

SOP Title:	Vulnerable Populations		
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1.0 PURPOSE

This standard operating procedure (SOP) describes the research ethics review procedures for studies that involve vulnerable populations.

2.0 POLICY STATEMENT

The REB shall apply additional protections as necessary to protect potentially vulnerable research participants. Not every human being is capable of self-determination. The capacity for self-determination matures during an individual's life, and some individuals lose this capacity wholly or in part because of illness, mental disability, or circumstances that severely restrict liberty or create a significant power differential (e.g. employer/employee, teacher/student relationships).

The extent of additional protection afforded should depend upon the risk of harm and the likelihood of benefit. The judgment that any individual lacks autonomy or capacity should be periodically reevaluated and will vary in different situations. In addition, when the REB regularly reviews research involving a vulnerable population, consideration will be given to inclusion of one or more individuals who are knowledgeable about and experienced in working with these participants.

Potentially vulnerable groups may include, but are not limited to:

- Prisoners
- Children
- Individuals with mental illness
- Individuals with cognitive impairment
- Pregnant women and foetuses
- Other vulnerable groups (e.g. students, employees, members of the armed forces)
- Individuals with limited language skills.

3.0 DEFINITIONS

See Glossary of Terms

4.0 RESPONSIBILITY

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All REB members and REO Personnel are responsible for ensuring that the requirements of this SOP are met.

5.0 PROCEDURES

5.1 Children

- 5.1.1 Enrolling children in clinical trials presents especially difficult considerations for REBs. Two factors make a case for clinical research in children:
 - Children differ markedly from both animals and adults, and therefore, these models cannot substitute as alternatives to testing in children.
 - Lack of appropriate research in children will increase their risk of harm from exposure to
 practices or treatments untested in this population. In addition, new therapies or
 knowledge could not be developed for diseases or conditions that specifically affect
 children.
- 5.1.2 Research in children requires that the REB carefully consider consent, beneficence, and justice.
- 5.1.3 The REB must consider the degree of risk and discomfort involved in the research in relation to the direct benefits it offers to the child before it can determine whether or not the board has the authority to approve the study.
- 5.1.4 As per TCPS2 Article 4.6, if the research proposal involves a child who does not have capacity to give consent pursuant to applicable Ontario legislation or applicable common law, then the REB may not approve their involvement in the research unless TCPS2 Articles 3.9 and 3.10 have been met, as well as the following:
 - (a) the research question can be addressed only with participants within the identified group; and
 - (b) the research does not expose the participants to more than minimal risk without the prospect of direct benefits for them; or
 - (c) where the research entails only minimal risk, it should at least have the prospect of providing benefits to participants or to a group that is the focus of the research and to which the participants belong.
- 5.1.5 An assessment should be made at the individual level to confirm the participant's capacity to consent, considering the range in complexity of the proposed research and emotional and intellectual maturity of the participant. The participants' capacity to consent should be monitored throughout their participation in the study.
- 5.1.6 US Federally Funded Research involving Children: If the research project is funded or supported by the US Federal government or is regulated by the US FDA, then the REB must consider the provisions of the applicable regulations to the extent that they vary from the requirements set out above.

5.2 Cognitively Impaired Participants

5.2.1 Studies involving participants with impaired decision making capacity may take place over extended periods. The REB should consider whether periodic re-consenting of individuals should be required to ensure that a participant's continued involvement is voluntary. The REB may require that Investigators re-consent participants after taking into account the study's anticipated length and the condition of the individuals to be included (e.g., participants with

