History of research ethics in Native communities

Lands of the Anishinaabe and the Respective Tribal Colleges
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Hy'shqe siam (*Lummi*) - Thank you, respected teachers

- Community Institutional Review Board (IRB) members
 - Sam Deloria, Lisa Preston, Kathleen Alexis, many others
- Native IRB leaders
 - Francine Gachupin, Dave Oreiro, Barbara Juarez, Heather Larsen, &c
- IRB staffs
 - Helen McGough, Ada Sue Selwitz, Shannon Sewards, &c
- Participants in research projects
- Researchers who walk their talk
 - Tessa Evans-Campbell, Jaime Donatuto, Stacy Rasmus, Deana Around Him, &c
- "Indigenous Research Methods in Public Health"
 - Graduate Course U MT 595.54-34884 by Lori Lambert
- Wife Carolyn Robbins

Research atrocities by Nazis, WWII

- In concentration camps (Dachau) and killing camps (Auschwitz)
 - Immersed prisoners in cold water
 - until they died the intent of the research
 - Decompressed prisoners in high-altitude chambers
 - until they died the intent of the research
 - Injected many prisoners with typhus
 - many died
- Nuremberg Medical Trial, 1946-47
 - tried 23 defendants (20 physicians)
 - convicted 15

Unethical research USA: USPHS Syphilis Study

- (Public disclosure 1972 precipitated regulations)
- Natural history of untreated syphilis: 399 African American men, dirt-poor sharecroppers Tuskegee, AL 1932
- Intentionally not treated (told them "treated for bad blood")
- Not secret! updates published about every 5 years!
- Continued 40 years 1932-1972
 - better Rx (penicillin) available 1945
- *Highly "successful"* (= "the men stayed with it") dropout rate only 1% over 40 years!

Q1. Why was it so "successful"?

Please "pair-share" to answer

Answers received

- Many answers:
 - People were poor; They lacked knowledge about syphilis
- A few answers:
 - Incentives (decent burial if family consented to autopsy)
 - African American (Negro) personnel doctors, nurse
- IMO: key reason for keeping 99% for 40 years:
- the study was "culturally sensitive":
 - free burials, African American doctors & nurses, etc.
- LESSON: being "culturally sensitive" is not sufficient to make a research project ethical

National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research

- By the 1974 National Research Act
- First, it proposed regulations:
 - required Institutional Review Boards (IRBs)
 - for research done or conducted by HEW (now DHHS)
 - 45 CFR 46 (Title 45 Code of Federal Regulations Chapter 46)
- Applied to all types of human research
 - not just "experiments" or "biomedical research"
 - PHS Syphilis Study in Tuskegee: observational research

http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.htm

Then issued The Belmont Report

- Basic ethical principles underlying its proposed regulations (and their application):
- Respect for persons (implication: informed consent)
- **Beneficence** (Assessment of potential risks [harms] and benefits)
- **Justice** (selection of people to be in the research)
- (The Belmont Report in effect asked: "Under what circumstances is research ethical?" Its answer:
- "When, & only when, the research complies with all 3 principles."

http://www.hhs.gov/ohrp/humansubjects/guidance/belmont.htm

Q2. What do you think has been the research that has caused the most harm to the most people in 20th century America?

Please "pair-share" to answer.

Answers received

- Several answers received:
 - Tuskegee
 - specific Alcoholism Research [TBD]
 - specific Diabetes Research [TBD]
- No "right" answer -- but in my opinion
- •
- Almost all answers:
 - Research harmed not just the participants in the research but their communities
 - Most answers: Non-experimental (i.e., observational), often non-medical, research

Implications

- All types of research experimental & observational, medical & behavioral & educational has caused (and can cause) major harms
- "Harms to communities": when community members not in the original research are directly harmed by the results of the research
- Researchers and IRBs should have or seek expertise to assess and minimize all potential harms—individual and communities
- Communities must protect themselves as well!

