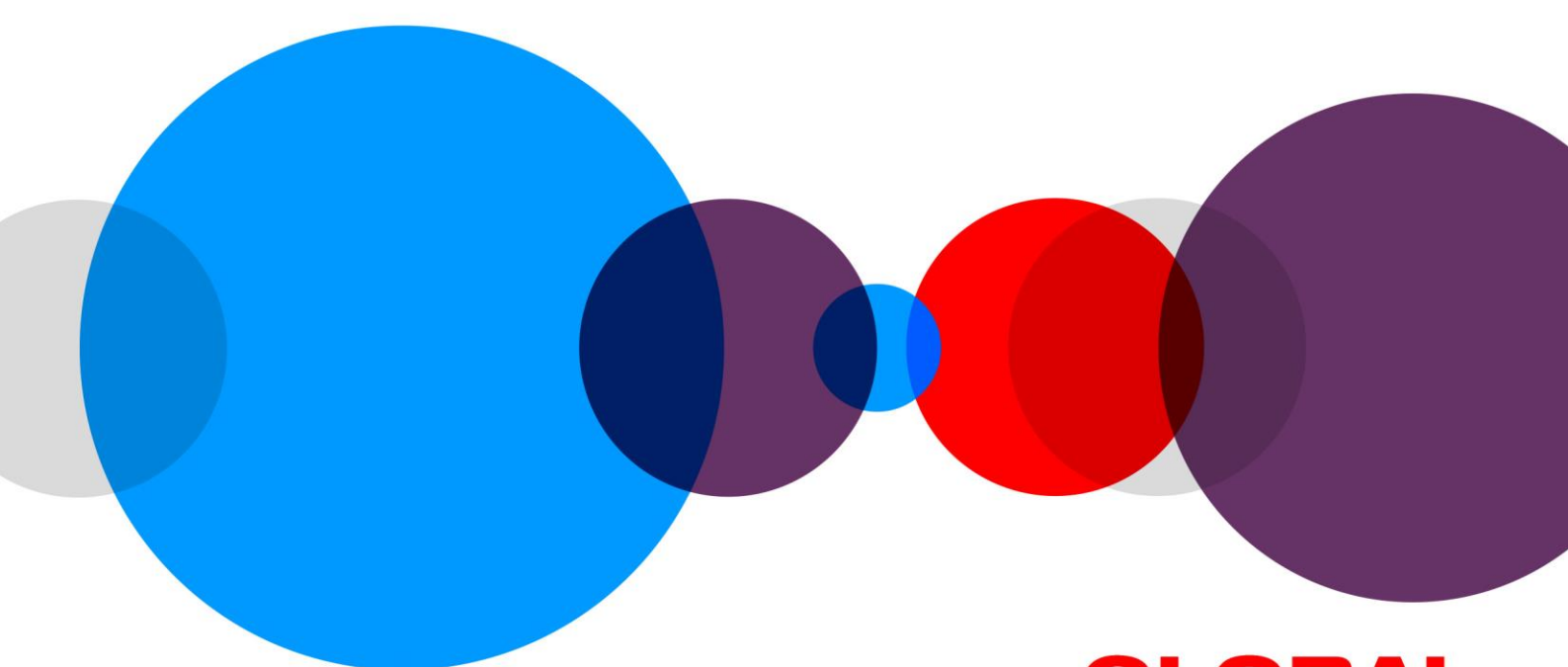


METHOD GUIDE 2

Ethical considerations for research with children



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**GLOBAL
KIDS
ONLINE**



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GLOBAL KIDS ONLINE

Global Kids Online is an international research project that aims to contribute to gathering rigorous cross-national evidence on children's online risks, opportunities and rights by creating a global network of researchers and experts and by developing a toolkit as a flexible new resource for researchers around the world.

The aim is to gain a deeper understanding of children's digital experiences that is attuned to their individual and contextual diversities and sensitive to cross-national differences, similarities, and specificities. The project was funded by UNICEF and WePROTECT Global Alliance and jointly coordinated by researchers at the London School of Economics and Political Science (LSE), the UNICEF Office of Research-Innocenti, and the EU Kids Online network.

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ABSTRACT

This Methodological Guide is specifically tailored to support ethical research practice within the Global Kids Online (GKO) programme. While research on children's use of the internet requires consideration of universal ethical principles, this type of research presents unique ethical dilemmas which reflect the diverse contexts and the nature of internet use in the varied social, political and economic environments that exist globally (Hongladarom & Ess, 2007).

The paper provides (1) an overview of potential ethical issues that need to be considered when undertaking the GKO research programme, (2) a step-by-step guide, illustrated by relevant case studies, to questions and approaches to consider before or when ethical dilemmas arise throughout the research process, (3) useful references to support ethical practice in GKO, (4) a protection protocol template to assist reflection on and documentation of actions that can be taken to ensure that children and communities are protected throughout the research process, and finally (5) templates and guidance on how to handle participant disclosure of abuse revealed during the research process.

This methodological guidance has been designed as a basic toolkit and reference point to ensure that researchers participating in the GKO programme critically reflect on potential ethical issues and mitigation strategies, and uphold the highest ethical standards when undertaking the research.

INTRODUCTION

This Methodological Guide provides an overview of ethical issues, challenges and approaches relevant to the GKO programme.

Ethical issues are context-specific and contingent on environmental, cultural, social, political and legal frameworks and conditions. Managing and responding to the issues that arise will present challenges that each research team will need to understand and negotiate. Foremost amongst these challenges is the frequent tension between the right of a child to be protected (United Nations General Assembly, 1989 Article 3) and their right to have a say in matters that affect them (Article 12). Navigating these and other tensions and challenges requires significant reflection, consultation and an understanding of the context, with a clear focus on determining the best interest of the child at all stages.

Good ethical practice should always be reflective. It begins by asking the right questions, so Section 3 (identifying good practice) leads with questions that should be considered. These questions will inform the development of strategies to deal with issues that may arise. Case studies and possible approaches/methods to address challenges are included in Section 3, while Appendix 1 (a protection protocols template) provides examples of possible processes to manage risk. While these are clearly neither prescriptive nor exhaustive, they are designed to prompt the process of reflection and engagement required for all ethical research practice.

Any research programme involving human subjects must be grounded in international ethical frameworks and principles. However, while these international frameworks provide overarching guidance, very little explicit attention is given to the ethical issues related to research involving children. The following guidance is therefore informed not only by existing international frameworks (Council for International Organizations of Medical Sciences (CIOMS), 2002, United States, 1978) but also by the *Ethical Research Involving Children Compendium* (Graham et al., 2013), which provides clear, comprehensive advice on the ethical involvement of children in research grounded in a rights-based approach.

Based on these frameworks, this Methodological Guide is specifically tailored to support ethical research practice within the Global Kids Online programme. While research undertaken on children's use of the internet requires consideration of universal ethical principles, this type of research presents unique ethical dilemmas which reflect the diverse contexts and the nature of internet use in the varied social, political and economic environments that exist globally (Hongladarom & Ess, 2007).

Key issues, which are dealt with more fully below, are:

- Privacy
- Managing the distress of participants
- Informed consent
- Security and confidentiality
- Inclusion and exclusion
- Payment and compensation
- Use of interpreters

KEY ISSUES

Privacy

The first consideration in relation to participants' privacy is the diverse cultural contexts and differing attitudes and practices with regards to privacy. In communal cultures the notion of individual privacy may conflict with understandings of both individual and communal wellbeing (Hongladarom & Ess, 2007). In these instances, attitudes to privacy will need to be understood and reflected in the physical space and the persons present when interviews or focus groups are held (Ahsan, 2009). The need for privacy will have to be explained to both communities and participants, and options for ensuring privacy will have to be considered.

A related cultural issue is the notion of childhood and voice. While the United Nations Convention on the Rights of the Child (1989) reinforces the rights of the child to a voice on matters that affect them, in certain contexts and countries the parent or guardian may be perceived as being the rightful public voice of the child on matters that pertain to them (Morrow, 2009). In these circumstances, measures to ensure that children have a voice and feel comfortable will need to be determined in the planning phase of the research. Options to be considered include:

- carrying out the GKO survey for parents concurrently with the child-based survey:
- modifying survey instruments (by removing potentially sensitive items) and accepting the participation or presence of a parent/guardian/authority,
- parents, family or guardians/authorities being in sight but out of earshot.

