Adaptive Platform Trial Scientific Meeting

September 28 – 29 • Toronto, Canada

CanTreatCOVID

Canadian Adaptive Platform Trial of Treatments for COVID in Community Settings

Implementing Good Participatory Practices (GPP) in Adaptive Platform Trials: Ethical and practical challenges

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Acknowledgements:

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Scan me!

hhe humanitarian health ethics
reflecting on ethical practice

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Background

Community engagement and patient inclusion have evolved to become important considerations in the practice of clinical research

Good Participatory Practice for Emerging Pathogens (GPP-EP):
…a principle-based approach to effectively engage stakeholders in the design and conduct of prevention and treatment trials for emerging and re-emerging pathogens (WHO)

Instrumental as well as intrinsic value

https://www.who.int/publications/m/item/r-d-good-participatory-practice-for-covid-19-clinical-trials---a-toolbox

https://www.who.int/publications/m/item/good-participatory-practice-(gpp)-with-trial-populations-for-the-solidarity-trial-vaccines-(stv)

Background

Good Participatory Practices (GPP) "… *help ensure respectful community engagement and strengthen trust through collaborative partnerships.*"

May include stakeholder mapping, engagements across community, CABs, updates… and more…

Potential benefits include enhanced relevance of the intervention, suitability and feasibility of trial design, and improved uptake of findings

Differences between GPP and community engagement

Community Engagement

- Seeks to engage the community to achieve long-term and sustainable outcomes, processes, discourse, decision-making or implementation of projects/programmes
- Create more effective solutions, empower and integrate diverse population, provides opportunities to discuss concerns

Good Participatory Practices

- Seeks to involve various stakeholders in the design and conduct of prevention and treatment trials
- Mutually beneficial, sustained relationship between trial sponsors, researchers, other stakeholders throughout the clinical trial in a health emergency
- Engagement + partnership

GPP-EP&WHO COVID platform trials

- In March 2020, we developed practical operational tools to implement WHO's 2016 GPP-EP guidance in the context of COVID-19 clinical trials.
- Bespoke programme to support national teams delivering WHO's global Solidarity Trial Vaccines to embed GPP-EP in trial implementation.
- In the dynamic and unpredictable pandemic context, this involved providing remote support via national GPP-EP leads to teams implementing the trial in five countries in Southeast Asia, Latin America and Africa.

Lessons Learned study: Objective

To understand the ethical considerations and practical implications of implementing GPP-EP for adaptive platform trials from experience during COVID-19.

Methodology

Davies, A, Ormel I, Bernier A, Harriss E, Mumba N, Gobat N, Schwartz L, Cheah PY. "A rapid review of community engagement and informed consent processes for adaptive platform trials and alternative design trials for public health emergencies." *Wellcome Open Research* 8, no. 194 (2023): 194.

Qualitative descriptive study embedded into the GPP-EP program implementation

- In-depth interviews with 10 respondents from the program
- Roundtable with 12 national GPP leads
- Thematic analysis

GPP activities

GPP for COVID-19 clinical trials toolbox an overview

Before the study starts

- Carefully select and understand context – work with local experts as equal or leading partners.
- Plan adequate budgeting for GPP and designate a team member to be GPP lead.
- Identify and engage with stakeholder populations to assess study appropriateness and acceptability.
- Think about the end of the study as you prepare, and include stakeholders' involvement in shared outputs.
- Develop a stakeholder engagement plan.
- Engage with stakeholders and meet with local and national authorities.
- Seek permissions at national and local levels.
- Harmonize the study with local response plans.
- Agree on standards of care and set up optimal trial conduct.
- Understand community concerns, resistance and rumours.
- Develop clear and locally appropriate study information for public/community engagement and informed consent forms.

During the study

- Monitor study implementation and impact in the community.
- Apply and continuously amend the stakeholder engagement plan.
- Engage potential participants in honest informed consent and wider information-sharing processes.
- Include local expertise in research data collection and analysis.
- Keep track of community priorities and concerns raised, how and where these were raised, and if and how they have been responded to by the research team. Concerns may be about the study itself, other studies being conducted in the area, or broader health care provision.
- Engage with and build local capacity. Carefully plan and follow through with collaborator agreements, and enable their contributions.

