

Researching children: are we getting it right?

A discussion of ethics

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As the role of children in society becomes more prominent, their participation in research seems set to increase. In this paper we review whether we are getting the ethics of children's research right. We show that, since the late 1980s, children have been treated universally as a special case and that they have been accorded their own special set of human rights (UNCRC), which primarily grants them rights to protection and participation. We go on to argue (with practical examples) that the core MRS research principles of well-being, voluntary informed consent and privacy/confidentiality must be applied to children with particular caution and care. We note that, as research with children grows and as new techniques are developed, we are presented with fresh challenges for keeping children safe and maintaining their trust. We end by presenting the results of a survey that sought children's views on being research participants in a quite sensitive piece of research. We found that children are highly appreciative of being consulted about their lives in general and being asked about their feelings. However we also found that some children can be uncomfortable with some of the issues raised and can feel compelled to answer the questions. We conclude that, while we have good industry codes, ethics evolves with shifting social, political and cultural patterns, and we need to keep challenging ourselves to maintain best practice.

There is no trust more sacred than the one the world holds with children. There is no duty more important than ensuring that their rights are respected [and] that their welfare is protected ...

(Kofi Annan)

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The changing role of children in research

The era when children were seen and not heard has gone. Children now have rights. In 1989 the United Nations Convention on the Rights of the Child (UNCRC) unequivocally and universally established children's rights to participation (Article 12). Concordant with this philosophy the past decade has seen a substantial body of literature from psychology and sociology to geography and anthropology arguing for greater involvement of young people in decisions that affect them (e.g. Morrow 1999; Alderson 2000; Shier 2001; Stafford *et al.* 2003; Hill *et al.* 2004; Powell & Smith 2009). Underpinning this thinking is a dominant 'new social studies of childhood' discourse (Prout 2005), which positions children as beings in their own right rather than simply mini-adults in the making. This shift in global theory and thought has now begun to manifest itself in the practical implementation of government policy on the ground. In the UK, for example, the Children's Act 2004 specifically requires the Children's Commissioner to consult with children (Section 2:4) and the principle of child participation is an integral seam within education, health and social care policy. Between 2006 and 2010,¹ most schools in the UK participated in the annual 'TellUs' survey in which children aged 8 to 18 were asked their opinion about their teachers, their teaching, their school, the services they receive, and their lives (see Figure 1).

TellUs 4 Survey (2009) – commissioned by the Department for Children Schools and Families

At a local authority level, data collected through TellUs 4 will be used to calculate five national indicators:

1. NI 50: Emotional health of children
2. NI 69: Children who have experienced bullying
3. NI 110: Young people's participation in positive activities
4. NI 115: Substance misuse by young people
5. NI 199: Children and young people's satisfaction with parks and play areas

Figure 1 Example of how the TellUs survey is used

Organisations such as Barnardo's, Save the Children, The Children's Society and ChildLine regularly consult children (Alderson & Morrow 2004), and the *Every Child Matters* (2003) government consultation paper

¹ Note: In June 2010 LEAs received the following directive from DFE: 'The Government has decided to stop the delivery of the TellUs Survey as part of its commitment to reduce the burdens which data collection imposes on schools and local authorities.'

stated that, 'Real service improvement is only attainable through involving children and young people and listening to their views.'