In instances where privacy from other children may be an issue (e.g. in classroom surveys), the room/s should be set up to ensure sufficient distance between students undertaking the written survey.

There is also a need to accommodate children's understanding and desire for privacy. For example, children may be reluctant to reveal personal information regarding their internet use or experiences in front of parents or guardians (TIRO Project No. 2,

noted in Barbovschi, 2013); conversely, they may prefer parents or guardians to be present (Jenson, 2015; Shaw et al., 2011). In the light of evidence that there may be discrepancies between how parents think their children are using the internet and what the children themselves perceive and do (Michelet, 2003), children may wish to have privacy when discussing their internet use. This is particularly the case if children are asked directly about ignoring parental advice.

“In communal cultures the notion of individual privacy may conflict with understandings of both individual and communal wellbeing.”

Finally, notions and understandings of privacy are changing for those actively engaged in regular online activity and internet use. The divide between private and public is increasingly being blurred, and it cannot be presumed that children have an inherent understanding of the privacy implications of technologies that may be used by researchers, or indeed the technologies that they use to communicate (Seiter, 2004; Shade et al., 2004).

It is for this reason that the privacy implications of technologies used to collect data must be understood by the researcher, and assumptions about what subjects are considered private, or what spaces are assumed to be private, need to be checked (Hinton, 2013). Hence the use of the term 'private' in questionnaires must be tested in pilot studies to ensure that researchers understand what children assume to be private. As noted by Ahsan (2009), recognising and respecting young people's perspectives on what is private or confidential (or not) is critical.

Managing distress

Although there is scant evidence about the impact of sensitive research questions on children and adults (Child Protection Monitoring and Evaluation Reference Group (CP MERG), 2012), a duty of care is required when asking potentially sensitive questions, including

questions relating to sexual behaviours online and upsetting experiences resulting from internet use (including cyber-bullying, cyber-stalking, and online experiences with strangers leading to distressing online and offline experiences). In the absence of comprehensive data on risk profiles, which this research attempts to address, it is difficult to determine vulnerabilities and sensitivities relating to the nature, platforms and location of internet use in various contexts.

“A duty of care is required when asking potentially sensitive questions, including questions relating to sexual behaviours online and upsetting experiences resulting from internet use.”

Within this data-poor environment, clear guidelines are required on how to handle distress during an interview, what to do where there is evidence of a threat to children’s safety, or where clear evidence of bullying is occurring. Clear guidance is also required for data collectors when, in order to protect or respond to a child’s immediate distress, the research needs to stop (NPCC, 2013). Appendixes to this Guide suggest suitable approaches to these important issues.

Informed consent

Informed consent - the voluntary agreement of an individual, or his or her authorized representative, who has the legal capacity to give consent, and who exercises free power of choice, without undue inducement or any other form of constraint or coercion to participate in research. The individual must have sufficient knowledge and understanding of the nature of the proposed evidence generating activity, the anticipated risks and potential benefits, and the requirements or demands of the activity to be able to make an informed decision.

Assent - the willingness to participate in research, evaluations or data collection by persons who are by legal definition too young to give informed consent according to prevailing local law but who are old enough to understand the proposed research in general, its expected risks and possible benefits, and the activities expected of them as subjects. Obtaining assent is similar to the process of obtaining informed

consent, but assent by itself is insufficient: informed consent must also be obtained from the subject’s parents or guardian or a responsible adult. (Levine, 1988)


Informed consent and/ or assent should be sought from all participants. For child participants, if required by law or seen as culturally appropriate, consent should also be sought from their guardians (Graham et al., 2013). Determining and accessing guardians in order to obtain informed consent for children may be difficult for political and economic reasons. Approaches to informed consent need to be tailored to the particular legal and social context, which requires an understanding of who are the community gatekeepers and whether their approval is required (Morrow, 2009). Further considerations include:

- attitudes to signing documents
- literacy levels (of children, their guardians and in the wider community)
- the degree to which children can understand the idea of research
- adults’ working hours
- children’s schedules (Invernizzi & Williams, 2011; Morrow, 2009).

Clear guidelines, based on relevant legislation and consultation, need to be established at the outset on:

- the age of informed consent
- the delegation of guardianship (who to ask) or, if this cannot be done, how to assess the competence of children to provide informed consent
- cultural norms regarding relevant parties who must provide consent in addition to participants (participants should always provide their informed consent or assent, but male members of the family may need to provide informed consent, or local leaders’ consent may need to be sought etc.)
- methods of obtaining informed consent or assent that reflect the age, understanding and developing capacities of the child
- approaches (such as verbal consent, third party consent on behalf of participants) that could be adopted where there is a cultural reluctance to (or fear of) signing documents.

In all instances, consent or assent should be obtained



from the children themselves. It should be made clear at the outset that participation is voluntary and that children can withdraw at any time or choose not to answer specific questions if they feel uncomfortable (Graham et al., 2013; Shaw et al., 2011). (See Section 3.4 for challenges of seeking informed consent from guardians).

A final note relating to informed consent is the role and position of the researcher. Researchers are often seen as figures of authority, particularly where there is a clear power imbalance and children are involved. Appropriate informed consent should always articulate the role and purpose of the research and highlight the distinction between the research and aid, educational programmes or local institutions.

Security and confidentiality

In a number of countries, the presumption that internet use (whether by children or adults) is seen as a politically neutral act of limited political interest simply cannot be made. In such instances the use of the internet may be inherently political, irrespective of the age of the users or the purpose of its use: the risk is heightened when collecting, storing and disposing of identified data (Zhang, 2012; Tere, 2016).

“It is important to determine the security of any data collection and analysis platforms and the hardware on which this information is managed.”


Understanding the political implications and any other risks to participants’ security and safety is therefore critical and there must be clear strategies to address these risks and to monitor the impacts of participation throughout (Shaw et al., 2011). As is the case for all research, if the risk of harm to children is high – irrespective of the source of the risk (family members, community, political groups, authorities) – the best interest of the child should be the primary consideration in determining whether the research should be undertaken or, if risk emerges during the research, whether it should continue (Graham et al., 2013).

In undertaking research regarding internet use, there is likely to be a justified assumption that the producers of research actually understand and adopt the most secure forms of technology to collect, store, transmit and analyse data. To this end, it is important to determine the security of any data collection and analysis platforms and the hardware on which this information is managed. If the data is collected electronically, consider the need for encryption prior to sending data electronically and limiting access to the encryption key. If this data is to be transported physically (e.g. on USB or other hard drives), ensure these are password-protected and that there are clear protocols on whether or not data can be taken to other locations (including homes) for cleaning or analysis (Boddy et al., 2015).

If data is to be uploaded to a cloud, the security of these virtual storage facilities must be appropriate to the risk context (the best cloud services will provide cloud encryption software options and require multiple authentication techniques). Consider removing the data from the cloud as soon as possible to avoid access issues if the systems are interrupted (Shinder, 2015). There is a particular expectation that internet-focused researchers will take seriously their duty of care for data security. This is both an ethical and reputational issue that has to be clearly considered before the research begins.

It is worth noting that the security of researchers is not guaranteed and that appropriate situational analysis will help determine both the social, political and environmental landscape in which researchers will be working. Issues to be considered include the physical terrain and conditions, any political and social tensions, and the prevailing attitudes to ‘outsiders’ and to research.

Particular consideration of researchers’ security must be given in contexts of autocratic or authoritarian regimes where research is overseen by a number of agencies. In these environments, authorities may censor, exclude or add political or other sensitive questions. In some instances, the research team may be prevented from conducting fieldwork and are replaced by government research teams. This can cause problems, given the potential lack of training and expertise in undertaking child-focused research and the possibility of coercion resulting from the presence of authorities or their representatives. In these contexts, serious consideration must be given to



requiring training of government/authority assigned staff; in some instances it might be decided that the research should not proceed because of severe ethical issues and risks, and the broader implications for the quality of the research. In all instances, no questions pertaining to, or even suggesting illegal activities should be asked (e.g. questions on the use of internet for political purposes, questions on parental sale of child images and videos etc.).

In other instances where researchers wish to inquire about illegal activities, such as those noted above, this should not occur (irrespective of the nature of the government or authority in power) without a written, formal agreement either from the relevant national Ministry or from the local police (or appropriate local authorities) that no prosecution or arbitrary detention will be made following participation in the survey. Such an agreement would of course exclude mandatory reporting of abuse requirements.

