

The Ethics of Social Research with Children: An Overview¹

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This paper attempts to provide an overview of ethical issues related to social research with children. It sets the discussion in the context of current debates about researching children in the UK, and explores the extent to which children should be regarded as similar to, or different from, adults in social research, focusing on how children are positioned as vulnerable, incompetent and relatively powerless in society in general, and how this conceptualisation of children needs to be taken into account in social research. The paper concludes with some practical and methodological suggestions.

This paper explores some of the ethical dilemmas that researchers face when conducting social research with children. 'Social research' covers a wide range of social science disciplines, including psychology (experimental, developmental, behavioural and social), sociology, social anthropology, criminology, educational and social policy research. Many UK research organisations and professional associations issue codes of good practice, some of which set criteria for research, while others are more general and provide guidelines for the basis of ethical research rather than attempt to set absolute standards. This paper draws together ideas and concepts from these different fields in an attempt to make some practical suggestions for what might be very broadly termed a 'sociology of childhood'. 'Children' are taken to include 'all those under 18 years of age' (see, e.g. UN Convention on the Rights of the Child) but the term 'child' masks a wide range of categories of children. Further, the concept 'child' also denotes a relationship (child as parents' offspring) and as we shall see, parental consent is often seen a key criterion for research to be seen as ethical. By 'ethics', we mean a 'set of moral principles and rules of conduct': ethics in research, as one author has put it, relates to 'the application of a system of moral principles to prevent harming or wronging

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others, to promote the good, to be respectful, and to be fair' (Sieber, 1993, p 14). Essentially, the dilemma that we are exploring in this paper is that in everyday social life, we (as adults, parents, or researchers) tend not to be respectful of children's views and opinions, and the challenge is to develop research strategies that are fair and respectful to the subjects of our research.

This paper is divided into four sections. First, we briefly explore the background to current discussions about researching children in the UK. In the second section of the paper, we examine existing sets of ethical guidelines for social research and discuss how these might be useful in sociological research with children. The third section explores the extent to which child research differs from research with adults; and finally, we conclude with some suggestions, both practical and methodological, which we hope will be of use to researchers.

1. Background

In the UK, there has been a recent increase in the demand for children's voices to be heard and their opinions to be sought in matters that affect their lives. The UK Government has ratified the UN Convention on the Rights of the Child, which has important clauses on children's right to participation. Article 12 stipulates that:

States parties shall assure to the child who is capable of forming his or her own views the right to express those views freely *in all matters* affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child (emphasis added).

and 'For this purpose, the child shall, in particular, be provided with the opportunity to be heard in any judicial and administrative procedures affecting the child'. This set of principles acknowledges that children have the right to be consulted and taken account of, to have access to information, to freedom of speech and opinion, and to challenge decisions made on their behalf. If this set of principles was respected, it would clearly represent a major shift in the recognition of children as participants in society (Lansdown, 1994). The International Year of the Family (IYF) Family Agenda for Action also highlights the issue of strengthening children's rights and incorporating children's views 'when decisions are made about them in their families and at school' (IYF UK, 1994, p 10). The England and Wales *Children Act 1989* represented a move from parental duties to parental responsibilities, and importantly stipulated that courts shall have particular regard to 'the ascertainable wishes and feelings of the child concerned (considered in the light of his [sic] age and understanding)' (S. 1(3)(a)). In law there have been shifts in how children's 'competence' to make decisions for themselves is regarded, and this is discussed later. Correspondingly, in some areas of social research there has been a growing recognition that children's views and perspectives can and should be elicited on a range of issues that affect them.

However, while there are plenty of 'sociologically *relevant* discussions of children's problems and problem children' (Qvortrup, 1987, p 3), there are few sociological studies based on children's accounts of their everyday lives and experiences, and sociologists and anthropologists are increasingly acknowledging that *sociological* research (as opposed to psychological/behavioural/medical research) with children is underdeveloped (Alanen, 1992, 1994; Qvortrup, 1987). At the margins, there have been recent developments in social theory (Alanen, 1992; James and Prout, 1990, 1995; Qvortrup, ISA Conference on Children and Families: Research and Policy, London, 1994; Qvortrup and others, 1994)

and in macrosociological accounts of childhood in comparative perspective (Childhood as a Social Phenomenon Project, see Qvortrup and others (1994), for a summary) and this small but significant amount of activity appears to be developing into a discrete subdiscipline within sociology, a 'sociology of childhood' (Brannen and O'Brien, 1995; Mayall, 1994b). This involves moving on from the narrow focus of socialisation and child development (the study of what children will *become*) (Skolnick, 1975; Thorne, 1987) to a sociology which attempts to take children seriously as they experience their lives in the here and now as children. However, as yet there has been little discussion within sociology of the ethical dilemmas that researching children raises.

