

**WHO ERC  
Guide for Principal Investigators**

**Introduction- conducting ethical research**

WHO follows the World Medical Association Declaration of Helsinki (1964), amended in 2000, and further revised in 2008 as well as the CIOMS *International Ethical Guidelines for Biomedical Research Involving Human Subjects* published in 2002. During the ethical review of a protocol, the WHO ERC evaluates the risks and benefits to the research participants and research communities in the following domains:

- Respect for persons*
- Justice*
- Autonomy*

The table below lists examples of the potential risks/harms and benefits that may accrue to research participants as a result of taking part in research.

<i>Risks/Harms</i>	<i>Benefits</i>
<i>Physical harm</i>	<i>Access to treatment/ Free treatment</i>
<i>Social harm/social risk</i>	<i>Emotional support</i>
<i>Emotional harm/risk</i>	<i>Psycho-social support</i>
<i>Stigmatisation</i>	<i>Humanitarian</i>
<i>Loss of privacy</i>	<i>Contribution to society</i>
<i>Insensitivity to vulnerabilities, exposing individuals to various types of harms/risks</i>	<i>Others</i>
<i>Sharing of confidential information resulting in tangible or intangible losses</i>	
<i>Perpetuation of gender and other biases</i>	
<i>Others</i>	

**Purpose of the ERC Guide**

This guide has been designed by the WHO ERC to help to ensure that all the elements necessary for the development of a complete and ethically sensitive protocol are covered. The guide consists of a series of questions that address key considerations in the design of research protocols, development of informed consent forms and recruitment/information material. It is divided into 2 sections. Section 1 raises key questions related to scientific and technical issues of the protocol. Section 2 consists of questions around key ethical issues that should be addressed in the protocol (including in a section on ethics), as well as informed consent forms and recruitment/information material for participants.

As this guide functions as a 'self checklist', check boxes have been included to help researchers flag areas that require more attention. Researchers are **not required to fill in these boxes or to submit this document to the ERC**. Please note that not all the elements described here are relevant to all protocols. Please ensure that those items which correspond with the research you are conducting are included in your submission to WHO because they will be assessed by WHO Ethics Review Committee reviewers.

## **SECTION 1 PROTOCOL (SCIENTIFIC AND TECHNICAL ISSUES)**

The ethical integrity of research depends substantially on its design and methodology. Consequently, the following section includes key questions on scientific and technical issues that should be included in the research protocol. This section does not provide guidance on how to design a study, but rather raises key technical and scientific issues that need to be well explained in study protocols. For guidance on how to design a research study, please consult the following link:

[http://www.emro.who.int/publications/pdf/healthresearchers\\_guide.pdf](http://www.emro.who.int/publications/pdf/healthresearchers_guide.pdf)

The ERC website also has additional guidance documents on writing research protocols and informed consent forms, available at the following link:

[http://www.who.int/rpc/research\\_ethics/format\\_rp/en/index.html](http://www.who.int/rpc/research_ethics/format_rp/en/index.html)

### ***Background information***

1. Is the rationale for the study clearly stated in the context of present knowledge?
2. Have you included a review of literature with references?
3. Have you described the study setting?

### ***Goals and objectives***

4. Are the objectives and/or hypothesis to be tested clearly stated?

### ***Study Design***

5. Have you provided a clear description of the study design (e.g. whether it is basic science research, social science research, or epidemiological - observational or intervention - research) and the study participants, outcomes and intervention and control groups (if relevant)?

### ***Methodology***

6. Is an estimate of sample size provided, along with the assumptions on which it is based?
7. Are the inclusion and exclusion criteria clearly stated?
8. Are the procedures for participant recruitment, admission, follow up and completion fully described?
9. Are the laboratory tests and other diagnostic procedures fully described?
10. Does the protocol include information on procedures that are experimental and part of the research, as opposed to those that are part of routine care?
11. Does the protocol describe how the specimens and/or data will be coded/anonymised?
12. If the study is an intervention study, including placebo controlled trials, is justification for the control group provided?
13. If the study is an intervention study, are the types and methods for subject allocation to intervention and control group clearly explained?

