) all of the above