Developmental psychologists have, of course, long experience of working directly with children and have increasingly begun to use research ethics committees (RECs) to ensure that unethical research does not take place. Sociologists on the other hand tend not to put proposals before RECs, and rely on guidelines in a fairly arbitrary manner. This is not to imply that all developmental psychological research is thus ethical, nor that all sociological research is therefore unethical (indeed part of our argument is that ethical considerations need to be ongoing throughout the research process and cannot be dealt with once and for all at the outset of a research project), rather it may be a reflection of the relative status of social science disciplines and corresponding resources and funding.

Empirical sociological research studies based on data collected from children themselves are relatively few and far between (though see Amit-Talai and Wulff, 1995; Mayall, 1994a). Further, while there is an increasing tendency for researchers working with all social groups to reflect upon and describe their experiences of the research process when writing up their results, as yet there is no UK textbook discussing researchers' reflexive accounts of undertaking social research with children in the same way that we find accounts of 'doing' social research with adults more generally (Bell and Newby, 1977; Steier, 1991), or feminist accounts of women's experiences of researching women (Hollway, 1989; Roberts, 1981). These accounts often describe and highlight the ethical problems that researchers have faced in carrying out their research, and the discussions of how they have dealt with them are often helpful and encouraging for other researchers. Often tucked away in accounts of doing research with children are demonstrations of how children may be positively engaged to help in research projects, and how they can provide spontaneous and rich accounts of their lives (see, for example, Ennew and Morrow, 1994; James, 1993; Middleton, 1994; Prendergast, 1994). To date (as far as we are aware) there has only been one (UK) discussion which focuses specifically on the *ethics* of social research with children, Alderson's (1995) detailed booklet *Listening to Children. Children, Ethics and Social Research*, prepared for Barnardos', a charitable organisation for children, and which provides some sound practical advice and guidelines for researchers.

The absence of any discussion within sociology of the practicalities and ethics of carrying out research with children is hardly surprising, because sociology as a discipline has tended to ignore children, and left them to psychologists to study. In handbooks on methodology, children are rarely mentioned, and if they are discussion often relates to fairly young children and can be rather patronising in tone: Spradley (1979, p 51), for example, in *The Ethnographic Interview*, suggests that 'children usually make good informants and they have adequate free time'. There is, of course, a good deal of discussion on qualitative research in educational settings (Burgess, 1984, 1989). However, to a certain extent, the sociology of education is not 'about' children per se: one textbook on the ethics of educational research does not have 'children' in the index, and we could

find only one mention of the ethical dilemmas that one researcher faced when interviewing girls (Riddell, 1989). Similarly, sociology of the family is not 'about children', and we know little about children's experiences of family life, which is all the more surprising given that, to a significant extent, children can be said to constitute families (James, Youth 2000 Conference, Middlesbrough, 1995). Further, sociology of the family or education often uses adults—parents or teachers—as informants about children, so even where children are the central concern of research, they may not be directly involved. The contrary point could be made about developmental psychology. As has been stated, most is concerned about what children may become; however, there is a long-standing, but minor tradition, that has been concerned with the social worlds and daily lives of children (for example, Richards, 1974; Richards and Light, 1986).

2. Existing ethical guidelines

This section of the paper explores whether ethical guidelines that apply to social research in general are useful in developing sociological research with children. A considerable amount has been written on the ethics of medical research with children (Nicholson, 1986) and psychological/behavioural research with children in the US (Grodin and Glantz, 1994; Stanley and Sieber, 1992), and various research councils and professional bodies issue ethical guidelines and codes of practice which are intended to help researchers to carry out their research in an ethical manner. Some of these relate specifically to children: the Medical Research Council (MRC) (1991) booklet *The Ethical Conduct of Research on Children*, relates to *medical research on children*. 'Children' are defined as anyone under the age of 18 years. Briefly, it recommends that children should only be included in research if, firstly, the relevant knowledge could not be gained by research in [sic] adults, and the results of research will be of benefit to children; secondly, it is approved by the appropriate [clinical] REC; thirdly, either those included have given consent, or consent has been given on their behalf by a parent or guardian and those included do not object or appear to object in either words or action; fourthly, in the case of therapeutic research, the benefits likely to accrue to a child participating outweigh the possible risk of harm (and risk here appears to mean the risk of *physical* harm); and finally, in the case of non-therapeutic research, participation places a child at no more than negligible risk of harm.

