The Science of Meetings: Practical Ethicist

Dear Practical Ethicist,

I chair an Institutional Review Board, and my goal is to make sure that all the board members participate in discussions about protocols and are able to express their thoughts before the board comes to a decision. We've had some new physicians join within the last year who have strong research backgrounds, and are very forward about giving their opinions on whether a protocol should be approved. Recently, I've started to hear other board members defer to these physicians by saying that if Dr. X thinks the protocol should be approved, they will go along with that opinion, which essentially means some people are getting more than one vote and others are getting none. How can I make sure that we, as a group, are making the best and most appropriate decisions?

Sincerely, Meeting Is Needing Discussion

Dear MIND,

A fundamental process of human research ethics is the prospective review of research by an independent committee to determine whether the research protects the rights and welfare of subjects (Emanuel, Wendler, & Grady, 2000). Independent ethical review is described in The Belmont Report (U.S. Department of Health, Education, and Welfare, 1978), the Declaration of Helsinki (World Medical Association, 2013), and the International Council for Harmonisation-Good Clinical Practice standard (International Council for Harmonisation, 2015). The implicit assumption of these standards is that groups make better ethical decisions than individuals. However, the peer-reviewed published literature on meetings indicates that meetings can commonly lead to objectively worse decisions than those that would have been made by the individuals attending the meeting (Sunstein & Hastie, 2015).

Here is an example that shows how groups can make worse decisions than individuals (Sunstein & Hastie, 2015). The researchers took a group of people and privately asked each one to estimate the temperature. They then asked that same group to meet and deliberate as a committee on the temperature. In almost all cases, the average of the individual temperatures provided before the meeting was more accurate than the committee consensus. Groups can make bad decisions when they fail to harness of wisdom of its individuals. Journal of Empirical Research on Human Research Ethics 2017, Vol. 12(4) 229–231 © The Author(s) 2017 Reprints and permissions: sagepub.com/journalsPermissions.nav DOI: 10.1177/1556264617717606 journals.sagepub.com/home/jre

Individuals who have observed many IRB/Research Ethics Committee (REC) meetings with different boards often note striking variations. Each committee seems to have its own personality and special issues. The committee functions like a pack rather than harnessing the wisdom of its individual members. The literature documents several ways that meetings fail in their purpose and these revolve around the theme that it is difficult to disagree when we think we are in the minority. These are referred to as the

cascade effect, group polarization, and hidden knowledge. The cascade effect occurs when the initial opinions presented at a meeting sway other individuals who came to the meeting with differing opinions. Scientists have done many studies where they polled members before a meeting on an issue, manipulated who presented first, and assessed the meeting outcome. Examples of the cascade effect can often be seen at IRB/REC meetings. If an influential board member speaks first and forcefully about a controversial issue and concludes that the protocol is approvable, the result is often in agreement with that board member's opinion. Even if a majority had been planning to disapprove of the research in advance of the presentation, they tend to vote to approve without sharing their initial reasons for disapproval. If you are a seasoned IRB/REC chair, you may have witnessed cascading when a member comes to you after the meeting to confess that he or she did not really want to vote as they had, but they did not want to cause problems by disagreeing openly. Chairs can try to recognize this and prevent it by being aware of who they ask to speak first in meetings, or even by enlisting the cooperation of some of the more outspoken members by speaking with them outside the meetings, and asking them to help make others more comfortable about speaking up.

The group polarization effect is seen when decisions made by groups are an amplification of the tendencies of the individuals. This is seen frequently in studies of groups deliberating risks and, in part, explains the variability of IRB/REC decisions about acceptability of risks in research (Klitzman, 2015). A group of people who are individually comfortable with the idea of higher risks in their own decisions will, as a group, make decisions that accept a higher level of risk than any individual would have accepted. A group of people who tend to be risk averse will make decisions that are very low risk. In both cases, the group is amplifying the tendencies of the individuals. Chairs can prevent the group polarization effect by being aware of the problem, spotting trends in decisions, and encouraging decisions to be driven by objective information rather than opinion. For example, in the case of risk assessment, chairs can encourage the IRB/REC to use information to quantify the probability of harm, rather than just referring to it as a possibility.

Group polarization can also be seen at IRB/REC meetings (Sunstein & Hastie, 2015). One IRB/REC may be very rigid about minimizing disclosure of social security numbers while others don't raise this issue as a concern. One committee systematically criticizes every statistical power analysis while others do not. The IRB/REC members have a legitimate interest in confidentiality and scientific validity, but individual IRB/RECs can develop radical stances on specific issues. Another example of group polarization can be seen with controversial studies. IRB/RECs whose members tend to trust investigators will tend to unanimously approve the research. On the contrary, IRB/RECs whose members tend to be suspicious about investigators will tend to unanimously disapprove the exact same research protocol. After becoming aware of the issue, chairs can encourage the IRB/REC to consider objective data about the issues and to evaluate that data in the context of the criteria for approval. Sometimes the solution to group polarization is to mix up the IRB membership by mixing up the membership with new blood with liberal use of alternates or rotating members off the committee and replacing them with new ones.

Another challenge to group decision-making is the idea of "hidden profiles." In this situation, information known to all committee members is often discussed while information known to one or two members is kept hidden and not raised in discussion. IRB/REC members who perceive themselves as "lower status" on the board-commonly nonscientific, unaffiliated, or nonprofessional membersmay say that weighing the risks and benefits is the job of professionals. They may admit to not speaking up because they could not possibly add to the discussion being held by others on the board, assuming that if what they know is important, "higher status" members would also know. Hidden profiles can be managed by encouraging all members to speak and ensuring that each member at a meeting understands that he or she brings a perspective and background that is both unique and important for other members to hear, which may include coaching and reinforcement both in and out of meetings.

How can IRB/REC meetings be improved so they make better ethical decisions? The first step is to recognize the ways that we make bad decisions in meetings, understand that this is human nature rather than an individual failing, and make the effort to go against our instincts. The next step is that each IRB/REC member needs to see themselves as bringing a unique and important perspective that other members do not share. Chairs can foster this behavior by, for example, ensuring that all board members are addressed in the same way; if some members are called "Professor" or "Doctor" while others are called by their first names, there is already a power and status differential being communicated. Members with questions must feel free to ask and get answers, so they can understand the research well enough to bring their perspective to bear. Chairs should work to dispel the idea—whether implicit or explicit—that scientists should discuss the protocol and nonscientists should focus only on the informed consent documents. Members must feel free to speak their mind and share information that has not been shared. Members have to encourage questions and be respectful of other's ideas.

The next step is to foster and encourage critical thinking. As IRB/REC decision making is a systematic process that revolves around the criteria for approval, members should be able to frame concerns and recommend changes per these criteria. If an individual thinks that a criterion is not met, he or she should speak up. The last step is to eliminate the idea that consensus is good or necessary. In the world of ethics, reasonable people often disagree. In the world of IRB/RECs, decision is by majority rule, not consensus. Dissent is healthy and expected, and should be respected and celebrated.

The goal of IRB/REC meetings is to use the power of the group to arrive at better ethical decisions than would be made by individuals. However, there is a science to the conduct of meetings, and we can use that science to have better meetings and better protect human subjects.

P. Ethicist

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