Criminology Research

Human Research Ethics Committee Policy and Procedure

1. A core function of the Australian Institute of Criminology (the Institute) as established by Section 6 of the *Criminology Research Act 1971* is:

   a. to promote justice and reduce crime by:

   i. conducting criminological research; and

   ii. communicating the results of that research to the Commonwealth, the States, the Australian Capital Territory, the Northern Territory and the community…

2. All research undertaken under the auspices of the Institute must be conducted in accordance with the *National Statement on Ethical Conduct in Human Research 2023* (the National Statement). The National Statement promotes ethically good human research and ensures that participants are respected and protected.

Purpose

3. This Australian Institute of Criminology – Human Research Ethics Committee Policy provides guidance on the administration of the Australian Institute of Criminology Human Research Ethics Committee (the Committee) for members of the Committee and Institute staff.

Principles

4. The principal objective of the Committee is to ensure that all human research undertaken under the auspices of the Institute is ethically reviewed and monitored in accordance with the National Statement.
5. The Committee provides advice to the Deputy Director of the Institute (the Deputy Director) as to whether or not approval should be granted for research to proceed under Institute auspices.
6. The Committee is registered with the National Health and Medical Research Council and is governed in accordance with the National Statement.

Eligibility/applicability

7. This policy applies to Committee members and Institute staff.

Research requiring ethical review

What is 'human research'?

8. The National Statement defines human research as the following (National Health and Medical Research Council (NHMRC) 2023: 7):

   Human research is conducted with or about people, or their data or tissue. Human participation in research is therefore to be understood broadly, to include the involvement of human beings through:

   - *taking part in surveys, interviews or focus groups;*
   - *undergoing psychological, physiological or medical testing or treatment;*
   - *being observed by researchers;*
   - *researchers having access to their personal documents or other materials;*
   - *the collection and use of their body organs, tissues or fluids (eg skin, blood, urine, saliva, hair, bones, tumour and other biopsy specimens) or their exhaled breath;*
   - *access to their information (in individually identifiable, re-identifiable, or non-identifiable form) as part of an existing published or unpublished source or database.*

   The term 'participants' is used very broadly in the National Statement to include those who may not even know they are the subjects of research; for example, where the need for their consent for the use of their data has been waived by a Human Research Ethics Committee (HREC).

9. The National Statement also notes that 'the conduct of human research often has an impact on the lives of others who are not participants. When this impact is reasonably foreseeable, it may raise ethical questions for researchers and for those ethically reviewing research' (NHMRC 2023: 7).

10. Any work undertaken in the development of a research protocol does not constitute human research (eg consultation with stakeholders to develop a data collection tool or evaluation plan).

Ethical review and approval

11. Approval from the Committee is mandatory for all research unless it is eligible for exemption (clauses 15–17).

12. Approval is to be sought prior to the commencement of the project, including prior to the receipt of data from external agencies. The Committee can approve research activities that fall under a project in separate stages if required.

13. If there are significant changes to an approved protocol (eg substantial changes to a data collection tool), Institute staff are required to submit a minute to the Committee outlining these changes. Changes must not be actioned until approval has been received from the Committee.

14. Institute staff must seek approval from the Committee if they intend to use existing Institute data holdings for a new research project that introduces possible risks to participants or community that were not addressed in the application for the initial project and approved by the Committee.

Research that may be exempt from ethical review

15. Research is exempt from ethical review if it carries no risk of harm to participants or the community **and** satisfies one or more of the following conditions:
    a. the research involves the use of existing data held by the Institute, the collection of which was approved by the Committee and the use of which does not significantly differ from that outlined in the original application and any materials provided to participants;
    b. the research comprises a literature review only; or
    c. the research is conducted as part of Institute seminars or courses of training or instruction, and any outcomes or documentation are for internal use only, or for de-identified presentation in the annual report.
16. Research involving the analysis of publicly available data or information may be exempt from ethical review. If Institute staff are considering undertaking such a research project, they should in the first instance approach the Secretary and request guidance. The matter may then be referred to the Deputy Director.
17. Research that is exempt from ethical review must be approved by the Deputy Director through a research project proposal.