The British Psychological Society (BPS) *Code of Conduct Ethical Principles and Guidelines* (1991) is not specifically about children, (indeed they seem more preoccupied with the ethics of research on *animals*) but has several passages about children in it. On consent, children are considered alongside 'adults with impairments' (and there is no mention of how to gain consent from children with impairments; but see Minkes, Robinson and Welton, 1994). The recommendation on consent is that 'In addition, where research involves all persons under sixteen years of age, consent should be obtained from parents or from those "in loco parentis".'

Social research guidelines (British Sociological Association (BSA) and Association of Social Anthropologists (ASA)) give general guidelines that apply in social research with any human subjects and the ASA (1987) guidelines make no specific mention of children. The BSA *Statement of Ethical Practice* includes the clause 'Special care should be taken where research participants are particularly vulnerable by virtue of factors such as age, social status and powerlessness' (para 1 (e)). However, special care is not defined, and children are clearly disadvantaged by all three factors, age, social status and powerlessness. The National Children's Bureau (NCB) (1993) *Guidelines for Research* follow the BSA

statement and append their own suggestions, mostly related to child protection and emphasising the duty of researchers to pass on disclosures of potential 'risk of significant harm' to a professional 'who can take the steps necessary to protect the child or other children'. Obviously, the NCB are working from within a model of child protection, but their guidelines provide a starting point for thinking about potential ethical dilemmas when researching children. Alderson (1995, pp 2–6) has a useful set of ten topics that she recommends for consideration in carrying out social research with children, which relate to the purpose of the research; the costs and hoped-for benefits for children; privacy and confidentiality; selection, inclusion and exclusion; funding; information for children, parents and other carers; consent; and the impact of research on children.

In general, discussions about research ethics are centred around two key preoccupations, firstly informed consent, and secondly, protection of research respondents. Both of these are problematic in research with children. The issue of informed consent dominates discussions on research with children, particularly in the US. Indeed, the *Family Privacy Protection Act* 1995 passed by the House of Representatives stipulates that *written* parental consent must be obtained if children are to be asked to participate in sensitive social research. In the UK, consent is usually taken to mean consent from parents or those 'in loco parentis', and in this respect children are to a large extent seen as their parents' property, devoid of the right to say no to research. In practice, researchers usually obtain consent from a wide range of adult gatekeepers (parents, school teachers, head-teachers, school governors, local educational authority officers and so on in the case of school-based research) before they are allowed anywhere near the children, and may feel unwilling to jeopardise their research project by asking the children explicitly for their 'informed consent'. Further, there may be some circumstances in which older children may consent to participate in research and it may not be appropriate to seek parental permission (see discussion of 'Gillick-competence' later).

Discussions of children's competence to consent usually focus on the age of the children concerned. Alderson (1995, p 69) notes that 'a distinction between adults and very young dependent children is obviously needed'. There is a further distinction in discussions of ethics between *consent* and *assent*. Informed consent is taken to mean the process whereby someone (usually an adult, the assumption being that children are not competent to give informed consent) 'voluntarily agrees to participate in a research project, based on a full disclosure of pertinent information' (Tymchuk, 1992, p 128), while permission and assent 'refer to a parallel process in which the parent or guardian agrees to allow a minor ward to participate in a research project, and the child assents or agrees to be a subject in the research' (ibid, p 128). Tymchuk points out that the reasons for requiring parental permission and assent relate to parents' rights to have a say in what happens to their children, and this in turn relates partly to parents' responsibilities 'for minor children, and partly [to] the fact that 18 is the age of majority for other purposes than research' though, he notes, 'the age of majority was not based on any empirical determination of when young people acquire mature decision-making skills' (ibid, p 129).

Nicholson (1986, p 235) on medical research with children recommends that the consent of parent or guardian be required at all ages, and that the child's assent should be sought from the age of 7 upwards'. How far one may draw the comparison between consent to medical treatment or medical research (where the risks of harm or possibilities of benefit may be much more obvious) and consent to participate in a social research project (where hopefully the research participant's life is not in danger) is not clear, but there are some related discussions that may be useful. The legal distinction of 'Gillick-competence',

which stipulates that a competent child is one who 'achieves a sufficient understanding and intelligence to enable him or her to understand fully what is proposed' and further that the competent child also has 'sufficient discretion to enable him or her to make a wise choice in his or her own interests', is important, because it highlights the fact that it is not simply chronological age which determines competence. US researcher Thompson (1992 p 60) suggests that:

Perhaps searching for a minimum threshold age for children's consent is asking the wrong question. Depending on the context and the complexity of the judgement, children at most ages are capable of making decisions concerning what they want to do, so perhaps the child's competency to consent to research participation should not be regarded as an inflexible limitation deriving from the child's age, but rather as an interaction of the child, the context, and the nature of the (decision-making) task. Children from a surprisingly early age can understand basic elements of the research process and their role within if this information is presented in an age-appropriate manner.