However, while research with children can certainly be seen as an enabler of their right to participate, researchers also have to be aware that the UNCRC accords children a concurrent right, namely the right to protection (Article 3). A key challenge for researchers is to navigate a path between ensuring that children are heard, on the one hand, and ensuring that they are protected on the other. In the mid-1990s the difficulties of achieving this balance were the subject of quite intense debate (e.g. Mahon *et al.* 1995; Morrow & Richards 1996), which resulted in greater involvement of university research ethics committees in children's research and the continued development of practitioner codes. Fifteen years later, the challenge of empowering children to be heard, while acknowledging their vulnerability, has become more complex as the research landscape has undergone dramatic changes. At the most fundamental level the discourse that propounds the prominence of the child's voice has gained more political and social momentum, with the result that the volume of social research with children has increased substantially and will inevitably continue to do so. At the same time the increasing economic importance of children as consumers in their own right and as influencers of family purchases (Mayo & Nairn 2009) means that the commercial world is also eager to understand young people's opinions. Since the 1990s we have also seen a change in methodology and terminology away from research 'subjects' studied at arm's length, to research 'participants' involved more intimately in ethnographies and co-creations. This can be viewed alternatively as more empowering or more intrusive for the young people, whose views, behaviours and activities we seek to understand. Meanwhile, on a technological level, the internet – and particularly social networking sites – offers a host of new data collection methods and analysis techniques that bring with them new challenges such as ensuring the privacy of an unnamed respondent in cyberspace, finding a reliable and valid representative sample, and dealing with professional respondents (see, for example, *IJMR* 2010). Beyond this there is justifiable public anxiety about children's internet safety (Byron 2008) as well as a continuing political agenda to regulate the role of commercial companies in the lives of children (DCSF/DCMS 2009; Bailey 2011). The current UK government is particularly concerned about the use of children as brand ambassadors where they are not only giving their opinions on products but also being incentivised to influence the purchase behaviour of their friends. This practice blurs the important line between market

research (which does not seek to alter opinion) and marketing (which does).

The time thus now seems ripe to revisit the issue of whether or not we are getting ethics right when we conduct research with children.

The human rights framework for current ethics codes

Research ethics for adults as well as children are founded clearly and solidly within a human rights framework. International horror at the medical research experiments carried out on prisoners during the Second World War led to the drafting of two important international documents. The Nuremberg Code (1947), which enshrined the principle of voluntary consent of research participants, and the Universal Declaration of Human Rights (UN 1948), which encapsulated the principles of mutual respect for the dignity and equality of all individuals. The Declaration of Helsinki (1964) (WMO 1996) later laid out specific diktats in relation to transparency of research purpose and confidentiality of information in the medical research field. Since then researchers in other fields, such as psychology, geography, sociology, anthropology and, indeed, market research, have derived ethics codes from these Universal Declarations. While different research bodies word their codes in slightly different ways they are all founded on three core common human rights principles:

1. the well-being of the research participant
2. the voluntary, informed consent of the participant to take part in the research
3. respect by the researcher for the confidentiality and privacy of the research participant.

Thus, the well-being of the research participant must always take precedence over the research study – regardless of whether the results of the study may lead to benefits for a greater number of people. Participants must understand exactly what the study is about and be in a position to freely decide whether or not to take part. No coercion must be involved. And the researcher must safeguard the data collected from the participant and use it only for purposes agreed to by the participant, and may disclose the identity of the participant only with the latter's express and specific permission. These principles form the core of the MRS Code of Conduct and ESOMAR's International Code.

However, the simple existence of such ethical codes founded on universal human rights principles does not automatically guarantee ongoing ethical behaviour by all members of a community, however well motivated. For while the principles are universal and fairly intractable, they are applied within social, cultural and political contexts, which are continually shifting and need to be constantly re-evaluated. The 1964 Helsinki Declaration, for example, was updated yet again in 1996, and both MRS and ESOMAR Codes were updated again very recently. This is particularly so in relation to children, not only in view of the sharp shift we have witnessed in their role in society, but because children occupy a favoured social position. Indeed, is it because as human beings we recognise that children are a special case that they have their own human rights declaration (UN 1948), and that MRS and ESOMAR have separate and specific guidelines for young people. 'Children are not small adults; they have an additional, unique set of interests' (McIntosh 2000, p. 177).

The rest of this paper considers the key features of this 'additional, unique set of interests', and contends that we, in the market and social research community, need to be constantly mindful of them if we are to ensure that we are truly upholding children's rights in our work. This may not be as simple as it might seem, and the paper is intended to stimulate debate, discussion and sharing of best practice. We consider each of the three core research principles in turn and discuss how each poses specific issues for children, what current best practice seems to be, and where we need further thought and debate.

The principle of participant well-being

While the well-being of the participant in theory always takes precedence over the research study, applying this principle may not be straightforward as there are often dual loyalties at play in research (International Dual Loyalty Working Group (IDLWG) 2002). Indeed, the 7th principle of the MRS code states that 'Researchers shall balance the needs of individuals, clients, and their professional activities.' A researcher thus has a loyalty to their client and their firm as well as the research participant. Bell (2008) however argues strongly that, where research with children is concerned, then the only party with *rights* is the child. We would agree that neither client nor employer has universal rights in this regard. The well-being of any single child research participant is thus always more important than the study being conducted; than the interests of any other stakeholder; than a profit motive; or than a social marketing objective.