Inclusion and exclusion

The presence of different communities and the existence of marginalised groups within a specific location are a global phenomenon. Significant tensions, political rivalries and marginalisation may exist between and within communities. Without consideration of these issues in determining the sampling frame, further tensions, greater marginalisation and reinforcement of prevailing inequities and/or community mistrust of researchers may result. It may be socially or geographically difficult to access more marginalised groups (such as a particular gender, children or adults with disabilities, those from lower socio-economic backgrounds, children in institutions, communities in remote areas and from minority or indigenous communities) and their families, but exclusion on opportunistic grounds or on the presumption of limited use of the internet is highly problematic (Graham et al., 2013).


The exclusion of children and families from research on internet use raises significant concerns as the use of the internet becomes more embedded in social and economic life as a requisite skill and tool for personal and social development and advancement (Shields and Behrman, 2000). A failure to understand internet use and risks by these more marginalised groups may serve to further marginalise their needs within both policy and programmatic domains.

Payment and compensation

Payment for participation in research is a global ethical challenge, because it has the potential to be misused, either intentionally or inadvertently. Payment may be seen as pressurising or coercing participants; even a form of bribery. Inappropriate or ill-conceived payment may affect participants' experience and understanding of research which, in turn, may compromise the validity of data. Payment or compensation to children adds another degree of complexity in the light of existing power imbalances between adults and children or young people (Graham et al., 2013).

Decisions regarding payment and compensation are further complicated by income disparities or poverty. In these instances the nature and size of compensation could significantly distort choices regarding participation as well as the content of participant responses (Morrow, 2009). This is particularly true for children or young people who might try to provide the responses they anticipate the researchers might 'prefer'. This is more likely to be the case in countries where children and participants have little understanding of the research process, where they perceive research to be political, or where they presume the research to be part of broader development programmes or to be linked to access to goods and services (Morrow, 2009).

Payment or compensation, particularly in areas where income levels are low and deprivations relatively high, could create or exacerbate tensions between those chosen to participate versus those excluded. There may also be economic costs associated with participation (parents taking time off work for instance), which might necessitate the provision of appropriate compensation. Therefore research involving children and their families requires consultation with local communities to appreciate the complexities relating to payment or compensation, and to determine the necessity for and the appropriate form of any payment or compensation (McGill et al., 2015; Graham et al., 2013; Morrow, 2009).



“The exclusion of children and families from research on internet use raises significant concerns as the use of the internet becomes more embedded in social and economic life.”

Use of interpreters

In some locations, GKO researchers or enumerators may not have the appropriate language skills or knowledge of a particular dialect to interview participants directly or facilitate a focus group. In these instances an interpreter may be required. The interpreter should, wherever possible, participate in relevant training sessions for researchers and data collectors regarding respectful and ethical engagement (including issues related to privacy) with child and adult participants and their communities. If this is not feasible, a thorough briefing on the research and on the ethical issues that may arise should be provided before the research begins (Murray & Wynne, 2001). To ensure that the use of an interpreter does not detract from the experience of participants or the quality of the research findings, the following issues need to be considered:

- Planning and recruiting interpreters. Ideally, in order to avoid family members interpreting for other members of the family, interpreters should be budgeted for and recruited before starting the research (Murray & Wynne, 2001).
- If interpreters are not available, it is possible to use non-professional interpreters. They should preferably have no prior knowledge of the community, but if this is not possible, a locally trusted community health or welfare professional could be used as an interpreter. Consultation will be required to determine the best approach (Murray & Wynne, 2001).
- Researchers should, wherever possible, ensure that each individual can choose whether to have an interpreter present; researchers should not make assumptions about language competency (Murray & Wynne, 2001).
- The role of each participant in the interview (including the interpreter's role) should be explained to all those present (Murray & Wynn,

2001).

- Clear explanations should be provided to interpreters as to the scope of their role and the need for privacy and a respectful attitude (Murray & Wynne, 2001).
- The researcher should always speak to the person, not the interpreter, while maintaining culturally appropriate eye contact with the participants, even when the interpreter is interpreting. When speaking or listening, researchers should watch the participant rather than the interpreter so non-verbal messages can be observed (Centre for Culture, Ethnicity and Health (CEH), 2016).

MAIN APPROACHES

Ethical principles guiding research

Given the ethical dilemmas presented by global research on children's use of the internet and the diversity of country settings, a set of research principles needs to be established. These will set minimum requirements and considerations applicable to research involving children, irrespective of context and subject matter. The principles must guide the planning, delivery and dissemination of research; they are grounded in a rights-based approach and directly reflect international ethical guidelines.

Respect

- All research activities should ensure respect for all persons and freedom from discrimination. This needs to be considered not only during data collection, but also in the ways in which the research engages with communities.
- Children have the right to be heard, to freely express their views on all matters that affect them, and to freedom of expression, thought, association and access to information. In order for this to happen, the research process, likely outputs/outcomes and approach to dissemination need to be explained fully and in a manner that reflects the capacities of those involved.
- All participation is voluntary and negotiable, and children have a right to withdraw at any point or refuse to engage in activities or respond to questions at any point.
- All staff should conduct themselves with honesty, integrity and impartiality in their dealings with all stakeholders; any conflicts of interest should be disclosed at the outset.

Harms and benefits

- Do no harm: avoid harm or injury to participants, families and their communities. While the primary purpose of research is to generate new evidence, this goal should never take precedence over the rights of individual participants or place them in

harm's way.

- The child's well-being is primary.
- Participation should promote the best interests of each child within the particular cultural and environmental context. Where possible and reasonable, direct benefits should accrue to participants; if not, clear evidence should be provided as to benefits to the broader child population.
- All participants, their families and communities have the right to be protected from direct or indirect manipulation, coercion, violence, abuse or exploitation as a result of, or consequent to the research.
- Participants have a right to privacy and the confidentiality of their data. How this will be assured and any limits to this should be explained.

Justice

- The benefits and the burdens of the research should be equitably shared. This implies that the choice of who is included or excluded from the research should be justified.

IDENTIFYING GOOD PRACTICE: CHALLENGES, APPROACHES AND CASE STUDIES

Steered by the broader framework provided by the principles, the following sections provide guidance on the issues and questions to be considered when undertaking research on internet usage that would constitute good, reflexive, ethical practice. Practical examples of dilemmas and approaches emerging from the GKO pilot studies are also given. These highlight challenges and strategies related to specific ethical concerns arising from field implementation of GKO.

Planning phase: starting the process, recruitment and compensation

When embarking on the GKO research programme, one of the first steps will be to determine an appropriate sampling frame. The key ethical dilemma here, as identified above, is the selection and recruitment of participants to the programme.

Key questions on recruitment and compensation

- How, where and who will you recruit to participate in the pilot? In the broader research programme? Who is being included or excluded? (And on what grounds?). Can you justify the inclusion and exclusion?
- What will be the likely impact of exclusion of particular cohorts or groups?
- What are the expectations regarding recruitment? Is there a possibility that potential participants will expect compensation? Will they believe that participation is attached to services or programme delivery? How have you made sure this does not happen?

Challenge: including traditionally marginalised children

A key ethical challenge for the GKO survey is the selection of participants. A survey that omits or under-represents vulnerable groups may reinforce their marginalisation (because policies and programmes

based on the research may fail to account for their specific needs, which in turn may lead to further social and digital exclusion (Livingstone & Helsper, 2007)). However, the methodology required to access marginalised children (including those from minority groups and children who cannot access the internet), children in vulnerable contexts (children in institutions, children with disabilities, children from disadvantaged background) or hard-to-reach children (children from rural areas, out-of-school children) is time-consuming and resource-intensive. This is because of the need to deal with possibly heightened political sensitivity, more complex logistics, and the greater technical complexity in tailoring the methods to the environmental contexts and personal competencies of the children involved (Mascheroni, 2013).

Methods and approaches to consider

Reflection on the capacity and resources available to include vulnerable and marginalised children is a necessary component of the planning phase. This period allows for consideration of the additional timing and resources required to ethically conduct the survey or focus groups with these cohorts. If particular cohorts cannot be included in an initial GKO research programme, then this reflection can support the drafting of reports or products that clearly note the exclusion and its implications for these cohorts and for the representativeness of the sample. The dissemination of findings may thus serve as an advocacy tool for a separate survey that specifically focuses on the digital lives and experiences of these cohorts.