Clearly, children's competence to consent to participate in research depends partly on the context and partly on precisely what they are consenting to undertake.

Other researchers have suggested that involving children in decision-making processes about whether to take part in a research project can in itself be seen as a useful experience, giving children a sense of control over their own individuality, autonomy and privacy (Weithorn and Scherer, 1994).

The protection of research participants from risk of significant harm, both during the research process and as a consequence of the research, is the other key preoccupation of ethical guidelines. Alderson (1995, p 41) suggests that 'an "Impact on Children" statement for each research proposal [should] examine the likely effects of the research questions, methods and conclusions on the child subjects and on all young people affected by the findings'. Children should be entitled to the same degree of confidentiality and privacy as adult research subjects, with the added proviso that researchers will have to deal with cases of disclosure of potential harm as and when they arise. If researchers feel that they must report a child's confidences, then Alderson (1995, p 3) recommends that they should try to discuss it with the child first.

On the whole, the relevance of medical or psychological research guidelines for sociological research which attempts to adopt a children's perspective is by no means clear. Surely children themselves are 'the best source of information about issues pertinent to children' (Scott, 1996). Proxy information, as recommended by the BPS or MRC, is undoubtedly advisable where the risks of research may be significant; but provided one treats one's research subjects with respect, and is aware of the limitations of one's methods, then collecting data from children is an obvious way to gain insight into children's lives and experiences. Ethics committee guidelines place great emphasis on obtaining informed consent—perhaps it would be more helpful to allow 'informed dissent', enabling children to refuse to participate in research, though again this will be complicated by discussions about age-related competence.

Existing ethical guidelines appear unlikely to provide specific, clear applications to the dilemmas that researchers face (see Alderson, 1995, pp 37–9). Researchers need to be aware that ethical considerations are ongoing, and that ethical dilemmas may arise at any stage of the research, and not just at the point of contact with research subjects. Further, it is dangerous to assume that because a piece of research has been passed by an ethics committee then it is *ipso facto* an ethical piece of research. It should also be remembered

that ethics committees exist as much to protect researchers and institutions where research is carried out as those who may be the subjects of research. Their membership is usually dominated by the relevant profession (such as doctors in the case of medical ethics committees) though there may be a leavening of 'lay' members and professional 'ethicists'. We are unaware of any committees that number children among their members or attempt to consult children about research that involves them.

On balance, it seems likely that broad guidelines are useful as a guide and as a way of helping researchers to consider potential ethical dilemmas that may arise, but they should allow room for personal ethical choices by the researcher (see Plummer, 1983). As we have seen, research ethics guidelines from psychological or medical bodies focus centrally on the distinction of age of the children concerned, but pay little attention to differences between children according to ethnicity or gender or the power relationships between researcher and researched. Plummer (1983) has identified two positions in discussions of social research ethics in general: the ethical absolutist and the situational relativist. The ethical absolutist sees ethical guidelines as essential for the protection of both the community and the researcher. The situational relativist, on the other hand, sees the ethical dilemmas of the social scientist as not special but 'co-terminous with everyday life, and there can be no absolute guidelines; ethics have to be produced creatively in the concrete situation at hand, and any attempt to legislate this morality could simply degenerate into mindlessness [or] rigidity' (p 141). We suggest that ethical considerations need to be situational and context specific and, above all, ongoing throughout the process of research, from inception to dissemination of findings. However, the danger here is that ethics may become whatever is convenient to the researcher. A middle path between the two positions is probably the most helpful approach (Plummer, 1983).

3. Different or the same? Vulnerability and incompetence

Arguments about ethics of social research with children can effectively be reduced to the question of the extent to which children are regarded as similar to or different from adults, and these discussions in turn can be reduced to two related descriptive perceptions that adults hold of children, that is, children as vulnerable and children as incompetent. These conceptualisations are reinforced by legal notions of childhood as a period of powerlessness and irresponsibility.

3.1 *Vulnerable children*

As already mentioned, there are some thorough discussions of the ethical dilemmas raised by medical and psychological research with children, in particular Nicholson (1986), and papers in two US volumes, Grodin and Glantz (1994) and Stanley and Sieber (1992). However, such discussions are dominated by a particular conceptualisation of children as vulnerable and consequently in need of protection from exploitative researchers, and as the *objects* rather than subjects of research. In other words, the methodological starting points for such discussions, and the epistemological assumptions about what children are, are based on a specific formulation of the category 'child', which we need to move away from if we are to attempt a *social* analysis of children's experiences, and in doing so are to see children as social actors in their own right.