However, well-being itself is a labile concept and one which successive governments have struggled to pin down. One current UK government definition is ‘a positive state of mind and body, feeling safe and able to cope, with a sense of connection with people, communities and the wider environment.’ Children’s well-being has also been described as a young person’s ability to: develop psychologically, emotionally, intellectually and spiritually; have a sense of personal well-being; sustain satisfying personal relationships; develop a sense of right and wrong; and resolve problems as well as learn from them (Mental Health Foundation 1999). In the context of this rather wide definition we consider below some areas where well-being requires special consideration.

Physical well-being

Ensuring physical well-being is perhaps the most straightforward issue to navigate, but what is less clear-cut is what should be done if a child tells an interviewer in confidence that they are the victim of bullying, child abuse or violence. Current best practice suggests that children’s and young people’s researchers need to be subject to the same principles of Safeguarding Children as workers in the public sector. These principles make it clear that any reporting of abuse or violence towards a child or young person must be reported to the police, who in turn will contact social services. A child is defined as under 18 in the UK in child protection guidance. If bullying is involved it is recommended that the researcher establishes that the child or young person has been able to share this with a parent, teacher or other responsible adult, and if necessary enabled to do this. Most organisations that deal with children have a Safeguarding Children policy, for example the Charity Commission (see Figure 2).

Safeguarding is a relatively new term, which is broader than ‘child protection’ as it also includes prevention. Safeguarding has been defined as:

- all agencies working with children, young people and their families taking all reasonable measures to ensure that the risks of harm to children’s welfare are minimised, and
- where there are concerns about children and young people’s welfare, all agencies taking appropriate actions to address those concerns, working to agreed local policies and procedures in full partnership with other local agencies.

Source: Introduction to the Charity Commission’s Safeguarding Children policy (March 2009)

Figure 2 Safeguarding Children policy (the Charity Commission)

Within a safeguarding policy, organisations (such as schools, clubs, etc.) will have a named and trained safeguarding officer with whom responsibility lies to react quickly to any concerns regarding children's safety and well-being. While most child and young person's researchers are CRB (Criminal Records Bureau) checked, there is less likely to be a formal safeguarding policy in place that would be able to respond in the event of reported abuse or harm. The NSPCC has useful guidelines which explain what can be done if there is a concern about a child or young person. We would argue that research organisations that interact with children should have such a policy in place.

Emotional well-being

Perhaps the greatest risk during research is to children's *emotional* well-being (Powell & Smith 2009). Research suggests that exploring issues such as bullying, body image, relationships with friends and family, exposure to inappropriate imagery, drugs, alcohol, sexual health and feelings about being young are all areas that need to be handled with extreme sensitivity. However, increasingly children are asked how they *feel* about all sorts of things and indeed almost any aspect of exploring children's emotions might bring up areas that are difficult for them. Researchers need to be particularly mindful of this given that what children find sensitive may not be the same as for adults. We should not presume to know in advance what may or may not upset a child.

It is not only the subject of the research that can affect children's well-being – it is also important to consider how children may continue to feel after the interviewer has left. Morrow and Richards (1996) point out that ethical consideration should apply throughout a study, not just at the planning stage, and best practice demands that we are responsible for any upset that might be caused during the recruitment process, while the research is in progress and after the study is over. Cohen *et al.* (2007) refer to this in the context of the Milgram experiments,² where those who took part were left with deep psychological impressions that lasted decades. It is therefore recommended best practice that in any research of a sensitive nature, children are given a number they can contact after the research is over, via which they can talk to a trained person about any feeling of unease they might be experiencing. It is also important to ensure that

² These were a series of experiments on obedience carried out by Milgram between 1963 and 1974, where individuals were asked to act as 'teachers' and inflict apparent electric shocks of increasing severity each time a 'student' (played by an actor) gave an incorrect response to a verbal learning task.

participants are appreciated and thanked for their help and willingness to be part of the research project.

