



## Research Policy

### 1. Preface

Research is integral to Access Alliance Multicultural Community Health Centre's (AAMCHC) strategic direction of establishing itself as a *centre for excellence in research, learning, and advocacy* on the social determinants of health for immigrants, refugees, and non-status people in Toronto. AAMCHC plans to engage in ongoing research in order to engage in evidenced-based, contextually grounded planning of its own services, and in generating broader knowledge and advocacy with respect to issues faced by its clients. Additionally, AAMCHC intends to become a leader in innovating, conducting, and promoting community-based participatory action research (CBPAR) methodologies – as a progressive counterpoint to the dominant top-down methodologies of research – in order to recognize and enhance the organic knowledge and capacity that lies at the level of the community.

The purpose of this policy document is to facilitate the development and conduct of research projects at the Centre.

### 2. Research Principles and Priorities

The following principles and priorities will guide AAMCHC's involvement in research:

- 2.1. To conduct client-centred, community-based research with an emphasis on the determinants of health as identified by the AAMCHC's clients and program participants, staff and other community stakeholders.
- 2.2. To inform AAMCHC's services and to assess AAMCHC's success in delivering programs and services as a community health centre.
- 2.3. To contribute to the body of knowledge relevant to the philosophy and goals of AAMCHC.

### 3. Research Ethics and Practices

Access Alliance is committed to engaging in and enabling community-based participatory action research (CBPAR) that will contribute to helping diverse individuals and communities, particularly recent immigrants and refugees, achieve *health with dignity*. All research activities at AAMCHC will strive to meet the ethical standards outlined in the Tri Policy Council on Ethical

Conduct for Research Involving Humans. Particular attention will be paid to ensure that research activities have minimal harm and maximum benefit to research participants, particularly to those from marginalized, vulnerable communities. Moreover, AAMCHC will strive to ensure that its research projects and researching processes themselves contribute to reducing health and other disparities. AAMCHC will incorporate the following ethical principles and practices in its research involvements:

### **3.1. Community Benefit**

AAMCHC will seek to involve in research that is relevant to AAMCHC's client communities and generates maximum benefits (and minimal harm and risk) to them. Research projects will be screened for their commitment and potentials for delivering meaningful, relevant benefits to the community of interest. The benefits can take the form of improvements in policy and services within AAMCHC or at a broader level. To increase the likelihood that the results will be of use to communities, we believe that the people whom the research is intended to benefit should have opportunities to be meaningfully engaged in all phases of the research. Thus, Access Alliance is committed to innovating, conducting, and promoting Community-based Participatory Action Research (CBPAR). In addition to improvements in policies and services, we are committed to CBPAR because this approach can help to build research capacity of our client communities and ensure that the research process itself has an empowering impact. We are also committed to ensuring that all findings are shared and made accessible to participants as well as to service providers and policy-makers who can use the findings to inform their decision-making.

AAMCHC will also give equal priority in identifying and minimizing harm and risks for the community in which the research is being conducted. Through research ethics review process and through community consultations, AAMCHC will try and identify all possible harm, costs, and risks that the research process or research outcome may pose on community members, particularly vulnerable groups.

### **3.2. Capacity-Building**

Through the CBPAR process, it is possible to build sustainable capacities within communities for inquiry and transformation. We are committed to meaningfully engaging staff and community members in designing, conducting, interpreting and applying research so that in the process, they may build their knowledge, skills and sense of agency. We also support and encourage critical reflection and the documentation of lessons learned.

### **3.3. Collaboration and Inclusion**

Diversity and inclusion enrich our communities and agencies and improve the quality and relevance of research. We value collaborative learning and believe that every participant in the research process, whether a community member, staff or academic, has something unique to contribute. We invite community participation as early as possible in the CBR process and are committed to identifying and addressing the barriers that impede meaningful community

participation in all phases of the research. The language and methods used in the conduct of research must be broadly accessible to the diverse range of participants.

We believe that every individual has the right to be treated with respect and dignity and that all people should have equitable opportunities and access to the determinants of health. We prioritise research that aims to redress health disparities by furthering the understanding of and addressing the social determinants of health affecting the vulnerable populations with whom we work. In addition, we strive for CBR processes that are themselves free from oppression and discrimination.

### **3.4. Equity, Dignity, and Respect for Vulnerable Persons**

It is unwise for the Centre to use as subjects children or persons mentally incompetent on account of disease or disorder, even where consents have been obtained from others purportedly acting on behalf of such individuals. Exceptions can occur where diagnostic or therapeutic value is obvious and where there are no foreseeable risks.

All researchers must be careful to avoid any implied or direct threat of denial of services for non-participation.

### **3.5. Informed Consent and Confidentiality**

Recognizing that most of our clients and research participants will be from marginalized, vulnerable groups, AAMCHC will take extra measures in its research to practice exemplary informed consent process and to ensure proper confidentiality. As a commitment to participatory, community based research, all potential research participants and local collaborators will be provided with all the necessary information so that they can make a fully informed decision about their participation in the research. Wherever possible, the research process will be designed in close consultation with the community concerned. All participants will be asked to complete an informed consent form (see sample Informed Consent form). Since, participatory, community-based research may involve multiple researcher, many from the community concerned, AAMCHC will take extra measures to ensure that all research partners/collaborators/assistants follow due confidentiality process (see sample Confidentiality Agreement form).