Administration of the Committee

Responsibilities

18. The responsibilities of the Committee are as follows:
    a. to provide ethical assessment of research proposals involving humans that:
        i. are funded by the Institute;
        ii. require access to Institute data collections;
        iii. are initiated or conducted, either wholly or in part, by Institute staff; and
        iv. have not been considered by another HREC;
    b. to inform the research proposer in writing of the decision of the Committee and of any conditions to approval being granted;
    c. to provide regular monitoring of approved projects;
    d. to remain informed on NHMRC ethical guidelines; and
    e. to provide the NHMRC data for its records as required.
19. The Committee accepts the outcome of ethics reviews conducted external to the Institute for funded research, on the basis that the approving body is registered with the NHMRC.

Scope

20. The Committee does not consider research from external agencies or individuals.

Fees

21. No fees are charged for the consideration of research proposals.

Membership

22. In accordance with the National Statement, the Committee will comprise a minimum of eight members, including:

    a. a chair with suitable experience, including previous membership of a HREC, whose other responsibilities will not impair the Committee's capacity to carry out its obligations under the National Statement;

    b. two people who bring a broader community or consumer perspective and who have no paid affiliation with the Institute;

    c. a person with knowledge of, and current experience in, the professional care or treatment of people; for example, a nurse, counsellor or allied health professional;

    d. a person who performs a pastoral care role in a community including, but not limited to, an Aboriginal and/or Torres Strait Islander elder or community leader, a chaplain or a minister of religion or another religious leader;

    e. a qualified lawyer, who may or may not be currently practicing and, where possible, is not engaged to advise the Institute on research-related or any other matters; and

    f. two people with current research experience that is relevant to research proposals to be considered at the meetings they attend.

Appointments

23. Appointments to the Committee may be made by invitation or nomination. The process by which new members are appointed will be at the discretion of the Deputy Director and the Chair.

24. The Chair is appointed by the Deputy Director.

Terms of appointment

25. Committee members will be provided a formal notice of appointment.

26. Members will serve a period of three years from the date of the first meeting that they attend.

    a. Members will be eligible for reappointment.

    b. Members may resign from the Committee at any time by advising the Chair in writing.

27. Training will be provided to Committee members upon appointment and as required.

28. Non-government members of the Committee receive an annual honorarium at the end of each financial year.

Committee Chair

29. The Chair may:

    a. provide advice on whether or not a project requires Committee approval;

    b. reconsider and, if appropriate, approve amended applications after initial consideration by the Committee, when authorised to do so by the Committee;

    c. consider and authorise minor amendments to approved projects;

d. at the request of the applicant, provide clarification and/or further information on the Committee's evaluation of an application;

e. approve changes to Committee procedure in special circumstances, within the requirements of the National Statement;

f. provide advice on Committee functions and on ethical issues in research; and

g. perform other tasks as delegated by the Committee.

Committee Secretary

30. The Secretary is appointed by the Deputy Director. The Deputy Director may decide to appoint more than one Secretary.

31. It is the responsibility of the Secretary to provide secretariat support to the Committee. This includes (but is not limited to):

a. preparation and distribution of Committee agendas and minutes;

b. timely distribution of papers before meetings;

c. annual reporting to the Deputy Director on Committee matters;

d. reporting as required to NHMRC on Committee matters;

e. keeping Institute staff informed of any changes to relevant documents (eg the National Statement);

f. maintaining a complete record of all research proposals submitted. This includes, but is not limited to, the original signed proposal, and the letter of notification and consideration of the research proposal from the Chair; and

g. receiving complaints.

32. The Secretary also fulfils the final category of membership, that is, being a person with current research experience that is relevant to research proposals to be considered at the meetings they attend.

Meetings

33. The Committee will meet as required, typically three times per year.

34. Meeting and relevant submission dates will be communicated to Institute staff by the Secretary.

35. The Committee may also consider proposals out-of-session if there is a demonstrated need.

Meeting procedures

36. Meeting documents will be sent to Committee members for consideration no less than one week before the meeting date.

a. Proposals should be submitted to the Committee in the standard Institute template, agreed to by the Committee, for consideration.

b. Proposals should be submitted following the completion of a privacy threshold assessment (PTA) and, if required, a privacy impact assessment. These assessments ensure that the Institute is meeting their obligations under the *Privacy Act 1988* (Cth). Existing projects (eg

long-term monitoring programs) do not require a PTA unless changes are made to the protocol.