The methodology chosen can also impact on children's emotions. Talking to children on their own can make them feel vulnerable, which means that pair or group interviews are often more desirable. Graue and Walsh (1998) suggest that children are more relaxed when with a friend or friends, can help each other with answers and may feel less compelled to find the 'right' answers. While group research can inevitably lead to the bias of 'group-think' it is our experience that interviewing children in friendship pairs or triads is reassuring to them, overcomes any initial shyness the child or young person might feel, and actually allows them to be more natural and spontaneous in the answers they give.

The principle of voluntary informed consent

Informed consent presents particular complexity for research with children for, although codes place great emphasis on the importance of parents or guardians giving informed consent for the child to take part, the child's agreement is equally, if not more, important. Like all participants, children should be regarded as competent before being asked to give informed consent – that is, they should be able to 'make correct decisions if they are given the relevant information' (Cohen *et al.* 2007). However, the notion of 'competence' is complex, and national laws differ over the notion of the age of competence. The UK legal guidance given by the Crown Prosecution Service on using children as witnesses, for example, advises that competence is not related to age (Figure 3). According to the MRS guidelines, parental consent must be given for all children under 16 and researchers should ensure that children below this age are also happy to be involved in the research.

Children

Children of any age can be called to give evidence; their competence depends upon their understanding not their age. As far as competency is concerned the same test is applied to child witnesses as for adult witnesses. There is no additional, non-statutory, test to be applied for children based upon previous attitudes towards the ability of children to give evidence. The principles are encompassed in and governed by statute.

Source: Legal guidance on using children as witnesses, from the Crown Prosecution Service

Figure 3 Crown Prosecution Service guidance on 'competence'

Tinson (2009) notes the difference between ‘consent’ and ‘assent’. ‘Consent’ is when a child has the full right to give his or her autonomous consent (i.e. for market research those over 15 in the UK), while ‘assent’ means a child’s agreement to take part in research in circumstances where he or she is not formally authorised or lacks sufficient understanding to give consent competently. Best practice recommends that researchers should listen carefully to the opinion and wishes of children who are not able to give full consent, in order to ascertain if they are in agreement. All children, even those not judged as competent, have a right to receive information given in a way that they can understand, and give their assent or dissent. This consent/assent process must promote and protect the dignity, privacy and confidentiality of the child and his or her family.

Sometimes it can be problematic for children to really be free to give their consent or assent, however, for although the 1989 and 2004 Children Acts gave children legal rights about how they are treated and a voice in decisions about welfare services they might receive (France 2004; Greig *et al.* 2007), adults inevitably hold a position of power. This is an issue that needs great consideration.

Beyond the issue of competence the ethical principle of voluntary informed consent or assent consists of two equally important considerations. First, ensuring that the child really and truly understands the purpose and nature of the research so that the decision about whether or not to take part is based on genuine choice. Second, ensuring that the child has agreed to take part in the research of their own free will, with no form of coercion in play.

Information that children understand

Information about the research children are being invited to participate in should be put to them in a way that they can understand, and should include the aims and objectives of the research (France 2004). Children at a young age can take things very literally, and can easily get confused by terms such as ‘marketing’, ‘advertising’ and ‘sponsorship’. Researchers should also enter into a dialogue about what will be involved, as well as assuring children that they may withdraw at any time. As children have different levels of understanding it may be necessary to prepare films, cartoons or other stimulus material to ensure that they really know what they are consenting to take part in and why. France (2004) goes on to say that the child should be informed about the research team, and how to get hold of the individuals involved, and they should be assured of confidentiality and autonomy, about the storage of data, and their rights

to access this information. We would add that information about the likely time involved on the part of the child is also important; for instance we might ask children as a 'homework task' to complete a diary of their media consumption, and use this information in the interviews, but this involves a time commitment on their part that they must understand and agree to in advance.