A second, and related, consideration is that (not least for funding and social policy reasons) research with children in the UK has tended to be dominated by concerns about

groups of children who are vulnerable in some way: 'problem children and children's problems' (Qvortrup, 1987). A specific conceptualisation of children again appears to dominate, as weak, passive, and open to abuse. Research has tended to focus on children already damaged by their experiences and this inevitably raises ethical questions, which are not always adequately addressed. Rightly, these children are seen as in need of protection from further harm by exploitative researchers, or thoughtless researchers who may cause distress by asking children to describe upsetting or damaging experiences. But the consequence of this is that we know something about certain problematic groups of children and young people, and very little at all about 'ordinary' or 'normal' children and young people, and thus we have no baselines with which to compare the experiences of the vulnerable with the unexceptional.

Lansdown (1994) suggests that children are vulnerable in two respects: they are inherently vulnerable because of their physical weakness, and their lack of knowledge and experience, which renders them dependent upon the adults around them. Secondly, they are structurally vulnerable, 'because of their total lack of political and economic power and their lack of civil rights' (p 35) which derives from historical attitudes and presumptions about the nature of childhood. She emphasises that:

there is a tendency to rely too heavily on a presumption of children's biological and psychological vulnerability in developing our law, policy and practice, and insufficient focus on the extent to which their lack of civil status creates that vulnerability (p 35).

As she points out, we simply 'do not have a culture of listening to children' (p 38; see also Flekkoy, 1991). The consequence of this presents a dilemma for social researchers: in the UK, we simply are not used to talking to children to try to ascertain their views, opinions and so on. There are so few attempts to understand children's lives 'in their own terms', and taking children's own words at face value, and as the primary source of knowledge about their experiences, effectively goes against a tradition in sociology in which children's voices have rarely been heard and their opinions rarely sought (see, e.g. Mauthner (1995) on women, and Butler and Williamson, 1994). The challenge for social research is to find ways of eliciting children's opinions and experiences, and to develop appropriate methods and corresponding strategies to deal with ethical dilemmas that may arise.

A further important point to note is that an overly protective stance towards children may have the effect of reducing children's potential to participate in research. As Grodin and Glantz (1994, p vi) suggest, research with children

presents a powerful tension between two sometimes conflicting social goals: protecting individual children from harm and exploitation, while at the same time increasing our body of knowledge about children in order to develop beneficial medical, psychological, and social interventions.

(Grodin and Glantz, 1994, p vi)

The consequence of such an overprotective stance may well be that there are various aspects of children's lives that we simply know nothing about.

Finally, children's perceived vulnerability means that a further fundamental difference is that the obligations, duties and responsibilities that researchers have toward their subjects are qualitatively different when working with children and relate to adult responsibilities towards children in general. Thus, if a child discloses that he or she is at risk of harm, then the assumption is that the researcher has a duty to pass this information on to a professional who can protect the child/other children at risk (see NCB

guidelines). Researchers need to recognise their moral obligations as adults to protect children at risk even when this may mean losing access to, or the trust of, the children concerned if they do intervene. On the other hand, children expect adults to behave in certain ways and by not intervening in certain situations, adult researchers may lose credibility (Boyden and Ennew, 1996). Depending on the context, nature of the disclosure, age of the child, relationship of child to researcher, perhaps the most helpful solution in such situations is for the researcher to discuss with the child what strategy they would like to pursue (for example, Butler and Williamson, 1994); similarly, researchers who come across adults who may be at risk in some way are presumably also likely to find some strategy for supporting a vulnerable adult. However, there must always be a danger of the research drawing attention to problematic situations that the child did not perceive as a problem in the first place.