Challenge: what to provide as payment or compensation

The second ethical challenge in the planning phase is the decision regarding compensation or payment for participation. Payments can be made for several reasons: to reimburse expenses; to compensate for time, inconvenience and possible discomfort; to show appreciation for participants' help; or to pay for people's help (Morrow, 2009, p.10). International standards and the literature, however, are very clear on the need to avoid pressure and persuasion (CIOMS

and World Health Organization (WHO), 2002, United States, 1978), particularly in regard to child participants (Graham et al., 2013; Alderson & Morrow, 2004).

Case study: Inclusion

In the South African GKO pilot, child participants were sourced through household surveys. It was noted that accessing children exclusively through schools would fail to represent the 10-30 per cent of young people (of school age) who are not in school. There would also be significant challenges in trying to access indigent and transient populations or those in non-school-based institutions. It was noted that to ensure appropriate inclusion of out-of-school children, any national survey would probably include interviews both in schools and in households, but that this would still fail to capture transient populations and those in non-school-based institutional settings. Within institutional settings, informed consent for children has, in the past, been sought from the National Department of Social Development and subsequently the institutions themselves. Obtaining informed consent was (and continues to be) problematic for indigent and transient populations, even within institutional settings such as drop-in centres and shelters, as they lack legal responsibility for the young people that utilise their services.

Methods and approaches to consider

International guidelines suggest that the cultural, social and economic implications of any payment or compensation need to be considered. Discussion with local communities or with previous researchers who have undertaken work in the area can help determine appropriate levels of any payment or compensation, particularly for children (Morrow, 2009). Out-of-pocket expenses incurred by participants may be reimbursed, but this should be differentiated from other payment/s for participation that might be provided (Wendler et al., 2002). The implications of wages foregone as a result of participation should also be considered within the context of appropriate reimbursement (Morrow, 2009) to ensure that participants are not placed in a worse position by participating in research (Nuffield Council on Bioethics, 2002). However, this additional complexity can be avoided by undertaking research

when children or others are less likely to be working. With respect to compensation, options include providing gifts to communities or schools or small tokens of appreciation to children at the end of the research programme (Morrow, 2009). Explicit consideration, however, must be given to ensuring that these gifts are not perceived as payment or aid, particularly in poorer communities (Graham et al., 2013). To limit potential misunderstanding, coercion, or a sense of injustice experienced by those not participating, gifts or tokens:

- could be provided at the end of the research as an unanticipated gesture (Graham et al., 2013);
- could be provided to the community as a whole (e.g. educational resources for the school that all the children can enjoy);
- could entail the provision of food and drink during the research at appropriate meal times e.g. lunch, or drinks and snacks during a break, or at the end of the research.

It should be reiterated during community consultations and prior to the surveys and focus groups that participation is not tied to any aid programme or access to services.

Case study: Payment and compensation

In the pilot study in Serbia, school psychologists were consulted as to whether small tokens of appreciation were required. In all schools it was agreed that small tokens of appreciation would be provided. Discussions with the psychologist and the director of a school for children with disabilities revealed that children would appreciate the provision of food and drinks. In this setting, children were provided with some chocolates and bon-bons at the end of the focus groups. In all schools, children were told that they would receive a small, undisclosed token of appreciation. At the end of the session, sweets, notebooks and pencils were provided to child participants (valued at approx. 3 USD per child).

Planning phase: planning for the protection of children and participants

The following key questions should be reflected upon when considering the protection of children, their families and communities within the context of local legislation and external review processes.

Key questions on protecting participants

- What ethical issues are likely to arise within this research programme? Issues would include, privacy, confidentiality of data, security, distress of participants, conflicts of interest etc.
- What is the best strategy for addressing these issues within the specific context of your programme? (Appendix 1 provides a template for an ethics protection protocol.)
- Who would be responsible for overseeing these processes? Who will be responsible for carrying them out?
- Are you legally required to report abuse to the authorities, i.e. does your country have mandatory reporting requirements? (Appendix 2 gives an example of a reporting protocol.) Have you ensured that support is available and accessible for those who disclose abuse? Have you trained staff to manage revelations of abuse or bullying and any mandatory reporting requirements (including determining any risk that may result to children and particular family members) following the reporting process?
- What external review processes are required?

Challenge: absence of effective support services

Establishing a protection protocol for your GKO programme can play an important role in addressing ethical issues that may arise during the research (Shaw et al., 2011; WHO, 2011). Many countries and institutions require a research protocol which includes child protection arrangements to be articulated in submissions to Institutional Review Boards (IRB) or Ethics Review Committees. Frequently, in research involving children (especially for research that interrogates sexual behaviours or experiences of risks— as is the case for GKO), clear referral processes and arrangements for psychosocial and other support

will be required for instances where children or participants become distressed or where clear cases of abuse are evidenced (Graham et al., 2013). (Appendix 1 includes options to consider when abuse is identified.) In many instances, relationships can be developed with local NGOs or government service providers to facilitate appropriate support for participants; agreements can be established to ensure that researchers can contact service providers directly if required (Devries et. al., 2015; Edmunds, 2005), or participants can be given a list of relevant contact numbers so they could seek support independently. However, there are significant ethical challenges in countries where properly trained service providers are either unavailable or significantly under-resourced.

Case study: Ensuring adequate protection mechanisms for children

In the South Africa GKO pilot, a number of arrangements were put in place to ensure adequate support for children who might become distressed. A training protocol (outlining how to identify, manage and refer any disclosure of distress, abuse or need for other social supports) was designed and implemented as part of the enumerator-training for the programme. Enumerators were also given the contact details of local social workers and relevant local NGOs to allow for direct referral. Relevant provincial safety officers, school principals, social workers and their organisations were informed (in writing or by a telephone call) of the study and the potential need for support throughout the research programme. In addition to creating a rigorous referral system, there was at least one qualified researcher (a psychologist with counselling skills) at every focus group to document the process, identify issues and manage (primarily through referral) any distress that arose.

Methods and approaches to consider

The absence of support services may be addressed by recruiting trained (and preferably on-site) counsellors for the duration of the research. However, the implications of withdrawing this service at the end of the research programme must be considered. Alternatively, it may be possible to make arrangements with local hospitals or schools for access to local counsellors, psychologists or psychiatrists. Child help-

lines may also be a means to support child participants who are distressed or who disclose abuse. In the absence of support services, questions included in the survey or in focus groups need to be seriously reviewed, particularly questions regarding negative online experiences.

Recruiting and training field staff

Selecting the right field staff (focus group facilitators, interviewers, field researchers and interpreters) to undertake data collection is critical. Field staff are often the first point of contact in dealing with ethical issues, so their attitudes, behaviours and interpersonal skills are critically important, particularly if they are dealing with children or vulnerable adults (Penny et al., 2012). Children involved in research may require greater patience and sensitivity than their adult counterparts. Staff that will be engaging with children must also be able to recognise children's capacities, competences (children may be highly technologically savvy) and strengths, and be responsive to both verbal and non-verbal cues. Ensuring that field staff show respect for children's proficiencies and sensitivities is critical to ensuring a truly informed consent process (that is clearly understood to be both negotiable and voluntary). It will also ensure better engagement and responses from children in the process (Schenk & Williamson, 2005).

Staff must also be aware of adult-researcher power dynamics and do everything possible to limit these inequalities and to value the opinions and perspectives of children and their parents (Graham et al., 2013). This includes recognising subtle cues that reinforce or reduce power differentials, such as the location of any interview or focus group, or the adults or authorities present (or visible). In face-to-face interactions, body language, physical position and tone of voice can also reinforce or reduce perceived power differentials (Alderson, 1995; Alderson & Morrow, 2004). Field staff must be able to determine when a child or adult is uncomfortable or bored, and be able to manage these situations to ensure that the right to participate is counterbalanced by protection rights and the voluntary nature of any survey or focus group. The recruitment of appropriate focus group facilitators, interviewers, field researchers and interpreters is critical to ensure ethical practice in primary data collection, particularly from children (Penny et al., 2012). Some key questions relating to recruitment and training are listed below.