In relation to participant observation with young people, Fine and Sandstrom (1988) advise that, in ensuring that children really understand the purpose of the study, it is worth trying to minimise the power between interviewer and child, although they concede that this is not easy, and can sometimes pose ethical issues of a different nature. One method of reducing power distance may be to include young people themselves as researchers. This can have added benefits, as a New Zealand researcher recently commented (Powell & Smith 2009, p. 130): 'some young people might feel more comfortable to talk to someone their own age and/or these peer researchers might recruit peers that adult researchers might not'. While this works well in some circumstances, the same caution must be deployed. Children can inadvertently upset their peers, making them feel awkward, or inadequate if they are not doing certain activities or have certain items that they feel others might possess. And, as noted above, it is important that peer-to-peer research does not become peer-to-peer marketing.

Consent that is not coerced

Having the right information on which to base the decision about whether or not to take part in research is one thing. Feeling completely free to decide either way is quite another. Children need to know above all else that nothing bad will happen if they do not want to take part in the research. This can be difficult in a school context where a child does not usually have the choice about whether or not to take part in a normal pedagogical classroom activity. However, the researcher needs to work with the teacher to ensure that no child is forced to take part. Likewise, just because parental consent has been obtained, this does not mean that the child has also consented to take part. Equally even if a child initially agrees to take part in research, they must be reassured that they can change their mind at any time.

As noted above if the child is under 16, then a parent must also give consent. This issue is more complex and hard given the current rapid shift from offline to online research as it is tricky to ascertain the age of the

person responding. We know from research with children (e.g. Fielder *et al.* 2007) that, during interactions with companies, many simply give a false parental email address and use this to consent on behalf of their parents to their participation in online activities including surveys. It is important for research companies to realise that this is against both MRS and ESOMAR internet guidelines, which require a child's age to be declared before any further information is gathered, and for parental consent to be verified by an additional means of communication (e.g. telephone or letter) before the recruitment process continues.

Sometimes the issue of voluntary consent from a child is a case of having an 'ethical radar'. A child may say they are happy to take part but their body language clearly indicates that they are uncomfortable and unhappy. In this instance it is important to have built up a rapport with the children so that the issue can be discussed before any research begins.

Incentives are another area that can be difficult to handle. While it is important to thank a child for taking part by perhaps offering a small gift such as a pen or vouchers after the research has taken place, 'cool' gifts or substantial prize draw incentives – too good to refuse – offered in advance of the research could be viewed as forms of coercion, which are against human rights. Incentive schemes where a number of surveys have to be completed in order to receive a reward equally need to reassure the child that they will still receive a reward and can leave the research whenever they would like to.

The principles of confidentiality and privacy

Digital media is opening up new opportunities for researchers but has also presented new privacy and confidentiality concerns. Many youth researchers use online bulletin boards, which are discussion groups that can be linked to a website. Access can be open or can be password secured, allowing for individual 'conversations' to take place. The 'conversation' does not take place in real time, and is similar to an email exchange. There are however concerns about children's understanding of this process. Young people tend to believe that their online exchanges are private and confidential (Clarke 2009), and do not necessarily understand that their comments will be quoted in published material. Equally by taking part in online bulletin boards and forums used for research purposes, children may not have informed their parents. As Livingstone and Haddon (2009) have illustrated, many parents are not aware of what their children are doing online.

Entering the child's home for ethnography can also pose privacy issues, and can potentially cause emotional distress, particularly if conducting research in the even more intimate space of their bedroom – for example, if we are observing or interviewing children about their clothes, toys or digital media. Maddock (2006) underlines the importance of ensuring that parent and child are happy with this arrangement, and that the bedroom door is left open at all times. Again the sensitivities of the child and the adult may be different; personal space is particularly important for example to the early adolescent. It is interesting to note however that a recent trend among young adolescents, especially girls, is to post a home-made video of their rooms on YouTube, illustrating perhaps the naivety that children have in terms of protecting their identity. It seems to us essential that as researchers we do not create opportunities for children's identity to be revealed.

In offline surveys, children are more often worried about their data and they need to be reassured about who will be able to see it. It is also the case that often children would like to be acknowledged for their part in the research. This can best be done by the researcher personally sending a thank you letter to the child. As children rarely receive letters this can be highly appreciated.

Researchers must also be conscious that if the research is published it may receive publicity and leave participants wondering about their anonymity and their autonomy. All data collected should be routinely made anonymous, and children should be asked to choose pseudonyms. Frequently researchers make use of visual material such as film to help understand activities or illustrate our observations. Where this is the case it is essential that any identifying names, places or pictures are disguised.

