

**From the point of view of researchers and research ethics committees, what, if any, are the major ways in which mental illness itself differs from other health problems?**

The group had difficulty defining mental illness.

Even when they can be distinguished, many of the same situations arise with both physical and mental illness.

- Some psychological illnesses may not have physical symptoms but are diagnosed based on what the patient says.
- May be syndromes or illness whose criteria are vague—hard to determine who has or doesn't have it

But, not clear that there are morally relevant differences between mental illnesses and other health problems (some disagreement)

- Some with mental illness can give consent and some without are not capable

**What, if any, are the main ethical implications for research, of the problems with capacity and competence that are likely to be associated with mental disorders?**

**Should there be a set of special precautions and/or procedures for the ethical conduct of research with mentally disordered persons who have diminished capacity and competence? If so, what should these special precautions and procedures be?**

Need to have someone who can provide proxy decision for them if not able to consent themselves

Possibility of conflict of interest if researcher is involved in determination of capacity/competence

Needs to be described in the protocol and have ethics committee approval

If patient's competence improves changes (e.g. become incompetent), does the situation need to be reassessed? (Disagreement)

Other possibilities:

- Can start competent and become incompetent or can start incompetent and be entered into research by proxy
- For each can be case where being in research is in the best interest of subject and cases where not so clear — gaining of knowledge wd make research ethical

**Are there any special issues in research of mental disorders that arise in developing country/under-resourced settings? If so, what are these and what additional measures do they require.**

Some doctors in developing countries may be less sympathetic to mental illness.

- Research needs to be monitored and there are limited resources to do this.
- Serious adverse events are advised but no action taken.

It is ok to impose a particular model of illness even when culture differences about how that illness is understood?

- We should respect the particular culture
- Definitions of mental illness may reflect judgments about what is normal and abnormal. They may vary according to culture differences.
- But, there may be global criteria for mental illnesses (e.g., from WHO). Bad science is bad ethics.