Key questions on recruiting field staff

- Do your focus group facilitators, interviewers, field researchers and interpreters have experience working with children or young people?
- Have you undertaken a background/ police check for researchers and interpreters working with children?
- Are your focus-group facilitators, interviewers, interpreters and field researchers able to address ethical issues as they arise in the field? Is the same true of supervisors?
- Does your training programme specifically address the ethical issues that this programme may raise?
- Have you ensured that training provided for focus-group facilitators, interviewers, and field researchers and their supervisors explicitly includes training on identifying and managing ethical issues, including protection and data protocols and strategies?
- Have you considered establishing regular meetings between field researchers and supervisors to ensure that staff can report on ethical and other issues that have arisen? Have you considered having an ethics focal point so that supervisors have a reference person to go to with ethical issues as they arise?

Challenge: the absence of police systems and background checks for staff working with children

While police background checks for staff working with children may be a legislative requirement in many countries, this requirement is not universally implemented.

Methods/approaches

In the absence of police checks, background checks with former employers and personal references may be used instead. Appropriate training and assessments of potential data collectors, researchers and interpreters should ensure that those working with children are competent to engage with children respectfully.

For guidance on training staff see Penny, M., Ore, B., & S. Madrid, (2012).

A modified version of the International Rescue Committee (IRC) (2012) *Caring for Child Survivors*

Communication Assessment Supervision Tool may also be useful to assess the competence of researchers or data collectors working with children.

Case study: Competence of facilitators and interviewers - meeting IRB requirements

The primary concern raised by the ethics review board in relation to the Serbian GKO pilot was the competence of focus group facilitators and survey interviewers, and their ability to work sensitively with children and manage any distress that may arise.

For the quantitative surveys, which included sensitive issues regarding offline and online risks, it was agreed that the school psychologists/counsellors would be trained on ethical issues (including privacy issues) and would undertake the survey on behalf of the research team. It was noted that approval from the ethics review board and the schools themselves would not have been provided if alternative enumerators had been proposed.

Informed consent

As highlighted in the section on key issues above, securing informed consent can present particular challenges, so the following questions should be considered when designing informed-consent processes.

Key questions on informed consent

- Does your legislation provide guidelines on whether you need to obtain informed consent for certain categories (such as persons with disabilities, children under the age of 18 etc.)?
- Have you determined all the relevant community and government gatekeepers who will need to be made aware of the programme to ensure their support?
- Have you designed the informed consent/assent forms or process to reflect the capacities, competences and cultural norms of the participants, taking into account issues such as literacy, language, age, cultural meanings ascribed to

signing forms etc.?


- Have you determined the most appropriate time or approach when accessing parents in order to secure informed consent?
- Have you explained what the research is about and what is expected from participants, using methods that are appropriate for the age and competence of those from whom you are seeking informed consent/assent?
- Have you explained that participation is voluntary and that participants can withdraw at any time?
- Have you provided information on how and to whom questions or complaints can be addressed?
- Have you explained that information provided by participants is private and any limits to this (such as disclosure of abuse)?
- Will the data be publically available? If yes (even if it is anonymised) have you informed the participants of who will have access to their data and in what form?

Challenges: institutional settings

Research with children in institutional settings such as schools, or in juvenile facilities and institutional care (for example in homes for children with disabilities) present ethical issues regarding to the consent of the children involved. This is particularly the case where children are asked to undertake a survey within a group environment (Shaw et al., 2011). The particular power dynamics inherent in these contexts present challenges with respect to ensuring truly informed consent, voluntariness, negotiability and privacy. As noted by Bucknall (2012) children may find it difficult to refuse to take part in these contexts, as they may see research as part of mandatory school or institutional requirements. This situation is exacerbated in institutional care and juvenile justice institutions, where personal agency may be significantly restricted or where institutions may be reluctant to allow this type of research due to the perceived vulnerability of children and underestimation of children's agency (Alderson & Morrow, 2004; Ahsan, 2009).

Methods/approaches

According to Ahsan (2009) and Alderson & Morrow (2011), in institutional settings where informed consent is provided by authorities, passive consent (the presumption that if a child does not dissent that they have willingly chosen to participate) should not be



considered sufficient. From the outset, informed consent or assent should be sought from those participating. This should be done using appropriate language that reflects the capabilities of the child/children, and acknowledging that some children may not feel safe in particular institutional settings (Berrick et al, 2000; Powell, 2011).

Researchers should ensure that ongoing consent is sought; even if children initially agree, it is critical to maintain options such as those in the GKO quantitative survey to 'prefer not to say'. When undertaking face-to-face interviews, the researcher must regularly check whether there are physical indications of a child's reluctance to answer specific questions (fidgeting, avoiding eye contact (Bourke & Loveridge, 2013), and whether to begin or continue a survey. Regular questions as to whether a child wishes to begin or continue and, if necessary, repeated affirmation of the right to not participate, skip a question or stop a survey, should be the norm in these environments. Where institutions are concerned with the vulnerability and welfare of children, these concerns should be addressed to ensure that institutional stakeholders are comfortable with the survey methods or the researchers (Ahsan, 2009). Where privacy will not be possible and honest disclosure could potentially harm children in care (for example the disclosure of risky offline activities in the GKO quantitative survey), the research may be considered too high risk to undertake (Graham et al., 2013). Alternately, consultation with relevant groups or organisations (that can assess independently the risks and particular social, institutional or cultural sensitivities) may lead to the removal of sensitive questions from a survey.

Challenges: children without guardians

In many countries and contexts, it is common for children be living without a parent or guardian (perhaps in a child-headed household). In these instances, reflection is required on children's competence to consent. Children may be considered by law to be emancipated or have 'mature minor status' (Ensign, 2003), but in many countries this legal designation does not exist.

Methods/approaches

Where potential child participants do not have a parent or guardian or if a parent or guardian cannot be accessed, other options may be available. If legal consent is required (for example in research involving

street children), social workers might be in a position to provide this; and/or government approval might be necessary. Alternatively (as was the case of a research programme involving street children in South Africa), children may be granted emancipated or mature minor status (Richter et al., 2007) for the duration of a research programme. These approaches are likely to be more successful if the research is considered low-risk and if appropriate consent from children (that takes their competences directly into account through the language, format and the nature of the information provided) is also sought.

Questions regarding sexual or offline risks in general may present a hurdle to ethical approval by a review board. This could be overcome by clearly articulating to reviewers the methods that will be adopted to ensure voluntariness and by highlighting the benefits of understanding how these cohorts (children without parents or guardians) use the internet, and the importance of their representation within the data. For child-led households, emphasizing the autonomy and agency of the children involved and their role as decision-makers within the context of their own lives, could help gain approval from review boards to directly seek informed consent from this group (Lee, 2012; Evans, 2011).

Challenges: children and parents disagree on whether children participate

Further challenges are presented when children and parents disagree on whether a child should participate in a study.

Methods/ approaches where the child wants to participate

Where parental informed consent is required and a child wishes to participate but their parents do not want them to, there is a clear tension between the obligation to obtain consent from a child's caregiver and the right of children to be heard. A clear decision will need to be made, informed by local consultations, as to the best way to proceed. In these instances, the motivation or concerns of parents or caregivers should be explored, particularly if there are indications that this reluctance is common. Where concerns can be addressed, these should be made clear to the community and to caregivers. Where this is not possible, the programme may be unable to proceed or the child may not be able to participate.

Methods/ approaches where parents want children to participate

There may be instances where parents wish their children to participate (for a number of reasons, including any payment or compensation that the child may receive) but the child is reluctant to do so. In such situations, it is critical that discussions take place with local communities about the power dynamics between children and parents, and how parents are likely to respond if a child says no to the research. At the same time, parents must be explicitly informed that the research cannot be undertaken if a child does not want to participate. If there are clear indications that a child's refusal will lead to consequences for the child, the child should be reminded that they don't have to answer all the questions and that they can stop the survey or skip questions.

Case study: Informed consent

All the focus groups for the GKO Serbian Pilot Study were held in schools. Approval for the study was first sought from the school's director and school psychologist. Children who were interested in participating were given forms to take home to their parents to obtain the required co-signatures. Across all schools, consent by children and their parents was almost universal. However, two or three parents refused to allow their children to participate because of UNICEF's involvement in the programme. This decision was respected by the researchers. The Primary Investigator (PI) explained that this wariness of international organisations dated back to the Yugoslav wars and the role of the international community. In this instance, the lack of participation did not significantly affect participation rates, but it provides an example of the need for consultation amongst communities regarding attitudes to partners when ensuring access and informed consent.