3.2 *Incompetent children?*

The other key perceived (and related) difference between children and adults in research is children's assumed lack of competence: competence to make decisions about whether to participate in research, and competence to provide valid sociological data. US researchers Fine and Sandstrom (1988, p 47), in a discussion of participant observation with children, seem to perceive children as profoundly different from adults when they suggest that 'Discovering what children "really" know may be *almost* as difficult as learning what our pet kitten really knows; we can't trust or quite understand the sounds they make'. (Of course, the same is true with adults, but to lump children and animals together makes it sound as if it is not worth trying). Mainstream developmental psychology often perceives children to be less competent than adults, and developmental psychologists sometimes impose methods and interpretation on data collected from children which may be quite out of line with what the children meant—rarely do they return to their research subjects to confirm (though see Gilligan, Lyons and Hammer, 1990). Conceptualising children as less competent in this way is unhelpful, and it is important to see it critically, because it has provided teachers and parents (and sociologists) with powerful normative models for what children are (or should be) like. It reflects a cultural reluctance to take children's ideas seriously, which in itself is not surprising, given that—at the macrosocial level at any rate—adults tend to trivialise and devalue children's acts as a matter of course. As Waksler (1991, p 62) suggests, 'adults routinely set themselves up as the understanders, interpreters and translators of children's behaviour'. Rather, Waksler suggests, we would be better advised to see children's competencies as 'different' rather than lesser. Recent research on children as witnesses suggests that children can give reliable testimonies (Fielding and Conroy, 1992; Spencer and Flin, 1990), provided they are not asked leading questions, and so on. Philosophers too have begun to criticise theories of developmental psychology for allowing no real place for philosophical thinking among young children (see Matthews, 1994; Pritchard, 1985). Sociologists can and should take children seriously as social actors in their own right, as sources of valid sociological data.

3.3 *Powerless children?*

Ultimately, the biggest ethical challenge for researchers working with children (and implicit in much of the preceding discussion) is the disparities in power and status between adults and children. Mayall (1994b, p 11) notes that:

'discussions about data collection with, and from and for children tend to focus on the following perceived problems: children can't tell truth from fiction; children make things up

to please the interviewer; children do not have enough experience or knowledge to comment on their experience, or indeed to report it usefully; children's accounts are themselves socially constructed, and what they say in conversation or tell you if you ask them is what they have been told by adults.

She notes that all of these drawbacks, of course, apply equally when collecting data from adults. For Mayall, the differential power relationship between children and adults in the research process lies at the level of interpretation of data, rather than at the point of data-collection; she suggests that whatever the data collection method,

However much one may involve children in considering data, the presentation of it is likely to require analysis and interpretations, at least for some purposes, which do demand different knowledge than that generally available to children, in order to explicate children's social status and structural positioning.

(*ibid*, p 11)

Similarly, Qvortrup (ISA Conference on Children and Families: Research and Policy, London, 1994) notes that real difficulties arise in interpreting the results of sociological data in child research:

'the question of objectivity is ... more acute than in any other social science field, because children ... have to leave the interpretation of their own lives to another age group, whose interests are potentially at odds with those of themselves. This is a sociology of knowledge problem, which so far is almost unexplored'.

(p 6; see also Alanen, 1992, 1994)

Recently, Allison James (Children and Social Competence Conference, Guildford, 1995) has suggested that the ways of 'seeing children' that researchers hold have a profound impact upon the way in which we study children. Here too, of course, the power to choose which standpoint or way of seeing lies with the researcher. The methods that we use, the research populations and subjects that we study, and crucially the interpretation of the data collected, are all influenced by the view of children that we take, and there are obvious ethical implications to this. James (Children and Social Competence Conference, Guildford, 1995) usefully identifies four overlapping ways of 'seeing' children, each of which 'combine notions of social competence with those of status to give rise to four 'ideal types' of 'the child' (p 4): the developing child, the tribal child, and adult child, and the social child. The developing child perspective undervalues children's competencies and when children's voices are elicited their words may not be taken seriously or even trusted. Methods here range from experimentation to observation, and the power of the researcher lies in the interpretation of data collected. The tribal child view sees children as inhabiting an autonomous world, separate from adults, in which children are competent actors, existing in a conceptually different world from that of adults, with its own rules and agendas. The method is participant observation. The ethical implications of the 'tribal child' view are that because children are 'other', inhabiting a separate world, they are essentially 'unknowable' in some way. Adult researchers are surely being misleading if they try to engage with this other world by attempting to suspend their adult status, because they cannot become children again. Attempts to do so can be as misleading and confusing for the children being studied as being deceived in experiments.

The 'adult child' view sees children as 'competent participants in a shared, but adult centred world' (p 11); attention is focused on 'children's perspectives on and comprehension of an adult world in which they are required to participate' (p 12). The method here is usually to assume that children are essentially the same as adults and the same tools of research can be used, from qualitative interviews to questionnaire surveys, but

the ethical problem with this approach is that the differences between adult researchers and child subjects in terms of social status are not always adequately addressed. Asking children about things they have not experienced only makes it easier for adults to conclude that they are not only ignorant but incapable of understanding (Alderson, 1996, personal communication).