After the study

- Maintain relationships to support future research engagement:

- Managing closure and exit
- Ensuring access and implementation of study findings
- Sharing results through targeted and broad dissemination strategies

https://www.who.int/publications/m/item/r-d-good-participatory-practice-for-covid-19-clinical-trials---a-toolbox

Reflections: Benefits and Risks of GPP

Benefits

- A tool to engage with various stakeholders
- Fosters trustworthiness and addresses misconceptions of the community
- Engagement with high-level government authority

Risks

- Can be overly focused on operational aspects, particularly in time constrained settings
- If not done well, it can be tokenistic

"These type of projects definitely need a team that has a lot of experience and know how to engage the people, to communities they need to know how to do it, have some experience and I think all the information and all the communication before actually starting it is fundamental." *(C_1)*

Reflections: Contextual and ethical challenges

Contextual Challenges

- Risk perception was dynamic & influenced by:
  - Emergence of new variants
  - Availability of vaccines
  - Emergency use protocols
- National vaccine roll out
- Changes in the government
- Variable and changing public health policies

Ethical Challenges

- Instrumental value of GPP-EP can outweigh intrinsic value – e.g. follow up calls
- Who can influence platform trial design
  - Extent of influence once the trial is initiated
- Need for consistency can override collaboration and contextualization

> *"To invite people to the trial, we would need to be accompanied by a member of the Group to facilitate the trust and camaraderie to the community because we were strangers, you know, we were seen as outsiders."* *(P_1)*

Reflections: Response Strategies

Contextual

- Stakeholder engagement and re-engagement
- Grassroot engagement
- Providing a space for the target population to share their perceptions
- Modifying technical language and conducting trainings
- Important to involve volunteers and frontline staff

Ethical

- To ensure that the research product is safe and efficacious
- Communication must be regular and ongoing
  - Helped ensure participants understood the consent form clearly and know what they were agreeing to
  - Explaining the value of the study and why everyone around the world should have access to the vaccines
- Ensuring data safety for participant information
- Restitution of findings needs to be planned

Lessons Learned

- Key to strong GPP practice is balancing the intrinsic and instrumental value
- Enables the participants to share their perspectives and raise their concerns
- Need to be adaptable, flexible, and contextualized
- Critical to enable high-level engagement
- GPP activities are integral to trial implementation
  - Tools should be accessible and available for all stakeholders

Questions to consider

- Can GPP contribute to research design in PTs?
  - What are the advantages of partnering within communities in trial design?
  - How can big/small platform trials accommodate engaging the community?

"So the leaders were asking, we already have the vaccine, why can't you do a noninferiority trial instead of a placebo?" *(P_2)*

- Do we value this kind of engagement and why should we value it?

- How can trialists –
  - Appreciate the value of GPP?
  - Identify approaches to implement GPP standards?

What do we lose, what do we gain?

"I am also prejudiced against large-scale, multicentered trials in which important local differences are submerged and lost in the chaos of amorphous data. The current emphasis on these expensive (and sometimes misleading) megatrials takes resources away from the small-scale studies that are so needed to address locally important issues. What we really want to know is ‘‘What are the likely effects, good and bad, of this intervention for our patients, in our setting, with our resources, our skills?’’ We are less interested in the big question ‘‘Does this intervention work on average everywhere?’’’’ (Birth, 2005)

Dr Murray Enkin, Professor Emeritus, Obstetrics and Gynecology, and Clinical Epidemiology and Biostatistics, McMaster University Medical School, and Hall of Fame member.

Conclusion

- GPP supports gains around
  1. Preparation, contextualization, feasible design, recruitment,
  2. Ongoing communication and feedback,
  3. Restitution of findings, future trust

"It's actually good practice to have GPP prior to [trial launch] as a way of preparing and I think this is not highlighted as much in you know in the usual practice of clinical trials, but I think much time has to be given for the preparation of the community. Rather than just implementing it outright. Also, the end of it results and feedbacking has to be done to complete the circle." (P_1)

Benefits

https://www.who.int/publications/m/item/good-participatory-practice-(gpp)-with-trial-populations-for-the-solidarity-trial-vaccines-(stv)

GPP applies across research types and settings and at all stages of research.

The benefits of delivering effective GPP:

- It strengthens the design, acceptability and quality of research, including the feasibility assessment for site selection.
- It strengthens recruitment and informed consent processes by incorporating local views and through dissemination of information.
- It identifies and minimizes physical or social risks (e.g. community or individual stigma) that may result from enrolment.
- It strengthens alignment of research approach and outcomes with the collaborating population's priorities.
- It can empower communities and demonstrate respect, both goals in themselves, and strengthen mutual understanding, trust and credibility of researchers with implications for current and future research.

Thank you

Thanks to the GPP for STV team