Definitions

Deception is a research technique that involves intentionally misleading or withholding full information about a research study from participants. Misleading or omitted information might relate to the purpose of the research, the role of the researcher or other participants, the true nature of the procedures to be followed, or any other part of the study. While it is an accepted research technique, deception raises ethical concerns because it interferes with the ability of the participant to give informed consent. However, deception is arguably necessary for certain types of research where participants’ full knowledge is likely to bias the results by causing participants to act differently than they naturally would.

Policy

Deception presents challenges for IRB review because of its interference with informed consent and general ethical considerations. Accordingly, most ISU studies that involve deception will require review by the convened IRB. Studies that involve only “minor” deception and fit into the categories that can be reviewed using expedited procedures under 45 CFR 46.110(b) can be reviewed by the Chair.1

Minor deception is present where the deception involves withholding or omitting information, such as the purpose of the study or certain procedures. If the purpose or procedures described to subjects are generally accurate, but some details are withheld, the deception can be considered minor. (E.g., subjects are asked to do a word or counting task but are not told why or how it relates to the other procedures; the purpose of the study is described as examining how personality relates to well-being when, in fact, the purpose is to learn how introversion or extroversion relates to one’s likelihood of being depressed—the purpose as described is accurate, but not entirely complete.)

When participants are intentionally misled, tricked or told something untrue, where confederates are involved, or where the use of deception might be upsetting to participants (i.e., they are told their score on an inventory indicates latent homosexual tendencies; they are asked to do something they believe to be harmful to others; etc.), the deception is not minor and should be reviewed by the convened IRB.

When reviewing any studies using deception (minor or not), the following issues should be considered in conjunction with the criteria for approval under 45 CFR 46.111:

- Is deception necessary to conduct the study?
- Would participants be less likely to participate should they know the withheld information?
- Is the deception likely to upset or inflict any kind of harm to participants?
- Will subjects be debriefed after the experiment is completed, and is the debriefing adequate?

1 Studies governed by FDA regulations cannot be approved if deception is involved because the required waivers of consent can only be granted under limited conditions involving emergency, life threatening situations for participants under 21 CFR 50.23.
• Is the study “minimal risk”? (Regulations do not allow elements of consent to be waived when a study poses greater than minimal risk to participants.)
• Can the relevant elements of consent be waived (i.e., are the requirements under 45 CFR 46.116(d) met)?

NOTE: The following Code of Ethics related to the use of deception in research was developed by the American Psychological Association. It provides a basis for the definitions and policy above.

Ethical Principles of Psychologists and Code of Conduct

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8.07 Deception in Research
(a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study’s significant prospective scientific, educational, or applied value and that effective non-deceptive alternative procedures are not feasible.

(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.08 Debriefing
(a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.

(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

Document History

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