James' (Children and Social Competence, Guilford, 1995, p 14) fourth model, the 'social child', offers a solution. This model envisages 'children as research subjects comparable with adults, but understands children to possess different competencies, a conceptual modification which ... permits researchers to engage more effectively with the diversity of childhood'. James suggests that this has implications for the methods used in studying children: children have different abilities, and are encouraged to be skilled in different mediums of communication (drawings, stories, written work, and so on) but are nonetheless competent and confident in them, so as researchers, we need to draw on these:

Having been taught these skills, they use them daily and, unlike most adults, are accomplished practitioners. It behoves us then to make use of these different abilities rather than asking children to participate unpractised in interviews or unasked submit them to our observational and surveilling gaze. Talking with children about the meanings they themselves attribute to their paintings or asking them to write a story ... allows children to engage more productively with our research questions using the talents which they, as children, possess (p 15).

This needs to be qualified, because children's willingness to join in participatory research techniques may vary from age to age, for example drawings may be appropriate at younger ages while older children may be willing to talk freely (Alderson, 1996, personal communication). However, ethical guidelines call on researchers to avoid undue intrusion, and using methods which are non-invasive, non-confrontational and participatory, and which encourage children to interpret their own data, might be one step towards diminishing the ethical problems of imbalanced power relationships between researcher and researched at the point of data collection and interpretation.

4. Some suggestions

Some simple suggestions arise from this discussion, and these can be divided into methodological and practical. In terms of methodology, researchers need to think carefully about the standpoint from which they are studying children, and the ethical implications of that standpoint. Essentially, this involves respecting children's competencies. Indeed, respect needs to become a methodological technique in itself, and researchers need to set aside 'natural' adult tendencies 'both to take children for granted and to accord them a provisional status ... The belief that children are inherently 'wrong' when they disagree with adults is an obstacle to be overcome' (Fine and Sandstrom, 1988, pp 75-6). At the same time, researchers need to be aware that as adults dealing day to day with children, their *responsibilities* as adults to children must be fulfilled and they must ensure that children do not suffer harm at any stage in the research process.

Further, researchers must be wary of assuming that children are a homogenous group. Researchers need to be aware that the accounts that children give of themselves will be affected by a range of variables. Firstly, their gender, age, ethnicity, and other personal characteristics of each child, shyness, willingness to talk to adults, or in groups of

children plus an adult and so on (see Scott, 1996). Secondly, where the data are collected: in school; at home; in the playground, on the street corner, in a public space, or a private space such as own room, or a researcher's car. For example, children who are required to participate in research in schools may not feel in a position to dissent, simply because most (if not all) tasks and activities in school are compulsory. Thirdly, how the data are collected: in face-to-face interviews with an adult interviewer, or by written accounts, drawings, participant observation, focus group discussions, or questionnaires. Fourthly, the age, gender, ethnic background and personal style of the researcher will affect the research (and of course this is true of any research involving interaction between researcher and researched). Finally, the questions that researchers often take for granted when researching adults such as about social class background, occupational classification, family income, ethnicity, marital status, and so on, become potentially unethical as far as children are concerned (they may not know the 'correct' answer and feel their responses to be inadequate) and may have to be inferred by observation and detailed background descriptions of the local context of the children concerned.

A more social-anthropological approach that allows data to be coproduced in the relationship between researcher and researched, rather than being driven by problem-oriented adult questions, may be useful in child research (for recent examples of anthropological research using ethnographic observations of children's daily lives see Hardman, 1973; James, 1993; Nieuwenhuys, 1994; Reynolds, 1991; Schildkrout, 1978, 1979; Stafford, 1995; or much older ones in psychology, see Barker, Kovnin and Wright, 1943). In other words, having a general idea about the topic under investigation, rather than a set of scientific, positivistic questions that needs an adult-framed answer, may be useful at the pilot stage (and beyond) of any research with children. Time is also of importance, and research projects need to be designed to allow a relationship to develop between researcher and the researched. Children are not used to being asked their opinions and to relate their experiences to unknown adults, and probably need to have some familiarity with the researcher.

In practical terms, an over-reliance on one type of data collection method in any research can lead to biases, and given children's relative powerless position in society, it might be that drawing on a range of creative methods, and using multiple research strategies (or triangulation, which has come to mean 'more than one method of investigation and hence more than one type of data' (Brannen, 1992, p 11) might be a useful way forward. Brannen (p 32) suggests that a multimethod strategy can clarify not only the formulation of the research problem, but also 'the most appropriate ways in which problems or aspects of problems may be theorised and studied'. For example, Prendergast's (1994) study of secondary girls' experiences of menstruation is a thoughtful piece of research with a large sample of children, using a combination of quantitative and qualitative methods (for a discussion of the research process see pp 6-13; see also Middleton, Ashworth and Walker, 1994, Morrow, 1994).