Are we getting it right?

We can see from the discussion above that applying all of the three core ethical principles poses challenges when conducting research with children. While all good research companies try hard to abide by the code of the MRS, ESOMAR or similar, and most children's researchers are aware of ethical considerations, they may rarely check with children if they agree that they have been treated ethically. Thus, as an industry we may not be able to answer questions such as: How often is child well-being compromised by taking part in research? Do children always truly understand what the research is about and why they have been asked to take part? Do they feel that they made a completely free choice about

whether or not to participate? And do they feel that their privacy and confidentiality has been respected?

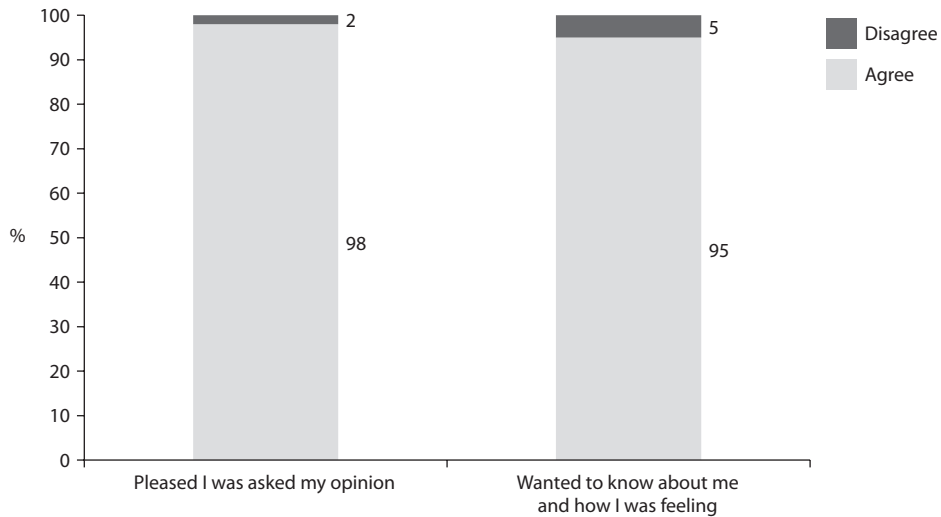
Family Kids and Youth carried out a recent study with adolescents about body image. Aware that this would be a highly sensitive subject and for the purposes of this paper, we wanted to explore how the participants felt about the research. As well as MRS and ESOMAR guidelines, the nature of the research studies we carry out mean that we also need to abide by the codes of BACP and BERA³ in research with children. The study explored many areas that affect young people, such as friendship, relationship with family, and how they felt about the way they looked. The first stage of the study was qualitative, and included friendship triads with 11 to 15 year olds. The second stage of the research was carried out online, and we are grateful to our research partners, Research Now, for allowing us to ask children (at the end of the survey) how they felt about taking part in the research. The respondents were recruited using the Research Now panel of 650,000 panellists. The panel has been recruited from a variety of internet sites and through partnerships with leading brands, to avoid the bias associated with limited source recruitment. The panellists are incentivised for their participation in the survey to help ensure reliable levels of response.

The first part of the study was carried out with mothers, who were told what the research was about, and that with their permission we would also like to talk to their son/daughter, if they would like to take part. Having completed approximately 5 minutes of questioning, we asked, once again, whether their child aged 11 to 15 was prepared to take part in the study. The child then read an explanation of the research and a reassurance that there were no right or wrong answers, and was asked if they would like to take part in the survey. A total of 705 children aged 11–15 took part in the research. The questionnaire was designed by Barbie Clarke, a trained child psychotherapist, and as is good practice in studies of this kind, we gave a link to the young people's helpline Get Connected at the end of the research. We discuss the results of the final part of the survey below.

Right to participation

Children were initially asked if they agreed or disagreed with a number of statements about participation in the survey. Virtually all children (98%) agreed they were 'pleased that I was asked my opinion' and that 'the

³ BACP: British Association of Counselling and Psychotherapy; BERA: British Education Research Association.

