



**SAN JOSÉ STATE
UNIVERSITY**

INSTITUTIONAL REVIEW BOARD (IRB) WORKSHOP SUPPLEMENTAL HANDBOOK

SCHOOL OF SOCIAL WORK



Prepared by the [Office of Research](#)

MSW IRB Protocol Submission Deadline – Last Monday of November

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Introduction – Recognizing Your Dual Role as Service Provider and Student Researcher

This IRB workshop supplement covers human subjects research ethics considerations relevant to graduate students in the Masters of Social Work program at San Jose State University. Social work students at the graduate level work in a wide range of settings through their field placements that can provide rich opportunities to conduct research. Subjects may include vulnerable populations or marginalized groups such as individuals with mental illness, individuals with developmental disabilities, survivors of abuse and trauma, the elderly, the homeless, at-risk youth, and individuals with substance misuse problems. The focus of this document is to help graduate students and their advisors prepare an IRB protocol that not only demonstrates sensitivity to the needs of a selected subject population but that also addresses and mitigates the conflict of interest inherent when a researcher also functions in a dual role as a service provider and when clients are recruited as research subjects. Students are encouraged to keep their dual role in mind when designing their research proposal and to recognize how their role as a service provider may influence a client's decision to participate and how it may pose a barrier to obtaining meaningful consent.

In her 2009 case study on MSW research projects and the IRB, Nancy Shore concludes that “we must balance the value of including often-marginalized voices in research, with the need to create a respectful and ethical process” (344). The IRB's tasks are to weigh the benefits of the research against the risks, to determine whether the researcher has ensured the voluntariness of the research, and to assess the consent and assent process. The IRB does on occasion identify problems with proposals that might seem benign or minimal risk to the researcher. While an MSW instructor initially reviews students' IRB proposals for ethical and methodological soundness, the IRB may have reasons for deeming certain research to be more sensitive that may not have occurred to the research team. As Shore's study has shown “The [IRB] process can strengthen the conceptualization of the project, as it not only forces applicants to carefully explain the design but also provides applicants with feedback...the process can also counter the tendency for researchers to think predominantly in terms of benefits, and instead encourages researchers to think carefully about potential harms and how to minimize these” (Shore & West, 2005). If you receive comments or feedback from the IRB, it's important to bear in mind that the IRB's intent is not to question your individual values or professional integrity, but to maximize benefits and minimize harm to the subjects of your research.

Is MSW Field Work Research?

San Jose State University's *Policy for the Human Research Subjects* (2008) defines research as a systematic investigation designed to contribute to generalizable knowledge. The task of administrators is to determine whether a proposed project meets this definition and needs to go through an IRB review. Likewise, the Council of Social Work Education (CSWE) describes research as “a systematic process of investigation and analysis that develops and promulgates generalizable knowledge to inform professional practice and social policy. Throughout the research process—which typically includes the conceptualization of a research idea, development of a viable design, purposeful selection and recruitment of study participants, implementation of the study in the field, data entry, analysis, and interpretation, and, finally, dissemination of research findings—there are numerous ethical

considerations to be addressed and decisions to be made” (CSWE, 2006,2). In its *National Statement on Research Integrity in Social Work* (2006) the CSWE explains that research knowledge is used by students to provide high-quality services; to initiate change; to improve practice, policy, and social service delivery; and to evaluate their own practice. “This statement clearly indicates how research is integral to all realms of social work practice,” says Shore (2009, 329-330).

The National Association of Social Workers (NASW) outlines a more detailed set of expectations in its code of ethics, which state that social workers have an obligation to keep up with and contribute to the body of knowledge within the profession: “Social workers should critically examine and keep current with emerging knowledge related to practice, research, and ethics. Social workers should seek to contribute to the profession’s literature and to share their knowledge at professional meetings and conferences” (NASW, 2008). The principles of the NASW code of ethics are similar to those of federal regulations and SJSU policy, specifically in regard to protection of vulnerable or marginalized populations, informed consent, and social justice. “A historic and defining feature of social work is the profession’s focus on individual wellbeing in a social context and the wellbeing of society” (NASW, 2008), a focus that is similar to and compatible with an IRB’s mission in the narrower context of ethical conduct in research.

