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commentary

on Humphery and Anderson, Griew and McAullay

Andrew Sporle

Research Fellow, Maori Social Statistics
Department of Statistics, University of Auckland
Formerly Lecturer, Department of Maori and Pacific Health
University of Auckland
Maori Health Research Manager, HRC

The two papers in this journal on guidelines for research involving indigenous people approach the topic from two distinct but complementary directions. When read together the papers provide an overview of the issues involved in developing and implementing such guidelines and provide salient lessons for the future direction of health research involving indigenous peoples.

One of these lessons is that such official guidelines are very slow to change. In Australia, interim guidelines were ten years old before a substantive review was undertaken. In New Zealand, the Health Research Council's (HRC's) guidelines remain unchanged since their initial publication in 1998, despite a declared intention to review them every year.

However, research practice in this area is not similarly static as the review by Humphery attests. As a result, guidelines that seek to specify and/or prescribe specific health research practices can become rapidly out of date, overtaken by the evolution of novel and or sustained research relationships between communities and researchers. It is impossible for national guidelines to describe best practice for the diversity of research fields, research designs and forms of local community involvement. Not only is such a prescriptive approach unlikely to encompass the diversity of health research practice, it also limits the very indigenous autonomy (in determining the nature of its own research relationships) that such guidelines seek to protect.

Consequently, researchers and research appraisers should not treat any national guidelines as the sole arbiter of research acceptability. The application of any guidelines needs to be in the context of community consultation and successful models of community involvement that may be regionally, institutionally or research topic specific. This places two other obligations upon the research community – first is for consultation and the second is for publication. Consultation

between researchers (or their institutions) and participating groups or communities determines the nature of the research relationship. Publication of the research process as well as the results ensures that this experience is available for other communities and researchers to learn from.

The second lesson is the uncertain future for national guidelines if they are seldom updated and struggle to encompass the diversity of research practice. These papers indicate that the strengths of national guidelines are that they are founded on community consultation and they carry the authority of the national health research funding body. Both the NHMRC and the HRC have statutory obligations to advise on ethical issues in health research with the HRC having a specific statutory requirement to provide advice on the health research issues affecting the Maori population. Both organisations refer to their guidelines in their research application review process, making them extremely effective mechanisms for changing the practice of researchers. National guidelines are less successful as the carriers of an indigenous voice. 'Setting the rules' highlights the extent to which the NHMRC guidelines were produced as a result of a process that began by consultation rather than being

produced by a consultative process. The resulting guidelines could be described as being informed by an indigenous voice but not mandated by that voice.

Given the practical difficulties of consulting nationally with different communities with diverse experiences and needs, perhaps the future of national guidelines lies with a change of focus from researchers to institutions. In such a model guidelines could prescribe clear expectations of processes and collaborative structures that research institutions implement in working with indigenous peoples and communities, rather than prescribing practice for researchers. National guidelines could inform the guiding principles of such institutional processes without specifying the detail – that could be worked out locally in collaboration and co-operation with local people. The national funding body would then accredit institutional processes which would inform and monitor individual research projects – much as institutional research ethics committees do now. In this way national policies could remain informed by consultation, but research practice involving indigenous peoples would be informed by a local indigenous voice operating at a local level.