Article

Research Consultation with Maori: Revisiting the Researcher's Responsibilities

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In 1998 the Health Research Council (HRC) published the Guidelines for Researchers on Health Research Involving Maori. These guidelines were produced to assist researchers intending to undertake research that involved Maori as participants or was on topics relevant to Maori health. Much of the content of this document related to the need for researchers to consult with Maori and outlined processes by which this could take place. This article discusses some possible options for further clarifying the role and form of research consultation with Maori. It is argued that research funding agencies and research institutions need to take a lead role in consulting with Maori on research issues. Consultation at this level could help address key ethical issues in research while reducing the workload on both researchers and Maori organisations.

Introduction

The Guidelines for Researchers on Health Research Involving Maori¹ were produced by the Maori Health Committee of the HRC to assist researchers who intended to undertake research that involved Maori as participants, or that was on a topic relevant to Maori health. In recognition of the developing nature of Maori research practice and theory, the Guidelines were to be reviewed annually. The Health Research Council invited comments to contribute to this review.

Although not binding on researchers, the guidelines were more than 'points to consider' as they were to be used in the assessment of applications for Health Research Council funding. Furthermore, the 1998 revision of the National Application Form for Ethical Approval incorporated the principles contained within the guidelines. Consequently all applicants from all research fields were required to indicate if they had read the guidelines and specify what consultation they had undertaken.

Anecdotal reports and the author's personal experience indicate that this

requirement upon all researchers has led to a degree of confusion for both researchers and ethics committees as to what constitutes appropriate and meaningful consultation. This is confirmed by a recent study on researchers' views of ethics committee functioning in New Zealand.² There is also anecdotal evidence that the requirement for consultation is placing demands on Maori communities who have limited resources and their own, more pressing matters to attend to.

Both the guidelines and national application form are currently under review by the HRC. This article is intended to contribute to discussions on possible clarifications this review process could make to the researchers role in the consultation process.

The Purpose of the Consultation Process

Revisiting the requirements of consultation requires returning to the original intent of the HRC in publishing the guidelines. Three main goals are apparent within the *Guidelines*:

- 1. To ensure that research practices and outcomes contribute to Maori health development whenever possible.
- 2. To ensure that research processes maintain or enhance mana Maori.
- 3. To facilitate research partnerships between health researchers and Maori communities.

These goals reflect the outcome of Maori health research hui³ as well as recent government policy⁴ on health research. They are goals that relate to the operation of the entire health research sector including policy, research topics, and resource allocation, as well as the activities of individual researchers.

The combination of the 1998 guidelines and the revised national form have a possible undesirable and unintended outcome in that any researcher who intends to involve Maori in their project or who is researching an issue relevant to Maori health may be regarded as having to consult with Maori. Unfortunately almost all public health issues are also Maori health issues with the notable exceptions of melanoma, osteoporosis, bowel cancer and drowning in early childhood.⁵ In addition, Maori are likely to be involved as participants in most forms of research involving human participants, especially in clinical settings. This combination could lead to all researchers having to consult with Maori, or opting to exclude Maori from their intended study just on the basis of ethnicity.

Neither outcome is desirable nor productive in terms of the intent of consultation as stated above. The former outcome would result in an overwhelming workload for both researchers and Maori organisations that would restrict research development. The later outcome could result in research that produces results of unknown applicability to Maori due to lack of Maori involvement, especially in clinical and health service research. In addition, such uncoordinated consultation is more likely to result in duplication of effort by all parties and the production of inconsistent policies and practices.

One of the possible sources of confusion is that the guidelines are intended to provide advice for individual researchers rather than all involved in the research process. While consultation by researchers with Maori organisations (as indicated by the ethics form) can produce beneficial outcomes for researchers and Maori alike,6 Treaty of Waitangi and efficiency arguments could indicate that much of the consultation should be undertaken by the institutions involved in the research process. Unfortunately this level of consultation was not within the scope of the 1998 guidelines, but this could be addressed within the current review.



Possible Role of Research Funding Agencies

Research funding agencies such as the HRC have a key role in consulting with Maori upon ethical and research issues. The Health Research Council Act 1990 provides statutory roles for the Maori Health Committee and Ethics Committees as advisers to the HRC on health research issues that affect Maori health and ethical issues in research, especially in new areas of research.⁷ In turn, the Health Research Council has a statutory role as adviser to the Minister on national research policy.