The above definitions point to both the systematic nature of the work that MSW students undertake as well as its potential for generalizability. Systematic inquiry can employ a number of methods including evaluations, single-subject design, participatory action research, and secondary data analysis and the use of standard data instruments such as surveys, interview questions, and intake sheets. Many graduate students, especially those pursuing an advanced degree or other academic credentials, wish to share successful practices with other colleagues, agencies, and educators and thus contribute to the larger body of knowledge dedicated to promoting social welfare.

Research conducted in the university setting is subject to a greater vetting process than would be day-to-day practice, including IRB review. The IRB process aims to strengthen research ethics and to assure that the study participants are not exploited (Office of Human Research Protections (OHRP), *Code of Federal Regulations*, 2001). It also provides an additional layer of protection for subjects in keeping with the NASW code of ethics.

Subject Recruitment – Special Populations

“The philosophical basis for the federal human subject protection policy is congruent with the values of the social work profession. The pragmatics are more complicated”
(Valutis & Rubin, 2010, 195).

One of the fundamental principles that guides both federal and SJSU policy for the protection of human research subjects is the concept of justice. Applying justice in a research context means that subjects – especially those who are vulnerable—are not systematically selected because of their easy availability or out of convenience to the researcher, but because their participation is relevant to the problem that is being studied (OHRP, *Belmont Report 1976*, n.d.).

Maintaining justice in student research is especially difficult when a student researcher is also a service provider who has access to subjects through his/her field placement. Despite a student researcher's best intentions, the power imbalance between a client and a service provider may contribute to a coercive atmosphere and affect the perception that participation is voluntary. As a student, you are engaged in the research partially for your own gain – to obtain an advanced degree. Clients may fear that non-agreement will affect their relationship with the agency or their ability to obtain needed services.

Replicating official sounding verbiage in the protocol narrative that is provided on the consent form about the voluntariness of the research does not provide a sufficient resolution to decreasing an atmosphere of coercion. Researchers should demonstrate that they are invested in ensuring the voluntariness of the research by providing examples of strategies that will be employed to minimize coercion and promote meaningful and continued consent. The protocol narrative needs to include a description of the tangible measures that will be used to minimize a coercive atmosphere. The recruitment plan should also explain how the research will be advertised, how you will solicit participation and how potential subjects will be approached. Recruitment must be done in a manner that does not stigmatize potential participants and that protects their privacy.

The following are some strategies that can be used to ensure that these conditions are met:

1. Recruit in public forums – fliers in public places, announcements in online communities, and word of mouth if using personal contacts.
2. If you plan to use snowball sampling, you may provide your contact information for others to share, but you should not solicit contact information of other potential participants from your acquaintances.
3. Be mindful of special privacy considerations for sensitive subject populations and how your attempt to recruit them might put them in danger. For example, if you want to interview victims of domestic violence, contacting them at their home or even via their personal phone numbers may not be appropriate. Researchers are responsible for providing a safe and neutral place to meet participants. Similarly, some populations might have an expectation of privacy that is not amenable to intrusion by an outsider. Recruiting subjects at an Alcoholics Anonymous meeting for a study about substance abuse recovery, for instance, violates the premise of anonymity that attendees are promised when they show up.
4. In each of the examples in #3, a level of cultural competence is expected from the researcher. Cultural competence does not only apply to effectively interacting with diverse groups of people. It also applies to understanding group dynamics, interpersonal relationships, and the social and economic contexts from which a target population is being recruited. For more information on cultural competence see the NASW Standards for Cultural Competence (2001): <http://www.naswdc.org/practice/standards/NAswCulturalStandards.pdf>

5. If you are involved in providing services to potential research subjects, your role at the agency or institution should be clearly described in Section IV of the Protocol Narrative – Involvement of Other Institutions. The protocol cannot state that there is no conflict of interest. When the subject pool is your own clients, participants are often recruited out of convenience and there may be more benefit to the researcher than to the participants. Past history and a continuing relationship with clients can also bias a researcher and affect whether or not free informed consent and assent can truly be achieved. Strategies for mitigating conflict of interest can be alluded to in this section and described in greater detail in the recruitment plan and informed consent process, as these are the moments during the course of the research where a conflict of interest is likely to manifest. The consent materials for participants should also indicate both your affiliation as an SJSU student conducting research as part of your degree program and as a service provider and your specific role at the agency.