An enumerator or researcher who has identified a child's forcible participation should regularly ask the child if they want to skip a question and give them options to finish the survey quickly. The enumerator should also note on the survey that the child was reluctant to participate. The survey can if necessary be excluded during data cleaning, to reduce the likelihood of response bias in the sample. In focus group

discussions, facilitators should reassure the child that they can sit quietly if they wish and can contribute as much or as little as they want. Again, facilitator's notes should identify if there was a child that did not contribute at all due to forced participation.

Instrument adaptation (survey, interview, focus group)

The appropriateness of the instrument design will affect both the validity of the research and the response rates. The research instruments provided by GKO will therefore need to be piloted to determine their relevance to the particular country/sites involved. Pre-research consultations with stakeholders will support this process, but piloting is critical not only to determine understandings but also to ground the instrument in the appropriate language and reference points. Further, consultations and piloting will facilitate an appreciation of local sensitivities. Consultations with stakeholders may reveal political and social sensitivities of which children may be unaware; while piloting surveys or focus group questions may reveal particular sensitivities of children and their families. The following questions therefore should be considered when adapting data collection instruments.

Key questions on adapting survey instruments

- Do you have sufficient information from the field to know how people and communities are likely to respond to the survey subject matter and questions?
- Have you made sure that the questions for surveys, focus groups or interviews are value-neutral, culturally- and age-appropriate and are not going to make people feel uncomfortable or upset? Have you consulted relevant communities or undertaken appropriate situational analysis?
- Have you made sure that the language used in the survey/ interview/ focus group is age- or culturally-appropriate?
- Have you considered what, if any, changes will need to be made to the survey if privacy is not possible? Have you considered altering the questions to ensure that respondents do not have to divulge personal or sensitive information in front of others?

Challenges: ensuring child-appropriate language

According to Geertz (1973), understanding and utilising language used by children and young people can help frame research in terms that children can understand and own. Without this understanding, it may be difficult to ensure active engagement of the children throughout the interview or focus groups; and if children misunderstand the nature of the questions, results may be skewed and inaccurate.

Methods/approaches

As noted in Tsaliki and Chronaki (2013), possible strategies to ensure child-appropriate language is to use adolescents as interviewers and/or to pilot surveys or focus group questions, including language testing with children prior to full implementation.

The EU Kids Online studies in Greece and Finland identified in Tsaliki and Chronaki (2013) highlight the diversity of children's internet practices, computer literacy levels and cultural understandings and meanings of 'net jargon'. They note that the Greek study responded to this challenge by testing the language with older adolescents in order to create a 'language register that [wa]s appropriate for and intelligible to younger participants and devoid of adult stereotyping' (p.50).

Case study: Adapting the survey to meet local needs and to reflect local ICT infrastructure and language

The Philippines GKO pilot translated the consent forms and survey materials into the local dialect to ensure that all participants were able to understand the questions and provide genuine informed consent. Additional questions were included to generate information on local access and use of the internet. These additional questions focused on the use of internet cafes, known locally as *pesonet*. Adding these questions to the survey enabled the exploration of issues related to internet use for those who cannot afford computer hardware. This allowed this cohort to be included and also provided researchers with data on the opportunities and risks specifically related to use of the internet in public spaces.

Data collection

The data collection process is one of the most sensitive components of the research process. Highly trained or experienced focus group facilitators, interviewers and field researchers will significantly improve the comfort of participants, the validity of the data and response rates. The location and parties present will also make a difference.

Key questions on data collection

- Have you made sure that personally identifiable information is removed prior to the data collection process?
- Have you considered privacy issues? In instances where privacy may be difficult to ensure, have you considered computer-assisted personal interview programs? Is this appropriate, given literacy levels as well as known technological literacy levels? Would an audio-assisted program be preferable?
- Have you made sure that field staff are trained in ethical research and are appropriately sensitive, non-judgemental and take time to make respondents feel comfortable?
- Have you made sure that field staff are gender-appropriate in light of prevailing cultural norms?
- Have you ensured that there are no incentives (such as daily quotas, or low remuneration rates per survey/interview) that might make enumerators/ interviewers less likely to take the time to make the respondents feel comfortable?
- Have you made sure that field staff with clearly identifiable religious or political affiliations are not allocated to clusters where there are a clear majority of residents holding opposing religious or political affiliations?
- Have field staff been trained not to provide any information regarding their religious or political affiliations? Have they been trained to be aware of their own cultural/religious biases?
- Have you made sure that participants are afforded privacy when answering surveys and interviews? Have you considered who can be present when a child is responding to the questionnaire?
- Are there appropriate audits of the field staff? If yes, what will be the impact of the presence of an outside observer to the interviews or focus groups?
- Have you made sure that any focus groups consist

of participants that are age-, gender- and/or culturally-appropriate?

- Have you made every effort to make sure respondents feel safe and/or are not placed in danger because of their participation?
- Have you made sure that there are services and supports available if a participant becomes distressed during the interview, focus group or survey?
- Do you have a clear process to respond to both legal and ethical imperatives when mandatory reporting is required?
- Does the protection protocol include clear guidelines on actions to take if children identify a possible predator who has attempted (or is currently attempting) to engage with them online?

Case study: Ensuring privacy of young people participating in the GKO quantitative survey

In the Philippines quantitative pilot, there were concerns regarding the need for privacy because the survey included questions on sexual risks. There were particular concerns relating to a phenomenon (the prevalence of which is uncertain) whereby parents are paid to have their children video-recorded (via webcam) potentially for nefarious purposes. To ensure that children were assured privacy, particularly from parents or guardians, the Philippines team collected data using computer-assisted self-interview (CASI) software. This was deemed appropriate for the sample, whose age range was 9–17 years. Each young person participating was provided with a tablet for the duration of the survey and they completed the survey themselves.

“The data collection process is one of the most sensitive components of the research process.”

Data transmission, analysis, storage and security

The transmission/transport, analysis, storage and security of data require clear data management strategies. In this context, the technologies used (i.e. cloud, physical, electronic) must conform to the highest security standards, reflecting the expectation that researchers in the field of internet use will have a strong understanding of security issues related to technology and data management.

Key questions on data security

- Have you made sure that data is de-identified as soon as possible?
- If the data collection process, transmission/transport and storage is electronic or cloud-based, have you determined the security of these technologies?
- If you are considering merging databases now or later, have you made sure that this does not make it more likely that individuals could be identified?
- Have you sought permission from participants for any future merging of databases?
- Have you made sure that only necessary staff have access to the identified data?
- Have you locked up, encrypted or placed a password on the relevant database/s?
- Do you have clear protocols regarding personal transport of data (e.g. on USB and hard drives)?
- What levels of aggregation are appropriate for analysis? Have you considered the relationship between the levels of aggregation and the possible identification of children and participants?
- How will you ensure that any quotes included in reports do not involve identifying information?
- Have you determined how long you will keep the raw data, particularly any identified data?
- Have you determined how you will destroy the raw or any identifiable data?

Challenges: keeping data safe and maintaining confidentiality

Keeping data safe and maintaining confidentiality is a universal ethical concern for research. The involvement of children only serves to reinforce the importance of appropriate measures to protect the data (Laws & Mann, 2004, Shaw et al., 2011). (See

Section 1.4 for further discussion).

Methods/approaches

A good overview of considerations and approaches that can be adopted to ensure data is kept safely can be found in Boddy, J., et al., (2015).

This guidance notes the importance of:

- Encrypting or password-protecting files (including computer files) that contain personal or identifiable data (such as names) and only allowing access by agreed members of the team.
- Attaching passwords to any hardware that may be used to transport data (hard drives, USB sticks).
- Getting prior consent from participants if you plan to archive data for use by other researchers.
- Securely locking away hard copies such as interview notes, prints of photographs, or video- or audio-tapes so that they can only be accessed by agreed members of the research team.

Anonymising data by:

- Removing direct identifiers (e.g. personal information such as addresses)
- Aggregating or reducing the precision of variables that might be identifiable (e.g. postcodes)
- Generalizing text variables to reduce identifiability
- Restricting continuous variables to reduce outliers
- Editing qualitative data so that it is not clearly attributable.