Consequently the Health Research Council, through its statutory committees, has a leading role in the development of consultation-based national policies on research and ethical issues that relate to Maori health. This leadership role is reflected in the Health Research Council's recent publication Strategic Plan for Maori Health Research Development.⁸

National policies on research issues are important in providing clear and nationally consistent advice as to appropriate research practice, especially with regard to rapidly developing and contentious issues for Maori, such as genetic research and research involving reproductive technologies. Addressing these types of issues at a national level prevents ad hoc and timeconsuming consultation between Maori organisations and researchers which is less likely to produce clear and consistent guidelines as to the issues and how to address them. These guidelines could then be used by ethics committees, Maori organisations and researchers when considering what is appropriate and ethical research practice.

Possible Role of Research Institutions

Research institutions such as universities and polytechnics could have a key role in the consultation process via their own internal structures to address Treaty of Waitangi issues within the institution. Treaty objectives are already contained within government policy for the tertiary education sector, while a recent Treaty review of a university with a leading role in health research strongly advocated the establishment of structures to address Treaty issues within the university.⁹

While not specifically related to research, such partnership structures could be the mechanisms by which kev research and ethical issues involving Maori get addressed. Codes of practice and ethical issues could then be developed and revised at an institutional level, providing all researchers within that institution with clear and consistent policy and processes that reflect local Maori tikanga and values. The development of a local code of practice has already been initiated at Waikato Polytechnic in Hamilton. This type of partnership structure could also provide mechanisms by which both local Maori organisations and researchers can initiate consultation over research issues and potential projects without the need to create additional institutional structures specifically for the purposes of research consultation. In this way research relationships between Maori and researchers could be initiated at an institutional level, reducing the need for Maori organisations to be consulted by a stream of individual researchers.

Issues could still arise for consultation on multicentre studies or with researchers who are not affiliated with local institutions. These issues could be examined in the development of institutional codes of practice that have been approved by both the institution and local Maori. One possible solution is for such codes of practice to be available to all researchers working within a given region, with the researchers' local code being the first point of reference for a multicentre study.

Possible Role of Researchers

There are two main types of research consultation with Maori as undertaken by researchers. The first is community consultation undertaken in order to address issues of local cultural acceptability of possible research processes and to establish some form of research relationship with the local communities. The second type involves consultation with possible Maori end-users of the intended research in order to maximise the utility of the research process to Maori health development.

Consultation with Maori at the institutional levels as described above would not relieve individual researchers of a responsibility to consult with Maori about their intended research projects. However, clear indication as to appropriate and ethical research practice, as well as any need to undertake community consultation would be indicated by both the institutional code of practice and any national guidelines (if relevant). Furthermore, the partnership structures within the institution could provide or at least specify the community consultation processes to be undertaken by the researcher.

One issue facing researchers that could be addressed at the institutional level is the need for community consultation induced by levels of Maori participation in a research project. The development of partnership-based institutional codes of practice for research could reduce the need to consult as appropriate practice for Maori participation could be clearly outlined. If the local code of practice was adhered to, the requirement for community consultation could be limited to only those projects that are likely to have Maori participation sufficient to enable methodologically valid analysis on the information on the Maori component of the subject group. This would avoid the need to consult, based upon possible but low levels of Maori participation in a study, but ensure that any possible ethical or cultural issues were addressed in a study that was capable of providing Maori specific information.

Researchers may still be required to consult with Maori potential end-users of their intended research in order to enhance the utility of the research and possibly develop research partnerships. This type of consultation is already becoming a requirement of applications to the main government research funding agencies, and is likely to remain so for the foreseeable future.

Summary

The current national ethics application form requires all applicants to specify what consultation they have undertaken. This article has presented for discussion one view as to how implementation of Maori consultation practices at a local and national institutional level may clarify the research consultation process for both Maori organisations and researchers. Implementing consultation practices at this institutional level is consistent with government policy for the research and education sector, could be achieved without creating additional structures and would clarify and simplify the consultation processes for both Maori and researchers.

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