## **4. Ethical Review and Monitoring Process**

A Research Ethics Board (REB) comprising of ethicists, researchers, community members and the Research and Evaluation coordinator has been established at AAMCHC. The REB is responsible for drafting all necessary policies related research ethics (in line with the Tri Policy Council on Ethical Conduct for Research Involving Humans) and for administering the ethics review and monitoring of all research and “research like activities” that AAMCHC is involved with. The REB and the Ethical Review and Monitoring process will be guided by the following policies (see Terms of Reference for REB detailed policies for REB):

- 4.1. The Research and Evaluation Coordinator will be responsible for all activities related to establishing and supporting the REB as outlined in the Terms of Reference for the REB, including recruiting appropriate REB members, calling meetings, submitting research projects for review, and updating REB members of the progress of each reviewed research project.
- 4.2. All research projects that AAMCHC leads or is involved with will need to undergo an ethics review process in order to ensure that our research activities are ethical, rigorous, feasible and consistent with Access Alliance's mission, values and strategic priorities, and follow the guiding ethical principles outlined in the Tri Policy Council on Ethical Conduct for Research Involving Humans.
- 4.3. The REB is responsible for the following responsibilities;
  - 4.3.1. Develop, monitor and improve clear and comprehensive policies, statements and protocols related to research ethics;
  - 4.3.2. Review ethics review requests by internal and external researchers and make recommendations to the Executive Director regarding their approval;
  - 4.3.3. Contribute to research ethics training of committee members and Access Alliance staff on an as needed basis (this may be done by recommending speakers/facilitators).
- 4.4. The Research Ethics Board will adopt a 'proportionate approach' related to potential harm to participants, meaning that the more invasive the research, the greater should be the care in reviewing that research.

## **5. Research Process**

Research ideas will be brought to the Programs and Services Committee for discussion, approval and identification of possible resources. The following criteria will be considered in the decision making process:

- i. Relevance to AAMCHC – the project is consistent with AAMCHC's mission and values, or the results of the research would be relevant and beneficial to the Centre's programs, services or client population and contribution to knowledge of best practices for working with immigrants and refugees.
- ii. Scientific merit – both quantitative and qualitative research projects contribute to the scientific body of knowledge.
- iii. Ethical guidelines – Research in human subjects requires approval by a Research Ethics Board (REB) if one of the following questions is answered with "yes". The REB should be of a reputable institution which is associated with the research project.

### **A. Internal Research**

Internal research is defined as:

- i. research that the Centre has received funds to implement
- ii. a research project for which the Centre is a member of the Steering or Advisory Committee.

The researcher hired to implement the project will enter into a research agreement with the Centre. It will be signed by the Executive Director and the researcher and shall provide that:

- i. All research activities, reports or publications arising from research at the Centre will conform to the principles outlined in the Medical Research Council of Canada and will adopted by the Canadian Research Ethics Boards in Universities.
- ii. All data obtained from or collected at the Centre shall be coded in a manner that does not allow for the identification of research subjects.
- iii. Any reports or publication on the research will be submitted to the Executive Director prior to distribution or submission and the Centre will have the right to request and receive acknowledgement or to include a disclaimer in the report publication (i.e.: The views contained in this report are not representative of the views of the Centre).
- iv. The Centre will be provided with all reports/papers derived from the research project.
- v. The researcher will report on an ongoing basis to the Executive Director or designate in the development, planning, implementation and results of research.
- vi. The data collected and stored may not be made accessible to other researchers or used for other research projects without the Centre's knowledge or consent.
- vii. The research cannot be referenced without paper acknowledgement.

The Executive Director will not sign a research agreement without prior approval from the Board of Directors, via a recommendation of the Programs and Services Committee.

## **B. External Research**

External research is defined as a research project in which the Centre participation is limited to referring clients to participate in the research.

The researcher will enter into a research agreement with the Centre. It will be signed by the Executive Director and shall provide that:

- i. All research activities, reports or publications arising from the research will conform to the principles outlined in the Canadian Medical Code of Ethics.
- ii. All data obtained from or collected at the Centre shall be coded in a manner that does not allow for identification of research subjects.
- iii. The Centre will be provided with all reports/papers derived from the research project.

The Executive Director will not sign a research agreement without prior approval from the Board of Directors, via a recommendation of the Programs and Services Committee.

### **C. Dissemination, Advocacy and Change**

As a commitment to ethical research practice and to community-based participatory action research, AAMCHC is committed to carrying out research projects that lead to positive benefits/changes for our clients, including:

- (i) the recognition, dissemination, expansion of knowledge that immigrant, refugees and racialized groups hold;
- (ii) mobilizing evidence-based improvements in direct services at the local/immediate level for clients; and
- (iii) mobilizing evidence-based improvements in policies for positive systemic changes.

Particular attention will be paid to disseminating findings/reports at the community level through popular knowledge exchange tools.

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