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POSITION PAPER.

Strengthening Research Ethics in British Columbia:
A Call for Leadership & Collective Action



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AUTHORS.

This paper offers lessons learned and forward-looking recommendations, embodying the shared experience and expertise of the authors and advisors during a time of significant change.

Convened by Clinical Trials British Columbia, part of Michael Smith Health Research BC, through a strategic action group, the paper is shared by the contributors as community members and professionals. The comments and views expressed herein do not necessarily reflect those of their respective institutions, affiliations, or any organization. Independent authors received honorariums from Clinical Trials British Columbia for their time and expertise dedicated to this paper.

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INTRODUCTION.

A high-quality ethics review environment is a strength of British Columbia's research system,ⁱ facilitated by more than 30 institutions working across the province. Research ethics is a core pillar of research approvals focused on ensuring that research involving people is carried out in a just, respectful and compassionate way. For almost 20 years, BC's research ethics community has led grassroots system transformation focused on collaborative, high-quality delivery of research ethics approvals.

Out of this commitment came the BC Research Ethics Harmonization Initiative in 2007, a collaborative model that is now used by all health authorities and most research institutions in the province to streamline ethics reviews while building trust in the research process and protecting participants.ⁱⁱ

The launch of the Research Approvals Processes Project (RAPP) in 2023, a joint Ministry of Health and health authority initiative, extends on these efforts by working to simplify research and approvals processes for ethics, privacy, contracts, data access and sharing, and operations across all health authorities.ⁱⁱⁱ Work is now underway to establish mandatory single ethics review to improve the efficiency and effectiveness of ethics approvals to benefit research happening in BC health authority settings.^{iv}

While progress has been made, BC's research ethics system still has several limitations and processes that impede appropriate and timely ethical review, reinforce colonial structures that do not recognize Indigenous self-determination, and strain the capacity and sustainability of the system and teams who support the research ethics process.

A CALL FOR CHANGE.

This paper explores the current issues and opportunities facing BC's research ethics system and makes recommendations for change.

It was developed by the BC Research Ethics Strategic Action Group, a time-limited working group formed in fall 2025 as the Research Ethics BC Advisory Council concluded its work.

As the provincial research ethics governance landscape evolves to support the next phase of the harmonization initiative, several former Advisory Council members identified a shared interest in documenting the key gaps, challenges, and priority actions needed to strengthen the research ethics system in BC.

The Strategic Action Group brought together experienced leaders from postsecondary institutions, health authorities, government, and community settings to reflect on lessons learned and offer forward-looking recommendations. Clinical Trials British Columbia convened regular meetings of the group from May 2025 to April 2026 to support the development of this paper.

The paper is guided by the authors' shared experience, expertise, and evidence as dedicated members of BC's research ethics community, as well as guidance received from colleagues with experience and knowledge in Indigenous health research ethics.

It reflects the point in time at which it was written – a current state – acknowledging it comes during significant change for the research ethics system in BC and Canada. This paper is intended as a foundational input to ongoing and future engagement with the BC research ethics community.

CHALLENGES

These critical limitations are challenging the effectiveness, capacity and sustainability of the BC research ethics system, ethics review processes, and the people and teams involved.

System readiness to support Indigenous self-determination:

Research led by or with First Nations, Métis and Inuit people must recognize Indigenous jurisdiction over research involving their peoples, lands, data and knowledge systems, guided by principles of respect, reciprocity, collaboration and long-term relationship-building. In alignment with BC DRIPA,^v a distinctions-based approach is needed to ensure that research ethics processes are carried out in a way that respect the unique rights, priorities, values, governments and cultures of First Nations, Métis and Inuit peoples.

The existing ethics system involves institutional policies and processes that operate largely without the involvement of First Nations, Métis and Inuit peoples, even when the research is led by Indigenous people and communities. The BC Network Environment of Indigenous Health Research's environmental scan of 27 REBs^{vi} in the province highlighted the limited involvement of Indigenous communities and organizations in research ethics application, review and approvals processes. It also showed minimal formal education, training and experience for REBs in applying Indigenous cultural safety and anti-racism principles to research ethics review.