### ***Participant safety***

14. Have any risks to participating in the research been identified and does the protocol state how these will be minimized?



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15. If the research involves new drugs or vaccines, is clearance from the national drug regulatory authority attached?

16. If the research involves new drugs or vaccines, is the Investigator's Brochure (including safety information) attached?

17. If the study is an intervention study, is a Data Safety Monitoring Board (DSMB) envisaged? If yes, has information about the DSMB been included, such as terms of reference and list of members?

18. If the study is an intervention study, is a plan for adverse event reporting included in the protocol?

***Data Management and Statistical Analysis***

19. Does the protocol include a discussion on the quality assurance mechanisms for data collection, storage and analysis?

20. Is the plan for statistical analysis provided?

***Expected outcomes and dissemination of results***

21. Does the protocol indicate how the study will contribute to advancement of knowledge and how the results will be utilized?

22. Does the protocol include a plan for the dissemination of results, not only to the research community (through open access online publication, and other journal publications) but also to policy makers (through meetings, reports etc) and back to the research participants and research communities (through community meetings, flyers, leaflets etc)?

***Gender issues***

23. Does the protocol discuss how the research contributes to identifying and/or reducing inequities between women and men in health and health care or does not perpetuate gender imbalances?

***Project Management***

24. Does the protocol state the expected duration of the project?

25. Does the protocol describe the role and responsibility of each member of the team?

***Study instruments***

26. Where questionnaires, diary cards and other materials are used, are these relevant to answer the research questions?

27. Are they provided in English? (translations should be submitted after an English version has been approved by the WHO ERC)

28. Are they written in lay language, worded sensitively and easily understood?

29. Where applicable, have Case Report Forms, Adverse Event forms etc been prepared and are they included?

***Ethical issues (see section 2 for detailed guidance on addressing ethical issues in the study protocol)***

30. Does the protocol include a discussion of ethical issues? (See section 2)

31. Have consent forms been prepared? Are these included? (See Section 3)



32. Have assent forms been prepared for children aged between 12 and 18 years? Are these included?

### SECTION 2- Protocol (Ethical Issues)

*Please ensure that your protocol minimizes harms and maximizes benefits to the research participants, and discuss under ethical issues how this has been achieved. The sections below outline key ethical considerations and are included to assist you in identifying and addressing the ethical issues that may be posed by your research.*

#### ***Process for gaining informed consent***

1. Have you described the process through which informed consent will be obtained? Where written consent from participants is not possible, have you explained the reasons for this and how the agreement of participants will be recorded?

2. Is this a cluster randomized controlled trial? If so, has the process of taking consent for the clusters to be included in the trial described? If this is not possible, is information provided to all communities participating in the trial? Is the process of taking consent from individuals in the clusters before they participate in any study procedures or data collection described? \*

\* Community leaders cannot give 'consent' on behalf of individuals in communities to participate in randomized controlled trials, but rather permission to approach individuals in communities to invite their participation.

#### ***Vulnerable populations***

3. Is a vulnerable population being studied (i.e. any of the following)?

- pregnant women, children, adolescents, elderly people, people with mental or behavioural disorders, prisoners, refugees, those who cannot give consent (unconscious), others?

4. If a vulnerable population is being studied, is the justification adequate? Have adequate provisions been made to ensure that the vulnerable population is not being exploited?

#### ***Risks vs. benefits of the study***

5. Has the individual risk vs. the benefits from research been adequately addressed?

6. Does the protocol describe whether and how communities from which the participants are to be drawn are likely to benefit from the research?

7. Is the research outcome also likely to benefit communities beyond the research population?

#### ***Autonomy/Incentives/Coercion***

8. Is the design of the study free of inducements to participate in the research?

9. Are the research participants free not to participate or to leave the research at any time without penalty?

#### ***Privacy/Confidentiality***

10. Does the study outline the procedures for the protection of the privacy and psycho-social needs of the participants?

11. Are there mechanisms to ensure the confidentiality of the data?

#### ***Monitoring safety/protection***

12. Do provisions exist in the proposals to deal with adverse reactions associated with the research (medical/physical/emotional/psychological) as well as coincidental findings during the course of the research (e.g. through blood tests etc)?