Case study: Data protection protocols

In the Philippines pilot of the quantitative survey, data collected via CASI software was uploaded to a single server and access to this data was password-protected and limited to the research team. For additional security, the data was cleaned and analysed exclusively on two designated computers within a secure area. Data was not transferred to or processed on any other computer.

Report-writing and dissemination

Ethical standards demand that reports and products be thoroughly reviewed prior to publication or dissemination to ensure anonymity and confidentiality to the participants. Exceptions may be made only when participants make a specific request (during a rigorous informed-consent process) to be identified (CP MERG, 2012, Graham et al., 2013, WHO, 2011; Feinstein & O’Kane, 2008).


Notions of reciprocity between parties to the research programme provide arguments for a relationship between researchers and participants, with ‘opportunities for research participants to learn from, and articulate feedback on the research’ (Thi Lan & Jones, 2005, p.4). From this position it may be argued that there is an obligation for research findings not only to be triangulated with communities but also to be accessible to the communities in which the research was undertaken (Feinstein & O’Kane, 2008).

It may be appropriate to produce reports in appropriate languages and formats, including child-friendly reports (Feinstein & O’Kane, 2008).

Finally and importantly, ethical research should increase the likelihood that there will be positive changes to the conditions, services and infrastructure needed to support children (Ennew & Plateau, 2004). In the context of GKO, this would translate into research that explores means and methods to foster opportunities and access to the internet, to mitigate against risks to children in these environments and to appreciate the diversity of experiences within a particular context. If research findings are to be effective (in terms of changes related to children’s inclusive and safe access to the internet), they should be disseminated clearly to policy-makers at opportune moments to influence both policy and programming.

Key questions on report-writing and dissemination

- Have you made sure that respondents or politically vulnerable individuals or cohorts are not identifiable in the report or through the analysis (unless they have expressly asked to be identified)?
- What levels of aggregation are being used in the analysis? Are particular cohorts going to be identified for analysis? If yes, is there any chance that these cohorts will be stigmatised as a result?

- 
- Have you made arrangements for a review of draft reports and findings to ensure that individuals or communities are not identified and will not be stigmatised after reports are released? Have you ensured these reports are presented in a form that participants and their communities can understand?
 - Who will be receiving the reports? What information will be publically available?
 - Have you thought about the likely impact of the findings/reports on individuals and/or their communities?
 - Who will have access to the data once the research programme is completed? In what form? Have you ensured that reports are available and accessible (location and content) to the communities in which the research was undertaken? Have you considered producing child-friendly reports?
 - How can the research best be integrated into relevant policies or planning processes? Are there political opportunities and windows where this information could directly feed into the development of governance frameworks for the internet? How can the findings be developed into products that would be useful for child-rights advocates in this field? Can the findings inform the development of location-specific curricula on internet use and/or cyber-safety?

USEFUL ONLINE RESOURCES

Resources provided by the author

Boddy, J., Neumann, T., Jennings, S., Morrow, V., Alderson, P., Rees, R., & Gibson, W. (2010). *The research ethics guidebook: A resource for social scientists*. Brighton: University of Sussex.
<http://sro.sussex.ac.uk/39319/>

Ethical Research Involving Children (ERIC): An overview of ethical issues, case studies and literature relating to research involving children.
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Additional resources

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CHECKLIST 1

Protection protocols template

Purpose of the protocol

This protocol outlines key principles and actions that will be taken to safeguard the rights of children, adolescents, young people, their families and communities as well as staff during efforts to engage children, young people, families and their communities in this research programme.

Relevant background to protocol

Purpose of research.

Outline key objectives of the research

Relevant background to protocol:

- Outline of context
- Has this been done before in this context?
- Target demographic and cohorts
- Why this demographic?
- Groups included/excluded?
- Any politically, socially, environmentally relevant factors that may impact on research.

Outline of methodology

Briefly provide an outline of the methodology to be adopted (this should also very briefly describe likely dissemination approaches and attendant products).

Legal framework

Are there any legally binding requirements regarding disclosure or evidence of abuse or violence (particularly pertaining to children)?

Are there any limitations of current legally binding reporting systems (with regard to process, supports and consequences to vulnerable individuals, families and groups)?

Are there any other legally relevant requirements (including informed consent)?

Protection protocols

See table below.

Protection protocols		
Risk	Risk management strategy	Responsibility
Examples	Examples	Examples
<p>Concerns or complaints are raised by participants or communities</p>	<ul style="list-style-type: none"> Establish a focal point for inquiries and complaints (planning phase). If possible, concerns will be addressed in the first instance by focus group facilitators, interviewers and field researchers (data collection phase). Participants and communities given contact details of a focal point for concerns or complaints (data collection). 	<ul style="list-style-type: none"> Focus group facilitators, interviewers and field researchers (Field Staff) Focal point for inquiries and complaints
<p>Challenges/comments:</p>		
<p>Evidence of physical abuse is discovered</p>	<ul style="list-style-type: none"> Referral to legislation (<i>insert relevant legislation here</i>) which states.... (planning phase); and Clear articulation to participants (before individual surveys and focus group discussions) that, while the focus group facilitator, interviewer or field researcher is not asking about abuse, if disclosure of abuse occurs (or if there is evidence of abuse occurring) it will have to be reported as per the legislation. If necessary or requested, staff to contact referral service on behalf of the victim/s (data collection phase). Participants will be provided with full details of the likely process once the abuse has been reported and any support services have been contacted. <p>Or, if no legislation exists:</p> <ul style="list-style-type: none"> No measures will be taken unless the respondent/participant asks for help, in which case the focus group facilitator or field researcher will provide information on relevant support services/help-lines. (this information will be determined in advance and provided part of a generic list of local or relevant health and social support services that are available and willing to provide support as necessary) (data collection phase). 	<ul style="list-style-type: none"> Field staff Supervisors Relevant government and service providers (be specific)

	<ul style="list-style-type: none"> • Set up systems, including documentation (official forms and a clear algorithm for group facilitators, interviewers and field researchers to determine whether they should report the abuse/potential abuse) for referrals and reporting to relevant authorities (planning phase). • Focus group facilitators, interviewers and field researchers to clearly explain referral and reporting process to child or adult participants as simply as possible (data collection phase). 	
<p>Challenges/comments: Reporting to authorities in the past has not always resulted in follow-up and has left the victim without support. Women's support groups and shelters have been contacted and referral is now included in the protocol to ensure adequate support after abuse has been officially reported. The referral process has been included as part of the training programme for data collectors.</p>		
<p>Focus group facilitators, interviewers or field researchers cause distress to participants.</p>	<ul style="list-style-type: none"> • Clear system in place to facilitate, follow up and manage complaints and provide relevant supports as required (data collection phase). • Political and cultural sensitivities of participants and broader community determined through consultation with community reference group and other key local stakeholders to ascertain recruitment needs for focus group facilitators, interviewers, field researchers and interpreters (including requirements for exclusion) (planning phase). • Focus group facilitators, interviewers and field researchers and any interpreters are not to be allocated to clusters in which they are strongly tied or familiar with the residents (planning phase). • Focus group facilitators, interviewers and field researchers with clearly identifiable religious or political affiliations are not to be allocated to clusters where there is a clear majority of residents holding opposing religious or political affiliations (planning phase). • Focus group facilitators, interviewers and field researchers are trained not to provide any information regarding their religious or political affiliations (recruitment and training of focus group facilitators, interviewers and field researchers). 	<ul style="list-style-type: none"> • Focal point for inquiries and complaints • Programme manager responsible for selection of group facilitators, interviewers, field researchers • Trainers and training designers
<p>Challenges/comments:</p>		
<p>Limited if no privacy</p>	<ul style="list-style-type: none"> • Focus group facilitators, interviewers and field researchers provided with explicit instructions 	<ul style="list-style-type: none"> • Trainers and training