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- progressive neurological disorders). Additionally, the REB should consider whether, and when, it should require a reassessment of decision-making capacity.
- 5.2.2 Studies involving participants who are mentally ill or participants with impaired decision-making capacity warrant special attention. Research involving these populations frequently presents greater than minimal risk as it may not offer direct medical benefit to the participant, and may include a research design that calls for washout, placebo, or symptom provocation. Careful consideration by the REB should be undertaken. In addition, these populations are considered to be vulnerable to coercion.
- 5.2.3 For research involving individuals who lack the capacity, either permanently or temporarily, to decide for themselves whether to participate, the REB shall ensure that, as a minimum, the following conditions are met:
 - the researcher involves participants who lack the capacity to consent on their own behalf to the greatest extent possible in the decision-making process;
 - the researcher seeks and maintains consent from authorized third parties in accordance with the best interests of the persons concerned;
 - the authorized third party is not the researcher or any other member of the research team;
 - the researcher demonstrates that the research is being carried out for the participant's direct benefit, or for the benefit of other persons in the same category. If the research does not have the potential for direct benefit to the participant but only for the benefit of the other persons in the same category, the researcher shall demonstrate that the research will expose the participant to only a minimal risk and minimal burden, and demonstrate how the participant's welfare will be protected throughout the participation in research; and
 - when authorization for participation was granted by an authorized third party, and a
 participant acquires or regains decision-making capacity during the course of the
 research, the researcher shall promptly seek the participant's consent as a condition of
 continuing participation.
 - If these criteria are met, the REB may approve the inclusion of participants who lack decision-making capacity or participants with impaired decision-making capacity in research on the basis of informed consent from authorized representatives.
 - Both investigators and REB members must be aware that for some participants, their decision making capacity may fluctuate. For participants with fluctuating decision making capacity or those with decreasing capacity to give consent, a re-consent process with a surrogate may be necessary.
 - Although without the capacity to provide informed consent, some persons may resist
 participating in a research protocol approved by their representatives. Under no
 circumstances may participants be forced or coerced to participate.
 - Where an authorized third party has consented on behalf of an individual who lacks legal capacity, but that person has some ability to understand the significance of the research, the researcher shall ascertain the wishes of that individual with respect to participation. Prospective participants' dissent will preclude their participation.

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5.3 Pregnant Women, Infants and Foetuses

- 5.3.1 Women shall not be automatically excluded from research solely on the basis of sex or reproductive capacity. In considering research on pregnant or breastfeeding women, researchers and REBs must, however, take into account potential harms and benefits for the woman and her embryo, fetus or infant.
- 5.3.2 Research may be undertaken on methods to treat, in utero, a foetus that is suffering from genetic or congenital disorders. Because the foetus and the woman cannot be treated separately, any intervention on one involves an intervention on the other. Accordingly, and consistent with the requirements of informed consent, research involving a human foetus requires the free and informed consent of the woman.
- 5.3.3 Research Funded by the US Federal Government: If a research study is funded or supported by the US federal government, the REB shall apply the requirements of 45 CFR 46, Sub-Part B, to the extent that they vary from the protections set out above and elsewhere in the TCPS.

5.4 Research Involving Aboriginal Peoples

- 5.4.1 CIHR has identified health research studies involving Aboriginal People as requiring special consideration and the Panel on Research Ethics has significantly expanded the chapter within the TCPS that provides a framework for the ethical conduct of research involving Aboriginal peoples. While studies involving Aboriginal peoples will not necessarily always be reviewed by the full board, they will be given special consideration in accordance with the appropriate guidelines.
- 5.4.2 Research reviewed by the SickKids REB is compliant with both the CIHR Guidelines for Health Research Involving Aboriginal People and Chapter 9 of the TCPS2

5.5 Other vulnerable groups

- 5.5.1 The REB considers potentially vulnerable groups to include, amongst others, mentally impaired or disabled persons, employees of the sponsor or investigator or the Institution, terminally ill patients, and the very elderly. The REB will determine special protections for these groups on a case by case basis taking into account the risks and benefits and other protections afforded by institutional policies, provincial and federal law.
- 5.5.2 Research Funded by the US Federal Government: If a research study involves prisoners and is funded or supported by the US federal government, the REB shall apply the requirements of 45 CFR 46, Sub-Part C, to the extent that they vary from the protections set out above and elsewhere in the TCPS.

6.0 REFERENCES

See References

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