In terms of informed consent, researchers need to explain the purpose and nature of their research clearly and unambiguously in their attempts to obtain 'informed consent', assent, or at the very least allow 'informed dissent' from the children themselves as well as adult gatekeepers. For a useful example of how a sensitive topic can be researched with children, see Prendergast (1994) appendices for the texts of the letters she wrote to chief educational officers, the information she provided for LEAs and head-teachers, letters to pupils/parents/guardians, and the questionnaire that the girls completed. In school-based research, researchers may need to insist on obtaining informed consent or

allowing dissent, and may need to provide alternative tasks for children who do not want to participate in the research, or who complete research tasks more quickly than others.

Using interactive and participatory research methods may also be a useful way of researching children (see Ennew, 1994; Johnson, Hill and Ivan-Smith, 1995), and it is interesting to note that much of the impetus for participatory methods is coming from developing countries, where children are participants in society (at least at the level of production) to a much greater extent than in the UK. It is possible to use children and young people as research assistants and data collectors (Alderson, 1995; Ennew and Morrow, 1994). Alderson (1995) describes a small-scale research project in which young people (mostly 16-year-old girls) interviewed ten to 16-year-old children about their relationships with professionals caring for them. Children can also be involved in the interpretation of data. Ennew recounts collecting drawings from children in Lima and Jamaica, one from a boy when circumstances did not permit discussion about its meaning:

It was not immediately obvious what it depicted, despite the detail that had gone in to its creation. Other adults found it impossible to interpret. But the six-year-old daughter of an English friend responded with scorn to adult perplexity: 'It's a map, of course!'. And indeed it is ... Since then, much time has been saved, twisting paper round to look from all angles. If you don't know what a child's drawing depicts, ask another child!

(Ennew and Morrow, 1994, pp 67–8)

Further, it is possible (and arguably necessary if the research is to be regarded as ethical) to report back to research respondents, if the research respondent wants it, though often the time delay between collecting the data and writing up, plus problems of access to children (home addresses, even names) may discourage researchers from doing so. Prendergast, for example, was able to write up the results of her research at a range of levels, including theoretical papers (Prendergast, 1995), policy recommendations, contributing to a teaching pack, and she was able to provide feedback to each of the girls who had participated in her study in the form of a clearly written, four-page article about her work published in *Health Education* (Kingman, 1992; see also Herbert, 1989; West and Sweeting, 1995).

Finally, at the stage of dissemination of research findings, researchers should be aware of the potential for sensationalising of issues by journalists and/or politicians eager to link research findings to whatever contemporary moral panic about children that they can. Researchers must bear responsibility for how children are represented in reports of research in the media and be aware that the potential for misrepresentation is very great indeed (Boyden and Ennew, 1996). Children, as a powerless group in society, are not in a position to challenge the ways in which research findings about them are presented. Further, it is worth noting that discussions about ethical and social research in general focus on qualitative methods as having the potential for most intrusion and hence being the most ethically precarious, but survey methods also carry the potential for harm, particularly at the level of dissemination where again children may be misrepresented in sensationalised accounts.

In summary, the various sets of ethical guidelines issued by research organisations are very broad, but may be useful as a way of helping researchers to anticipate potential ethical problems. We have suggested in this paper that for research to be regarded as ethical, ethical considerations need to be situational and responsive, and no researcher or research

body can anticipate all ethical problems that may be encountered in this respect. Adequate research support, in the form of tight supervision, and/or back-up from a research team or advisory group where dilemmas and problems can be discussed throughout the course of a research project (from inception to dissemination), is very important.

Conclusion

Researching children, then, raises interesting methodological and ethical issues that all researchers face, at least implicitly, when collecting people's stories: issues of appropriate ways of collecting data, appropriate and honest ways of analysing and interpreting data and disseminating findings, as well as issues of protection of research participants. Ethical considerations that apply to adult research subjects can and must apply to children too; but to these we can add three important issues that require special consideration. Firstly, children's competencies are different, and this has implications for the consent process as well as data collection methods and interpretation. Secondly, children are potentially vulnerable, and thus day-to-day adult responsibilities to children must be fulfilled. Finally, at the point of interpretation of data, adult researchers must be aware that they have the power to interpret data in any way that they please. Incorporating the study of children into sociology raises some interesting ethical challenges, to which there are no easy solutions. However, to avoid asking the questions because they are ethically difficult, thereby excluding children from research, is an ethical position in itself.

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