There are several initiatives, networks and organizations working to advance Indigenous research ethics in the province to ensure that researchers and REBs are supported to provide culturally safe research ethics review processes alongside Indigenous-led organizations' reviews. Knowledge and wise practices from this work can be used to improve and advance Indigenous health research ethics solutions and tools within institutions responsible for research ethics review.

Healthcare & postsecondary system changes:

Restructuring and systems transformation within health authorities and postsecondary institutions is creating more uncertainty for the people, processes and organizations who support research ethics. This is important because health authorities and postsecondary institutions regularly interact and collaborate with each other through research ethics harmonization and other ethics review processes. Changes in one part of the system can cause flow-on impacts on the ethics review process for other institutions and researchers.

Reductions in non-clinical staff positions across PHSA and the health authorities, and recent provincial-level changes to research administration services,^{vii} are disrupting research ethics operations within health authorities. Public postsecondary institutions are facing significant financial pressures since 2023, with declining international and domestic enrolment and global inflation, creating instability for ethics operations, staffing and capacity. There's also considerable variation in how different postsecondary institutions resource and support research ethics departments, which influences review quality, timelines, opportunities for systems change and, ultimately, the service that REBs provide to researchers and participants. Outcomes of the provincial post-secondary system review, expected later in 2026,^{viii} may result in more significant changes to BC's postsecondary landscape and the sustainability of some institutions.

These developments raise important questions about accountability and provincial coordination, and how these efforts connect with the existing harmonized research ethics system. Knowledgeable leadership, consistent funding and adequate staffing in research ethics is vital to stewarding and sustaining transformation initiatives designed to strengthen the research ethics system in the province.

POSITION STATEMENT.

A robust, coordinated, and sustainable research ethics system is essential to the success of BC's research enterprise and future development. Decisive action is needed by government, health authorities, postsecondary institutions and research funders over the next three years to strengthen research ethics governance and coordination and commit to long-term support and improvements for ethics infrastructure and capacity.

As dedicated members of BC's research ethics community, the authors call on all organizations and leaders responsible for the ethical conduct of research at their institutions to act on these recommendations and set BC on a stronger, more sustainable path forward.

RECOMMENDATIONS.

HARMONIZED RESEARCH ETHICS REVIEW.

Harmonized research ethics review allows researchers to submit a single research ethics application for studies conducted under the jurisdiction of more than one research institution. BC's harmonized research ethics review models are currently used by all health authorities, most research universities and many colleges, reducing duplication and strengthening collaboration across the province. This is supported by Chapter 8 in the Tri-Council Policy Statement for Research Involving Humans.^{ix}

As ethics harmonization continues to progress, there is a need to formalize some of the processes, structures and agreements that underpin BC's current model to ensure it can continue to develop and respond to the needs of BC's research community. An important consideration will be clarifying how research ethics harmonization will interact with other provincial initiatives, including the future potential of a new central research ethics board service and other research approvals under the new shared services organization.

Organizations responsible for the ethical conduct of research should:

- Implement a single digital platform for all research ethics review and approvals across all provincial organizations.^{viii}
- Introduce a provincial policy for a single distributed research ethics board review and approval process for all organizations conducting research with humans.^{vi}
- Establish a multi-partner governance structure to inform coordinated efforts and future work in ethics harmonization.
- Introduce formal agreements to clarify accountability for institutions participating in research ethics harmonization.
- Facilitate performance measurement, quality assurance and continuous improvement for the research ethics harmonization process.
- Provide dedicated time and resources for REB staff to participate in ethics harmonization and surrounding supporting activities.
- Develop institutional guidelines that support adherence to the harmonization process.
- Establish and maintain standardized education and training requirements for research ethics board administrators (REBA) and board members.
- Review human research protection policies and procedures against available national standards^x to identify risks and opportunities for improvement.
- Encourage innovative approaches to ethics review processes and administration that enable the full spectrum of research methodologies and approaches.

INDIGENOUS RESEARCH ETHICS REVIEW.