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13. When appropriate, do provisions exist for counselling research participants prior to, during and after the research?

14. Are there issues that may affect the safety of the researchers involved in the study? How are these being addressed?

### SECTION 3 - Informed consent forms (ICFs)

Informed consent forms must be submitted to the ERC along with the study protocol. The ERC has developed templates of informed consent forms in order to assist the Principal Investigator in designing ICFs. However, it is important that the Principal Investigators adapt their own ICFs to their particular study and include the relevant information for participants. In addition, the logo of the collaborating institution must be used on the ICF and not the WHO logo. ICF templates are available at the following link: [http://www.who.int/rpc/research\\_ethics/informed\\_consent/en/](http://www.who.int/rpc/research_ethics/informed_consent/en/)

Some additional questions are included below to provide guidance on addressing key issues in the content and format of information sheets and consent forms.

#### *General format and content*

1. Does the informed consent form make it clear that the participant is being asked to participate in research?
2. Is the information sheet free of technical terms and written in lay-person's language that is easily understandable and appropriate to the educational level of the community concerned?
3. Does it describe why the study is being done and why the individual is being asked to participate?
4. Does it provide participants with a full description of the nature, sequence and frequency of the procedures to be carried out, including the duration of the study?
5. Does it explain the nature and likelihood of anticipated discomfort or adverse effects (including psychological and social risks) if any, and what has been done to minimize these? Does it state the action to be taken should these occur?
6. Does it outline the procedures to protect the confidentiality of data, and if confidentiality is not possible due to the research design, has this been conveyed to all relevant persons?
7. Does it inform the research participants that their participation is voluntary and they are free to decide whether or not to participate, or to withdraw at any time and for any reason without further penalty either personal or professional or affecting their future medical care?
8. Does it describe the nature of any compensation or reimbursement to be provided (in terms of time, travel, man-days lost from work, etc)?
9. Does it outline how participants will be informed of the progress and outcome of the research?
10. Does it provide the name and contact information of a person who can provide more information about the research project at any time?
11. Has a provision been made for subjects incapable of reading and signing the written consent form (e.g. illiterate patients)?
12. Does a provision exist for participants incapable of giving personal consent (e.g. because of cultural



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factors, children or adolescents less than the legal age for consent in the country in which the research is taking place, participants with mental illness, etc) to express their decision?

### **Questionnaires**

13. If questionnaires will be used for the research, does the information sheet and consent form describe the nature and purpose of the questions to be asked, and if applicable, state if some questions may prove embarrassing for the participant?

14. State that the participant is free to not answer any question?

15. Where applicable, make it clear that the interviews (in-depth or focus group discussions) are likely to be audio or video taped?

16. Where applicable, mention how and for how long are the tapes going to be stored?

### **Human biologic materials (tissues, cells fluids, genetic material or genetic information)**

17. If human biologic materials are to be collected, does the information sheet and consent form describe in simple language the nature, number and volume of the samples to be obtained and the procedures to be used to obtain them?

18. Indicate if the procedures for obtaining these samples are routine or experimental and if routine, are more invasive than usual?

19. Describe the use to which these samples will be put both in the study and in the longer term?

20. Does it include a provision for the subject to decide on the use of left over specimens in future research of a restricted, specified or unspecified nature?

21. State for how long the specimens can be kept and how they will finally be destroyed?

22. Mention that genetic testing/genomic analysis will be carried out on the human biologic materials, where applicable?

### **Participant Recruitment Material**

If you plan to use participant recruitment material (e.g. advertisements, notices, media articles, transcripts of radio messages) please review the material in light of the following questions.

1. Is the information provided in both English and in the local language?

2. Can you support the claims made?

3. Does the material make promises that may be inappropriate in the research setting (e.g. provide undue incentives, emphasize remuneration)?

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This guidance is complementary to information and advice provided by the WHO technical unit or available on the department specific website. For additional guidance materials on preparing a research proposal that satisfies ERC requirements, as well as the process of ethics review please see the link

[http://www.who.int/rpc/research\\_ethics/guide\\_rp/en/index.html](http://www.who.int/rpc/research_ethics/guide_rp/en/index.html)