You are also obligated to inform clients when a conflict of interest exists and to take reasonable steps to resolve the conflict in a way that makes clients'/participants' interest primary. The following are examples of strategies that can be used to mitigate conflict of interest:

- Consider having a third party, someone not affiliated with the research, introduce the study to potential subjects and provide them with your contact info.
- If providing services in clients' homes, do not use the time to promote your research. Find another way to communicate your invitation, such as a letter and recruitment flier or having another colleague at the agency contact the client during a time when they are not receiving services from you. Also, do not use clients' homes or your home to conduct research that involves face-to-face interaction such as interviews. Provide a neutral space for the research activities such as an office at the agency or a room at a community center.
- Don't use private records to cherry pick a certain group of subjects. Design data instruments that allow you to focus on a target group in the analysis stage rather than in the recruitment stage, and use public recruitment strategies to advertise to your target group.

The recruitment strategies outlined here all involve potential subjects approaching you to express their interest in participating in your research. In addition, there are three populations that social work students typically work with – patients, students, and foster youth – each of which are afforded extended protections as described below.

Patients

In most instances, you cannot access medical records or get a clinician to select patients on your behalf based on the patients' diagnosis or other private personal health information, unless a patient has signed a terms and conditions of service that allows access to his/her medical information for research purposes. A blank copy of such an agreement would need to be submitted with your IRB protocol, and the protocol narrative would need to include information about how the medical records will be accessed (e.g., an electronic vs. paper record) and assurance that the records will not be removed from the facility and that only de-identified information will be recorded.

If a terms and conditions of service agreement that includes a disclaimer about research is not available, the medical records are private and consent is required from the patient to access them. In some instances, hospitals may give employees access to review charts and record data on intake sheets without patient approval. However, the SJSU IRB maintains the more stringent requirement that patient permission is needed in all instances of access to secondary data that includes uniquely identifying personal health information. This requirement stems from the recognition that the data is being accessed for research conducted under the auspices of SJSU and goes beyond an internal assessment in the clinical setting. A patient's medical record may contain more information than is relevant to a student's research project and a student researcher does not have an automatic right to access personal health information for research purposes just because s/he has access to it as an employee in a clinical setting. This is in keeping with one of the key standards present in Health Insurance Portability and Accountability Act (HIPAA): "A central aspect of the Privacy Rule is the principle of 'minimum necessary' use and disclosure. A covered entity must make reasonable efforts to use, disclose, and request only the minimum amount of protected health information needed to accomplish the intended purpose of the use, disclosure, or request" (U.S. Department of Health and Human Services, n.d.). Keep in mind that there is no statute of limitations on the privacy of medical records. Privacy rules apply whether or not the patient is continuing to receive services at the facility.

If obtaining informed consent from patients is not feasible, only secondary data that has been de-identified by the clinic, hospital, or agency beforehand can be used in your research. In this case, you should include a letter of support from the institution confirming that the data will be de-identified prior to being given to you. The protocol narrative should also include a description of the de-identification methods that will be used by the institution. Be aware that personal health information may not only be present in clinical records, but in social services records as well. The privacy rules apply to personal health information regardless of the source of the records.

When the research necessitates interaction with patients, such as in a survey or interview, avoid coercive recruitment methods like hanging out in a specialist's waiting room and approaching patients that you know are there for a specific reason. Recruitment must be done in a way that does not interfere with services. Alternative methods include posting flyers with your contact information in the clinical setting; leaving a survey, instructions, and a locked drop off box in the setting; or having the clinic provide your contact information to eligible patients.