Indigenous self-determination is a priority. Institutions, REBs and researchers are collectively responsible for ensuring research ethics reviews are culturally safe and grounded in respect, reciprocity and a distinctions-based approach. Collaboration and consultation with Indigenous communities and organizations is essential to Indigenous research sovereignty within the research ethics system.

Organizations responsible for the ethical conduct of research should:

- Provide mandatory training and education in Indigenous-focused ethics for all REB members and staff (e.g., OCAP®, Métis OCAS principles, TCPS2 Chapter 9).^{xi}
- Ensure research agreements co-created with Indigenous communities are mandatory for research involving Indigenous peoples. Research agreements must cover the whole research lifecycle, including distinct community engagement, distinct considerations for community engagement, data governance and long-term stewardship of results.
- Require research institutions to collaborate and take leadership from First Nations to learn, understand and support ethics review processes that adhere to guiding principles and protocols within their jurisdiction.
- Ensure data management approaches are consistent with OCAP® and Métis OCAS principlesⁱⁱ and provide community access to, and control over, data, grounded in a distinctions-based approach that acknowledges the different approaches, priorities and governance structures of First Nations, Métis and Inuit communities.
- Support the creation of a provincially resourced Indigenous research ethics review process for Indigenous research.^{xii}
- Recognize that current access to ethics review for Indigenous organizations is dependent on the harmonized system. New systems under development must be coordinated with the current harmonized system to continue supporting Indigenous research sovereignty.
- Ensure new ethics review systems have meaningful Indigenous engagement built into all processes, including development of ethics application questions.
- Continue to support Indigenous communities and organizations who wish to participate in harmonized research ethics reviews.
- Partner with provincial Indigenous organizations to review and revise the questions relating to Indigenous research in the research ethics application on the Provincial Research Ethics Platform to resolve the original oversight in applying limited local consultation to questions for the provincial platform.
- Partner with local Indigenous organizations to review and update institutional single-site research ethics applications, if not already completed.
- Use knowledge from the *Indigenizing Health Research Ethics in British Columbia*^{xi} project to improve and advance Indigenous health research ethics solutions and tools with institutions responsible for ethics review.ⁱⁱ

CLINICAL TRIALS ETHICS REVIEW.

Improving support for clinical trials is a critical component of research ethics review harmonization. Several reports show the strengths of BC's clinical research opportunities.^{xiii, xiv} A wide variety of clinical trials are active and require specific improvements including a shared platform, standardized training for all research support system staff and ethics roles, and material support for clinicians to participate in research.

Organizations responsible for the ethical conduct of research should:

- Implement a provincial platform with functionalities necessary to support harmonization and single review of multi-jurisdictional clinical trials.
- Prioritize and support clinician participation in research ethics review.
- Develop approaches that enable single review of decentralized clinical trials across a variety of sites, including primary care and community settings.
- Provide formal training for REBs and REBAs on regulatory and policy compliance for research ethics.
- Support ethics harmonization initiatives outside of the REB review process, such as common guidance notes, position statements and informed consent form templates.
- Participate in provincial and national research ethics initiatives that improve BC's ability to engage in multi-site and pan-Canadian clinical trials.

CONCLUSION.

A robust, coordinated, and sustainable research ethics system is essential to the long-term success of BC's research enterprise. The province has an opportunity to build on its strengths, expertise and progress made over the last 15 years to take decisive action to modernize BC's ethics infrastructure, services and supports for a more resilient and sustainable research ethics system.

KEY TERMINOLOGY.

BC Ethics Harmonization Initiative: The BC Ethics Harmonization Initiative (BCEHI) formed in 2011 as a collaborative effort among BC's health authorities and four major research universities to streamline the ethics review process for health research involving multiple institutions. In 2018 the initiative moved under the BC Academic Health Science Network (AHSN) as Research Ethics BC.

Behavioural research ethics boards ([link](#)): Research ethics boards responsible for reviewing research social science or humanities research. Research can be on health or healthcare providers.