"The good, the bad, and the ugly" in research with Indigenous people

- (Not in list of unethical research leading to IRB regulations)
- (But common feeling in many tribes & tribal people: "research has harmed us")

Ugly research with Indigenous people-1

Social science research in service of eugenics

- In Vermont [VT], the first third of 20th century
- Surveys of "dumb" or "delinquent" children and their families
- "Dumb" or "delinquent" families were usually poor Catholic French Canadians, Abenaki Indians, or migrants
- VT sterilized some "dumb" or "delinquent" children identified research survey-"to protect the gene pool"
- (Many other states sterilized such people as well
- Gallagher, Nancy L. (1999). <u>Breeding Better Vermonters:</u>
- The Eugenics Project in the Green Mountain State.

Ugly research with Indigenous people-2

Center for Research ... Acts of Man: effects of alcoholism in Barrow, AK

- 1960-70s, researchers from northeastern US
- Announced findings in press conference at their U.
- Barrow was floating bonds on Wall St. -> BIG news
 - Bond ratings on Wall Street adversely affected
- What was the worst & longest-lasting harm?
- Internal stigmatization by people from Barrow & nearby communities
- NOTE: harms were done by dissemination of results & the researchers' interpretations
 - Foulks EF. Am Indian Alsk Native Ment Health Res. 1989; 2(3):7-17.

Recent *Ugly* AI/AN research: ASU research on diabetes at Havasupai

- early 1990, Tribe approved a diabetes study including genetic analysis, by Arizona State University researchers
- genetic markers, inbreeding, & migration genetic research also done using the specimens
- sources: (also Paul Rubin [personal communication])
 - Rubin P. Indian givers. Phoenix New Times 2004; May 27
 - Dalton R. When two tribes go to war. Nature 2004; 430:500-2
 - Editorial. Tribal culture versus genetics. Nature 2004; 430:489
 - Pubmed: Havasupai OR Markow T[Author] OR Martin JF[Author] OR Benyshek D[Author] OR Zuerlein K[Author]
 - Harmon A. "Tribe wins fight to limit its use of DNA." New York Times 2010; Apr 22.

Recent REAL UGLY AI/AN research

- ASU diabetes research with Havasupai [yes, there is more]
 - concurrently with T2DM study was schizophrenia study
 - neither tribe nor individuals informed
 - information from clinic charts was obtained after hours, illegally, with no approval by anyone
 - ASU IRB did not comply with own procedures & requirements
 - research was "amateur night" against the Havasupai
 - PI was not experienced in research with human beings ... much less AI/AN people and Tribes
 - her primary experience was with fruit flies
 - Should ASU IRB have allowed her to be PI?
- Result: Fear of ugly research among AI/AN
 - major adverse publicity in Arizona
 - major law suit by the Havasupai Tribe, settled Apr 21, 2010
 - Positive result: state established policy for AI research

Recent GOOD research with AI/AN

People Awakening Project, Alaska, mid-1990s

- "What strengths & resiliency do AN people have regarding alcohol & alcoholism"
- Interviewed people for their life histories
 - People who had never drank or were in stable recovery
- Results: patterns of individual, family, & village/community strengths & resiliency
- Led directly to an intervention now proven effective
- An excellent example of "Tribally Engaged and Controlled Research"

"Other issues": Tribe and Community values/concerns in research and CBPR

- Protect and benefit the Tribe/community
- Respect elders & knowledge of Tribe/community
- · Respect Tribe/communities, strengths, and survival
- Incorporate traditional spirituality into the project
- **Promote** resiliency, assist Tribe/community in its activation and problem finding/addressing/solving
- Have pride in community's role in the CBPR project
- Have ownership in/of the CBPR project
- Respect/promote Tribal sovereignty/community power
- Express hope for the Tribe's/community's future

Criteria for IRB approval of research

45 CFR 46.111

REQUIRED CRITERIA:

- 1. Risks to subjects are minimized
 - avoid unnecessary risks
 - use existing procedures
- 2. Risks are reasonable in relation to anticipated benefits
- 3. Selection of participants or subjects is equitable
- 4. Informed consent is sought from all potential participants 46.116
- 5. Informed consent is documented 46.117

and, when appropriate

- 6. data collection is monitored to ensure subject safety
- 7. privacy and confidentiality of subjects are protected

ADDITIONAL SAFEGUARDS:

• for people vulnerable to coercion or undue influence ["children, prisoners, pregnant women, mentally disabled ..., or economically or educationally disadvantaged"]

Why are 1, 2, & 3, listed before 4 & 5? Please pair & share