37. The Committee may seek advice from external experts to help in considering a research proposal.

38. The Committee may invite Institute staff, and Institute staff may request, to be present for discussions of their proposed research.

39. Committee meetings will operate under the Chatham House Rule.

40. Formal minutes of meetings and decisions will be taken by the Secretary and distributed to Committee members.

Minimum membership for meetings

41. As far as practicable, meetings will be arranged to ensure attendance of all members.

42. Where members cannot attend a meeting, the Chair must be satisfied that the views of members not present have been sought and considered by all members of the Committee participating in a meeting before a decision is made.

43. As far as practicable, meetings will be arranged to ensure that the Committee membership present is diverse (eg there is gender diversity) and that at least one third of attending members are not Institute staff.

Decisions

44. Members have a responsibility for deciding whether, in their own judgment, a proposal submitted to the Committee meets the requirements of the National Statement and is ethically acceptable.

    a. The Committee will endeavour to reach decisions by general agreement, however this does not require unanimity.

45. Members have debate and voting rights for all matters before the Committee unless a conflict of interest exists.

    a. Members must disclose any interests that may constitute an actual or perceived conflict of interest as soon as they become aware of it. Interests may include, for example, being a member of the research team or having a pecuniary interest in the project.

    b. Declared interests and respective measures will be recorded in minutes of the meeting.

46. The Secretary will record the Committee's decision regarding approval.

47. Institute staff will usually be advised of the outcome within one week of the meeting via email to the Chief Investigator.

    a. A formal letter from the Chair will subsequently be sent to the Deputy Director and an electronic copy provided to the Chief Investigator.

48. Documents will be retained electronically and the original copy will be disposed of securely.

Monitoring

49. Following its decision to approve a proposal, the Committee monitors the project until it is complete.

50. Institute staff are to provide an annual report at the end of each financial year to facilitate monitoring. Annual reports should be submitted to the Committee in the standard Institute template. This report should include:

    a. progress to date or the outcome of the project if completed in the 12-month period;

    b. compliance to agreed protocol; and

    c. compliance to the conditions of approval.

51. Annual reports will be compiled by the Secretary and distributed to the Committee for review.

Breaches of approved protocol

52. As a condition of all approvals granted by the Committee, researchers are required to immediately report anything to the Committee that may warrant a review of the protocol, including serious and unexpected adverse effects on participants and unforeseen events that might affect continued ethical acceptability of the project.

    a. Notifications to the Committee should specify the nature of the breach, any actions that have been taken and any outstanding matters.

53. The Committee will consider the notification and determine any further required actions. These will be communicated to researchers and the Deputy Director as soon as practical.

54. Researchers may request that the Committee review their decision if required (clauses 56–59).

Discontinuation of research

55. If the Committee becomes aware that a research project is not being conducted in accordance with the agreed protocol and the welfare and rights of participants are not or will not be protected, the Committee may withdraw its approval by advising the researcher and Deputy Director of such withdrawal and recommend the research project be suspended or discontinued.

Complaints procedures

Complaints from researchers

56. The Committee will review its decisions if requested.

57. Complaints about the process of ethical review must be made in writing to the Deputy Director, who will inform the Chair of the complaint, and investigate and attempt to resolve the matter.

58. Institute staff have the right to attend one meeting of the Committee to present their complaint in person.

59. Where the complaint cannot be readily resolved by communication between the complainant and the Committee, a person external to the Committee will be nominated by the Deputy Director to handle the complaint.

Complaints from research participants

60. Complaints about the conduct of research from research participants may be addressed to the Secretary or to the Deputy Director. The Secretary and/or Deputy Director will follow up concerns with the Chair and the Chief Investigator of the project.

61. Action will be taken to resolve the matter as required.

    a. The Deputy Director is responsible for appointing an independent person to consider any complaint if required.

62. Complaints will be handled in accordance with the *Australian Code for the Responsible Conduct of Research* (NHMRC 2018).

Complaints from other interested people

63. Members of the public or other interested parties who have concerns or complaints about the conduct of an Institute research project may contact the Secretary or Deputy Director. The Secretary and/or Deputy Director will follow up concerns with the Chair and the Chief Investigator of the project.

64. Action will be taken to resolve the matter as required.

65. Complaints will be handled in accordance with the *Australian Code for the Responsible Conduct of Research* (NHMRC 2018).