Clinical research ethics boards ([link](#)): Research ethics boards responsible for reviewing research that “evaluates the effects of one or more health-related interventions on health outcomes. Investigations include, but are not restricted to, drug administration, surgical procedures, radiologic procedures, devices, genetic therapies, cells and other biological products, radiopharmaceuticals, natural health products (NHPs), process-of-care changes, preventive care, manual therapies, and psychotherapies.”

Harmonized ethics review ([link](#)): A collaborative review model for research that crosses multiple jurisdictions and is occurring under the auspices of multiple institutions participation in the initiative. There are review models for minimal and above minimal risk research, clinical trials and specialized research ethics reviews. Researchers to submit a single ethics application, the application receives proportionate and collaborative review, a single set of requested changes (provisos) and single certificate of approval are issued. Harmonization reduces duplication of effort and time in the ethics process, while increasing efficiency and maintaining integrity.

Human Research Protection Program ([link](#)): the “integrated governance system that coordinates policies, oversight, education, and compliance activities to protect human research participants”. They generally include “[REB] operations, investigator responsibilities, training programs, quality assurance, reporting pathways, and institutional leadership accountability. A strong HRPP supports consistent informed consent practices, safety oversight, and ethical decision-making across studies.” See also Human Research Accreditation Canada ([link](#)).

Multi-jurisdictional research ([link](#)): research that crosses the jurisdiction of multiple REBs, often stemming from collaborations between researchers or researchers holding multiple affiliations (e.g. at an academic institution as well as a health authority). The review of multi-jurisdictional research includes two or more REBs, provincially, nationally and internationally. The TCPS2 encourages collaborative review models.

Research Approval Processes Project ([link](#)): A joint Ministry of Health and health authority initiative commenced in 2023, RAPP is made up of three key streams of work in ethics, operations and data access. Through these efforts, RAPP seeks to create a more cohesive and efficient research approval framework that can better serve British Columbia's health care system and health research ecosystem.

Research Ethics Boards ([link](#)): Research Ethics Boards (REBs) are independent committees established by universities, health authorities and other research institutions, authorized to review the ethical acceptability of research. They are independent from their host institutions, and are authorized to approve, reject, propose modifications to, or terminate any proposed or ongoing research involving human participants.

Research Ethics Board Administrators (REBA): Staff at institutions tasked with supporting and running a Research Ethics Board. Titles may include Director, Research Ethics; (Pre-Post Review) Manager, Research Ethics; Research Ethics Officer, Research Ethics Coordinator, Research Ethics Lead. Responsibilities can range from building and running technological platforms, institutional policy creation, review and enforcement, reports and metrics, office management, consults for researchers and trainees or students, administrative or pre-reviews of research ethics applications, both initial and subsequent (amendments, renewals), compiling and collating reviewer provisos, issuing certificates, recruiting, onboarding and training REB members and more.

Research Ethics British Columbia ([link](#)): Research Ethics BC (REBC) emerged from the BC Ethics Harmonization Initiative, which has evolved over more than 15 years into a province-wide collaboration that brought together health authorities, universities, and research institutions to streamline and strengthen ethics review for multi-site health research. Supported over time by organizations which are now consolidated as Michael Smith Health Research BC, REBC's central contribution was the advancement of a harmonized model that enabled a single ethics application across participating institutions. As the provincial research ecosystem has continued to mature, this work has been intentionally integrated into broader, system-level efforts to coordinate research approvals and improve end to end processes. While REBC as a distinct entity has wound down, its core functions, relationships, and principles have been embedded across the provincial system, with ongoing leadership, coordination, and support now spanning partners including Health Research BC through Clinical Trials British Columbia.

Single research ethics board review ([link](#)): A model of multijurisdictional research ethics review where a single REB is designated as the Board of Record for a multijurisdictional research ethics application. That REB is responsible for the entire research ethics review for the lifecycle of the research. One review by a single REB is conducted and one certificate of approval is issued. Official agreements between the institutions are required.

Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans ([link](#)): A joint policy between the Canadian Institutes of Health Research (CIHR), the Natural Sciences and Engineering Research Council of Canada (NSERC), and the Social Sciences and Humanities Research Council of Canada (SSHRC) that institutions who receive funding from the agencies are required to comply to.

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