Caregivers. Privacy is also a concern when information is sought from third parties about specific patients. Interviews with caregivers, for example, can delve into detailed medical information and relationships that the patient may not want to share. If the caregiver is a medical professional s/he is bound by professional codes of conduct that prevent the sharing of personal health information of individual clients. Only general questions that do not focus on specific clients can be posed to medical professionals, unless the clients' consent is obtained beforehand. If the caregiver is a relative or other non-medical professional, it can be difficult to have the participant parse out general information from personal information about the patient. Very often the research is about the patient and not the caregiver. In such situations, the IRB recommends involving both the patient and the caregiver in the research and obtaining consent from both individuals.

Students

Like patient records, academic records are private. If you have access to individually identifiable records, consent is required from the student (or the student's parent if the student is a minor), even if the school has given you permission to access the data or if you have access to it as part of your job function. School permission alone is only acceptable if it confirms that the school will provide you with data from which all of the identifying information has already been removed and you are not affiliated with the school in a manner that allows you to have access to the records. School records are protected under the Family Educational Rights and Privacy Act (FERPA), and there is no statute of limitations on the privacy of uniquely identifying student records (U.S. Department of Education, personal communication, August 20, 2013). Consent is needed to access private academic records regardless of whether the student is receiving services at the school. Teachers and administrators cannot be asked to share information about specific students without the student's and parent's consent.

If you are working in a k-12 education setting, or plan on conducting action research with students whom you serve, please review the IRB Handbook for the College of Education posted on the IRB forms and documents page (<http://www.sjsu.edu/research/irb/irb-forms/index.html>). This handbook contains additional information about mitigating conflict of interest and coercion when the research involves minors in a school setting.

Foster Youth and Minors in the Custody of the State

Privacy rules apply to open case files of foster youth and other youth who are wards of the state or any other agency, institution, or entity, as well as youth who are still receiving social services at the time of the research. If you wish to review open case files or interact directly with youth still in the system, consent from the legal guardian is required for their participation in research or for access to their records for research purposes. For foster youth, the legal guardian is neither the social worker nor the foster parents, but the judge assigned to the case. Although biological parents may retain some rights over their child, in certain types of studies (e.g., research on child abuse or neglect), there may be serious doubt as to whether the parents' interests adequately reflect the child's interests (OHRP, *IRB Handbook*, 1993). The IRB requires permission from the court for wards of the state because a judge's role is to protect the welfare and interests of the child.

If you wish to review secondary data from closed case files, the IRB does not require consent from a guardian or assent from the youth. However, a letter of support from the agency giving you access to the data is required as part of your protocol submission, and the protocol must provide reasonable justification for why access to the data is sought. Keep in mind that access to closed case files for research purposes is a privilege and not a right. The agency providing access to the data may have its own rules about whether or not its records can be accessed for research purposes and may insist on de-identification of records by agency staff prior to being given to you.

Whether you plan on conducting a retrospective file review or a study on youth still in the custody of the state, a sound data management plan needs to be in place and the measures to protect confidentiality need to be described in the protocol narrative. Files containing identifying information should not leave the premises of the agency and should be securely stored. Intake sheets should not

contain identifying information. Coded data should be kept separately from the key and provisions for destroying the key once the research is completed should be made and described in the protocol.

Other Populations

Minors, Conserved Adults, and Meaningful Assent

For research involving subjects under the age of 18, minor assent is also required when the subjects are capable of providing it, in addition to a signed parental consent form. This means that the investigator must explain the research to the minor in an age appropriate and developmentally appropriate manner, and obtain the minor's affirmative agreement to participate in the research. Note that if the minor dissents from participating in research, even if his or her parents or guardian have granted permission, the minor's decision prevails in most cases. For research activities involving adolescents, whose capacity to understand resembles that of adults, the assent procedure might include information similar to what would be provided for informed consent by adults. For children whose age and maturity level limits their ability to fully comprehend the nature of the research activity but who are still capable of being consulted about participation in research, it may be appropriate to focus on conveying an accurate picture of what the actual experience of participation in research is likely to be (for example, how long it will take, whether it might involve any discomfort) (OHRP, *IRB Handbook*, 1993). The assent procedure should reflect a reasonable effort to enable the child to understand, to the degree they are capable, what their participation in research would involve, and should be documented in the methods and procedures section of the protocol narrative. If assent will be obtained verbally, a script outlining what will be said should be included with the IRB protocol.