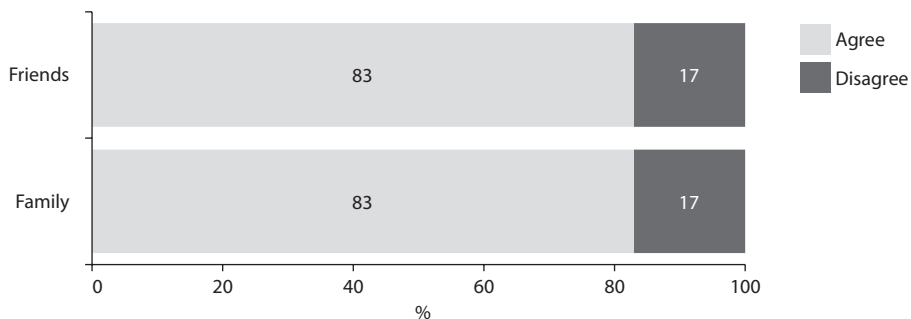


Base: all respondents (705)

Figure 4 Children's views on participating in survey

survey really wanted to know about me and how I was feeling' (95%). It thus appeared to engender feelings of inclusion and empathy.

Children were mostly happy to be asked about their friends and family, and the majority (83%) agreed both that 'I liked answering questions about my friends' and 'I liked answering questions about my family.'



Base: all respondents (705)

Figure 5 Children's views of being asked about friends and family

This accords with other surveys that show how children really do appreciate exercising their right to be consulted (Morrow 1999; Taylor *et al.* 2001; Cashmore 2002; Stafford *et al.* 2003). Robinson and Kellett (2004) discuss the way in which children can feel empowered by

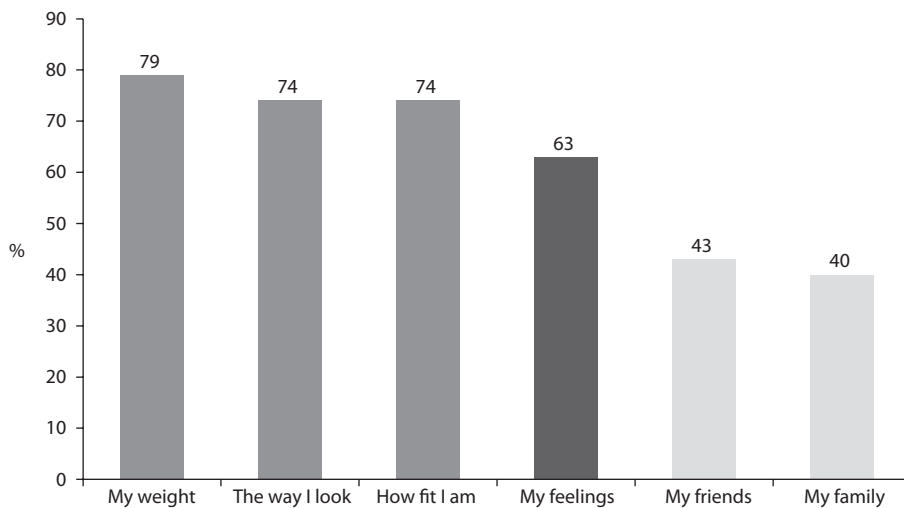
participating in research, thus showing strong child-support for their right to participation.

We reflect on the other results of our research below, under the three ethical principles already discussed.

Well-being

As noted at the beginning of this paper many surveys now ask children and young people about their feelings in particular about issues such as bullying.

This study had dealt with a sensitive area for adolescents, that of body image, and we were concerned to know whether the questions might have left them with a sense of disquiet. Children were asked to indicate which of a number of issues they felt the questions in the survey had been about. They were asked to specify as many or as few as they felt applied.



Base: all respondents (705)

Figure 6 Children's understanding of survey content

Around three-quarters or more each correctly felt the survey had been about their weight, the way they look or how fit they were. Around two-thirds assumed it was about their feelings, and less than half that it was about their friends or family.