	<p>on how to manage these situations in training (recruitment and training of focus group facilitators, interviewers and field researchers). Possible approaches:</p> <ul style="list-style-type: none"> • (a) Focus group facilitators, interviewers and field researchers to ask for a place in the home where they and the respondents will not be in hearing distance of any person over the age of 15. • (b) Focus group facilitators, interviewers and field researchers to explain to any persons over 15 that in order to do the survey they must have privacy. • (c) Interviewers and field researchers to inquire if there will be a time that they can come when adult members will not be around, and to reschedule interview to that time. • (d) If privacy not guaranteed, before questions relating to online risks and behaviours and awareness of parents of internet use, focus group facilitators, interviewers and field researchers to explain nature of questions and again ask for permission - if not granted, skip these sections. • (e) If third parties are interfering with interview or focus group, interview or focus group to be stopped if doing so will not create tensions, sensitive items to be skipped and absence of privacy noted on survey. • Use Computer Assisted Personal Interviewing technologies. • – (e) data collection phase. 	<p>designers</p> <ul style="list-style-type: none"> • group facilitators, interviewers, field researchers
<p>Challenges/comments:</p>		
<p>Evidence of potential interaction between a child and an online predator.</p>	<ul style="list-style-type: none"> • Consultation with advisory group/communities regarding available supports (planning phase). • MoU with relevant service providers to provide support (planning phase). • Clear system in place for reporting and referral to counselling if necessary for child, and providing appropriate informational supports on cyber-safety for parents and children, including referral to relevant cyber-safety hotlines if necessary and available (planning phase). • Parents to be informed of potential exposure of child to predator and counselling options. (data collection). 	<ul style="list-style-type: none"> • Programme manager • Group facilitators, interviewers, field researchers
<p>Challenges/Comments: There are currently no appropriate child hotlines or official processes regarding the reporting and investigation of potential online predators. This is an issue that will require greater advocacy into the future, in collaboration with relevant partners.</p>		

<p>Dissemination of findings stigmatises communities or groups</p>	<ul style="list-style-type: none"> • Consultation with advisory/community group/s regarding potential sensitive issues. Analysis of data at various levels of aggregation considered reflecting on potential stigmatisation of groups. (planning phase). • Draft reports are reviewed by third parties (individuals/advisory/community groups) with sufficient technical knowledge and appreciation of ethical issues to ensure that reports do not stigmatise particular communities or groups. (Report writing). 	<ul style="list-style-type: none"> • Programme manager
<p>Challenges/Comments:</p>		
<p>Dissemination of findings potentially identifies participants.</p>	<p>Draft reports are reviewed by third party (who was not involved in drafting) to ensure that reports do not provide any sort of identifying information (report-writing).</p>	<ul style="list-style-type: none"> • Programme manager
<p>Challenges/Comments:</p>		
<p>Confidentiality of data is compromised.</p>	<p>Clear data protocols outlining:</p> <ul style="list-style-type: none"> • Data de-identification methods (pre or post data collection). • Methods to ensure that data collection, transmission/transport and storage is secure. • Staff who have access to identified data. • Methods to secure data such as physical locks and restricted access, encryptions or passwords with keys known to limited staff members. • Transmission/transport of data (who, how, what physical and electronic means and their security). • Duration of storage. • Means of destroying data. • Policy regarding merging of data with other databases in the future (programme planning/data transmission, analysis, storage and security). 	<ul style="list-style-type: none"> • Programme manager

Challenges/Comments:

A child discloses in the risk section of the GKO survey or in focus groups that they are being badly bullied by peers or that they are bullying others.

- Within school settings, consult school management and counsellors to determine the best approach to addressing this issue. If steps will be taken, ensure the informed consent tells children clearly that what will happen if bullying is identified, including any support services the school can provide.
- Discuss with local community groups and services (including schools if relevant) what steps should be taken if the research reveals that bullying is occurring. Get clear understandings on when it is deemed appropriate to take steps (i.e. the nature of the bullying that would lead to reporting or taking measures) and what to do if the bullying is being perpetrated by siblings.
- Discuss approach to be adopted with enumerators, facilitators and field researchers within training.
- Provide victims of bullying with contact details of counselling services, or put them in touch with relevant supports (school or local counsellors).


- Project manager
- group facilitators, interviewers, field researchers

CHECKLIST 2

Handling disclosure of child abuse or neglect during fieldwork, example of researcher protocol

Adapted from the Centre for Justice and Crime Prevention and University of Cape Town (2015), The Optimus Foundation Study, South Africa.

Stage	What to consider?
Be clear on what the legal requirements for reporting of child abuse or neglect are, and what support services are available for children experiencing abuse and adjust this form accordingly.	<p>Consider:</p> <ul style="list-style-type: none">• Are there services that children can access to get more immediate support? Is there a child support line? Other types of support?• Does neglect require mandatory reporting?• If so, who do you have to report abuse to?• Do you need to tell the child that it may take time for the government/police or social services to respond?• If it is not mandatory to report, does your institution/organisation/university provide guidance on what to report and how?• Do you need any further support in handling this?
While you are going through the interview, you may notice instances of child maltreatment and you should note them down.	<p>These might include where:</p> <ul style="list-style-type: none">• The person being interviewed says that the abuse or neglect is going on at present or will happen again; AND• Where the abuse or neglect is not been addressed: it has not been reported to any authority or the child is (still) in need of support.
If, during the course of the interview or focus group it becomes clear that a child is being abused or neglected and it has not been addressed (i.e. there is a current and real threat to the child).	<ul style="list-style-type: none">• <i>In the context of an interview:</i> check whether the child is distressed and if they want to take a break or stop the interview. Continue the interview only if the child seems fine, then, at the end of the interview discuss the support that is available to the child and what steps need to be taken to report the abuse and the process thereafter. If reporting is not mandatory, consider what is in the best interest of the child – seek further help and advice if necessary. Help can be offered by a more experienced colleague, the project Principal Instigator, a member of the institutional ethics board, social services or child support hotlines.• <i>In the context of a focus group:</i> ask the child if they want to continue or take a break. After the focus group (if the child doesn't choose to leave the focus group) discuss with the child what support is available and the steps that need to be taken to report the abuse and the process thereafter. If the child chooses to leave the focus group, ensure that there is a second party who can explain to



the child about the available support and any steps that need be taken to report the abuse and the process thereafter. If reporting is not mandatory, consider what is in the best interest of the child, seek further help and advice, if necessary.

- It is important to note any potential negative repercussions of reporting that you are aware of, or that the child tells you, to share with a relevant social worker or, to enable you to reflect on the implications of reporting and the best interest of the child.
- Give the child a brochure or information about any relevant support services that they or their family can access. Make sure that it is discreet (for example ensure it is relatively small (pocket-size) and/or ensure that it includes other non-violence-related services (health, recreation etc.) so that it can be explained as a general source of information about local services).
- Consider if you need to access to formal support.

In cases when reporting is mandatory by law

- If the child does disclose abuse that is currently going on and which has not been reported, when appropriate (see 2 above), say to the child: *'Because you have told me you have been abused/have been hurt or may get hurt, and because this was not reported, I have to report this to a [insert social worker/police/other]. Do you understand?'*
 - Then say: *'I need to fill in this form. I will give it to my supervisor, and s/he will send it to [insert the appropriate Department/Service Area] this evening.'*
 - Fill in the form (see attached for an example).
 - Then explain what the process will be to the child. For example, say: *'A social worker from the Department may come to see you about this. It may take some time before they can come. If you want to talk to someone else about what happened, you can phone [insert relevant support Services]. Here are the numbers.'*
 - Give the child a brochure or information about support services that they or their family can access. Make sure that it is discreet (for example ensure it is relatively small (pocket-size) and/or ensure that it includes other non-violence related services (health, recreation etc.) so that it can be explained as a general source of information about local services).
 - Give the form to the relevant authorities as soon as possible.
-

Example form for reporting of abuse or deliberate neglect of a child

Note: to be completed and provided to relevant authorities by the relevant project manager

Reporting of abuse to provincial/federal department of xxxxx, designated child protection organization or police official

To: The [insert the relevant authority, i.e. Chief/Head of Department of Social Services/Police]

Pursuant to section X of the Children's Act, [insert year], and for purposes of section XX of the Act, you are hereby advised that a child has been abused in a manner causing physical injury/ sexually abused/ deliberately neglected or is in need of care and protection. This abuse is ongoing.

Source of this report: I am supervising fieldwork during a study of children's right and Digital Technologies on behalf of [insert your organization] and UNICEF. This child has disclosed maltreatment in the course of this study.

Child's surname: _____

Child's first name(s): _____

Gender: _____ **Date of birth:** _____

School name: _____

Grade: _____

Contact number for child / child's caregiver: _____

Contact person trusted by the child:

Name: _____

Contact number: _____

Child's address: _____

Signature of person completing this form: _____

Date: _____