If you plan on doing research with cognitively impaired adults, the IRB may request that you explain how the capacity to give informed consent will be determined. According to the Office of Human Research Protections *IRB Handbook* (1993), "the predominant ethical concern in research involving individuals with psychiatric, cognitive, or developmental disorders, or who are substance abusers is that their disorders may compromise their capacity to understand the information presented and their ability to make a reasoned decision about participation. Many individuals with disabilities affecting their reasoning powers may be residents of institutions responsible for their total care and treatment. The impact of institutionalization may further compromise their ability to exercise free choice (voluntariness). (These concerns apply both to voluntary patients and those committed involuntarily.) The eagerness for release may induce an institutionalized person, especially one who is involuntarily confined, to participate in research out of a desire to appear 'rational' and 'cooperative' to those who will make decisions about his or her release."

When adult participants are not capable of giving informed consent, the feelings and expressed wishes of the person should still be respected. An appropriate explanation about the research should be provided in language that is understandable according to age and developmental ability to obtain assent from participants. Written informed consent must also be obtained from an appropriate proxy. The IRB protocol must document the assent and consent procedures to be used.

Prisoners

Special protections apply to any individual who is incarcerated or confined (adults or minors), as well as those who are on probation. Only certain kinds of research may involve prisoners as subjects: (1) studies involving no more than minimal risk or inconvenience of the possible causes, effects, and processes of incarceration and criminal behavior; (2) studies involving no more than minimal risk or inconvenience of prisons as institutional structures or of prisoners as incarcerated persons; (3) research on particular conditions affecting prisoners as a class and (4) research involving a therapy likely to benefit the prisoner (OHRP, *IRB Handbook*, 1993). Even when the research meets these criteria it may be difficult to get IRB approval in a timely manner. The very fact of incarceration may make meaningful informed consent impossible, especially if the researcher is also an employee at the facility where potential subjects are held. Maintaining confidentiality and privacy can be a challenge. What is deemed minimal risk in day to day life for non-prisoners may not be so in the prison environment. Ethical concerns are compounded when the population to be studied is juveniles who are incarcerated, as informed consent must come from the state.

Many prisons have their own IRBs, and the state of California has its own Committee for the Protection of Human Subjects. Unless you and your advisor are committed to undergoing a lengthy review process from several different entities – some of which may have conflicting requests and requirements – conducting research with prisoners for your MSW project is not recommended. If you are interested in conducting research with prisoners, consider first whether you can obtain the same information to answer your research question through an alternate source such as a prisoner advocate or former prisoners no longer under probation.

Specialists and Professionals

Specialists and professionals are not usually considered to be human subjects if the information they provide is not personal and is a matter of expertise. Personal information includes opinions, thoughts, perceptions, and data associated with testing and performance. Interviewing or surveying professionals can provide student researchers with an opportunity to collect data when soliciting vulnerable groups to participate is not feasible. Often an expert may be able to indirectly provide more insight about a vulnerable population than would data collected directly from those who are afforded additional protections. Researchers are obligated, whenever possible, to find viable alternative methods for getting information when the research involves engaging vulnerable groups. If a proposed research project appears to place individuals (e.g., minors) at greater risk, especially if the individuals are solicited out of convenience to the researcher as opposed to any potential direct benefits to them, the IRB may require that the study be revised to gather data from an appropriate professional instead. It's important to remember that questions posed to specialists and professionals cannot seek private information about individual clients, as this violates privacy rules and confidentiality agreements that service providers promise clients. Information sought from specialists must be general and cannot delve into information about specific clients.

Meaningful Consent

The basic elements of informed consent that must be communicated to all subjects – whether verbally or in writing include: 1) Information about the study and what participants will be asked to do, 2) Information about the risks and benefits of the study, 3) Information about measures to protect confidentiality as well as limits to confidentiality, 4) Information about participants' rights (e.g., participation in research is voluntary) and, 5) Information on who to contact for questions, complaints, and problems. In addition to including all of the elements of informed consent as outlined on the templates provided on the IRB website, the consent documents need to include the following:

- **Complete information about the study.** If your consent documents contain vague language about the purpose and methods of your research, the IRB will not approve your protocol. For example, a description such as “This study will attempt to study self-esteem by having students fill out a survey,” is not descriptive at all (not to mention poorly phrased)! It is important to be clear about why a particular phenomenon or behavior is being studied. What do you hope to achieve by conducting the research and what methods do you propose to use? If the topic under investigation is complex, it is still your responsibility to describe it in a manner that would be understandable to participants. If there are methods described in your protocol narrative but not in your consent document – or vice versa – the IRB will not approve the protocol.
- **Layman’s language and text that is well-written and has been proofread.** Any complex discipline-specific or theory-specific jargon needs to be written in a language and at a reading level of a general audience. Do not expect subjects to be familiar with social work practices. You may need to modify the language on the sample consent forms provided on our website to ensure readability. You may use substitute words – “researcher” instead of “investigator” for example. Do not prepare a protocol or consent form that contains official-sounding verbiage that you think the IRB wants to hear. All of the elements of informed consent that appear on the samples on our website need to be included, but you may word the information in a way that is appropriate to the audience. If you chose to simplify the consent form that does not mean that grammar errors will be tolerated in the document.
- **Alternative methods for obtaining consent from study participants with limited reading skills or who are illiterate.** When a written consent form is not appropriate for a specific individual or population, verbal consent may be approved by the IRB. A script of what will be said and information about how consent will be documented needs to be included. Note that the option to obtain consent verbally is not appropriate for subjects who are literate but whose primary language is not English (see below); this option is also not appropriate simply because obtaining written consent would be inconvenient for the researcher. The IRB does waive the need for written consent in some situations, when the researcher requests it, such as for telephone interviews or anonymous surveys. A waiver of written consent means that participants do not need to sign the consent form; however, participants should still be provided with information in writing, except in cases where they have limited reading skills.

- **Translations presented in the primary language of participants.** The researcher is responsible for determining whether translations will be needed and for providing consent forms in the primary language of participants. In some settings, such as in k-12 schools, translations may be used routinely. If translations will be used, a verification of translation accuracy form needs to be included as well as an English version of the consent form. A researcher may create her/his own translations as long as someone not involved with the research verifies the accuracy of the translation.
- **Information about the limits to confidentiality, such as mandated reporting.** Be certain to find out whether you are a mandated reporter. If you are a mandated reporter, the consent form needs to indicate that you are required to report cases of abuse, neglect, and intent to harm self or others. Other limits to confidentiality include the potential for re-identification in small and specific data sets and the lack of privacy in focus groups or other settings where data is collect from a group; in such circumstances the researcher cannot guarantee that everyone will honor confidentiality agreements. The confidentiality section of the protocol narrative and the consent form must explain the measures that will be used to protect confidentiality, report any foreseeable limits to confidentiality, and explain how and when records containing any identifying research data will be destroyed.
- **Access to appropriate supportive services, when applicable.** MSW research projects typically pose less physical risk than biomedical research, but the research is not risk free. The primary risks associated with research in the social and behavioral sciences can include anxiety, shame, stigmatization, embarrassment, emotional distress, psychological trauma, and loss of privacy. When the research deals with an emotionally sensitive topic (e.g., suicide, abuse, trauma), information on available support services and resources should be provided to participants. This information can be included as a separate document attached to the consent form.
- **Clean and clutter-free presentation.** In addition to being well-written, the format of the consent form should not be neglected. Use a consistent font size that is easy to read, and avoid excessive combinations of formatting such as bold, italics, underline, and all caps. Do not print the consent form onto letterhead until you are sure the text will be aligned properly. Make sure to use complete sentences. If numeric itemization is used, make sure that it is logical. Keep in mind that participants are not aware of IRB requirements and that, above all, the consent document must make sense to them.

Participating Institutions

Informed consent and assent should not be confused with permission from the participating institution, which is also required as part of the IRB protocol. Permission from the participating institution, usually in the form of a letter of support from the agency director or field supervisor, expresses that the agency has allowed the proposed research to be conducted with the assistance of the agency. It does not reflect the wishes or speak on the behalf of potential participants when it comes to

actual involvement in the research. The informed consent and assent process is the mechanism that is used to handle agreement to participate on the individual subject level. Institutional permission is initiated before the researcher submits his/her IRB protocol and a document reflecting the institution's approval must be included with the protocol. Informed consent and assent, however, are initiated after IRB approval, as researchers must submit the documents that will be used during this process in addition to describing the process itself in the IRB protocol narrative.

The protocol narrative should also distinguish between agency-led versus student-led research projects in either section IV (participating institutions) or section VI c (research methods) so that the IRB is clear about who is responsible for the research design. Some agencies/institutions may have their own review process. If so, you must make your research known to them and go through their review process in addition to the SJSU IRB process. Keep in mind that other reviewing entities may have different or even conflicting requirements; contact the IRB coordinator for suggestions about how to resolve such conflicts.

Validity of Data Instruments

“Well-designed social work research can contribute significantly to the development and refinement of effective practice approaches at all levels and in all settings, as already evidenced by important contributions in the domains of mental health, substance misuse, gerontology, and child welfare” (CSWE, 2006, 2).

Students should work closely with their advisor to select or develop appropriate data instruments. While the selection of data instruments pertains to research design, if the instruments are too complex or cannot possibly answer the research question posed, the IRB may request that they be revised or replaced. Inappropriate data instruments can contribute to additional risks for participants; at best the research can be a waste of the subjects' time and, at worst, the research may lead to false conclusions that affect outcomes for other social services clients. It is important that your instruments are not only reliable and well-established, but that they are designed to address the issue that you are studying and that you use them as they are designed and in the research conditions you have established.

Special Social Work Deadlines

“The actual value of the IRB review may depend upon whether the committee understands the research proposal, which requires that the proposal is conceptualized well. The value may be undermined, however, if researchers complete their applications with an emphasis on gaining approval rather than critically examining the ethics” (Shore & West, 2005).

Completing an IRB protocol requires planning and attention to detail. Take the time to read, view, and understand the material presented here and on the SJSU IRB website. The materials are designed to highlight the basic issues that MSW researchers may encounter so that they can be tackled at the planning stage as opposed to the IRB review stage.

MSW students submit their protocols at the busiest time of year for our office, the end of fall semester, with the intention of beginning the research in the spring. Because the IRB and the Office of Research are inundated during this time, failure to address IRB-requested revisions may result in significant delays. IRB reviewers may select a full review if no substantial revisions to a protocol are made upon resubmission.

You can work to avoid having to resubmit a revised protocol by being prepared. Because the School of Social Work professors have developed a streamlined submission process for MSW students, the IRB and the Office of Research have been able to communicate outcomes for many students well before the beginning of spring semester, provided that the protocols are submitted to our office on time. The deadline for protocol submission for MSW students is the last Monday of the month of November; this means that your protocol should have already been reviewed by your sponsoring professor and delivered to our office by this time. This deadline allows our office to send your protocol to IRB reviewers prior to winter break, so that you may get feedback and approval prior to the beginning of spring semester.

For more information on the IRB process and the protocol documents, please refer to the IRB video tutorials posted on the SJSU IRB website: <http://www.sjsu.edu/research/irb/irb-video-tutorials/index.html>

Resources

In addition to the information available on the SJSU IRB website (<http://www.sjsu.edu/research/irb>), training modules are available for student researchers and educators through CITI (Collaborative Institutional Training Initiative): <https://www.citiprogram.org/>

The training for student researchers is recommended but not mandatory, unless it is part of a class assignment or the student is receiving federal funding for the research. Students should be aware that the sponsoring professor that signs off on their protocols must have completed the training requirement. If the professor has previously completed the training, it is not necessary to include the certificate with every student application. The CITI online training courses include modules that address research in an educational setting. In some instances, the IRB may require that a student researcher complete the training if continued resubmission of a protocol does not address the ethical considerations outlined in this document or if a student has not followed an IRB reviewer's request.

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