All children who had associated the survey with each of the prompted issues were subsequently asked how they felt about being asked about each of those issues on a scale from 1–5, where 5 indicated that they felt very

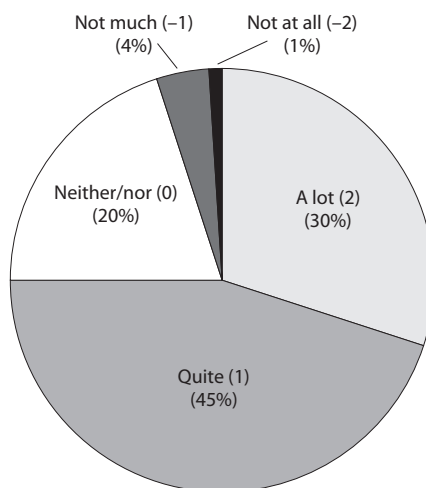
good and 1 not very good. On balance, nearly two-thirds of children felt good or very good about being asked about their friends, their family or their feelings. Around half felt good about being asked about how fit they were or how they looked. Only just over one-third felt good about being asked about their weight, however – with over 1 in 4 saying they did not feel good about it (27%).

Table 1 Children’s feelings about survey questions

	Score 1 or 2 (not good)	Score 3	Score 4 or 5 (good)	Mean
My friends (305) %	5	32	63	3.84
My family (282) %	3	36	61	3.81
My feelings (442) %	6	35	59	3.69
How fit I am (521) %	14	34	52	3.54
The way I look (519) %	10	42	48	3.54
My weight (555) %	27	35	38	3.16

Base: all saying they felt the survey was about each issue

Children were asked finally how much they had enjoyed taking part in the survey. The majority (76%) said they had enjoyed it – although less than a third (30%) said they enjoyed it a lot. Only a small minority (5%) said they did not enjoy it.



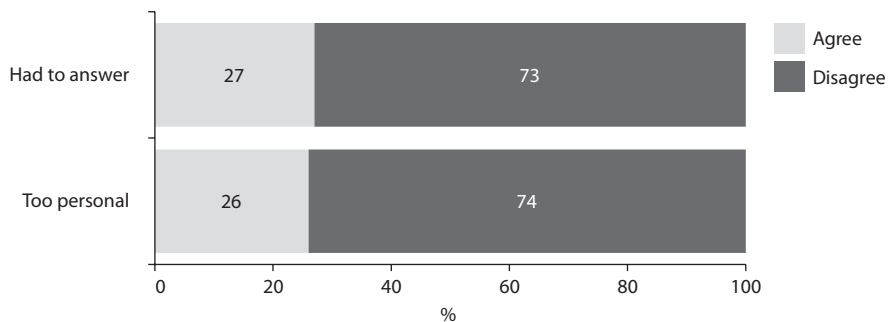
Mean score = 1.00
Base: all respondents (705)

Figure 7 Children’s enjoyment of survey

Voluntary informed consent

In our research children were given an explanation of what the research was about, why it was taking place, that there were no right or wrong answers, and they were reassured that they did not have to take part.

Despite their interest at being asked their opinions and about friends and family, some children did find some discomfort in the questions. Just over one-quarter (27% and 26% respectively) agreed that they ‘felt they *had* to answer the questions even though I didn’t want to,’ and that ‘they found some of the questions too personal’.

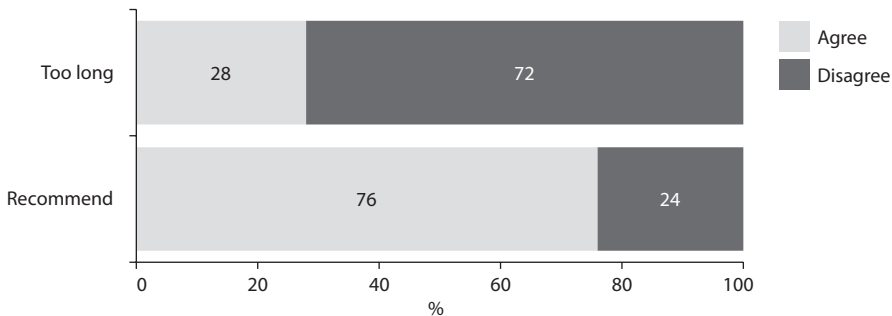


Base: all respondents (705)

Figure 8 Children’s views on personal questions and pressure to complete

This is an area of concern, and emphasises how important it is that children are not only assured that they do *not* have to take part, and that they do *not* have to answer a question if they do not wish to do so, but also that they understand this.

Equally, just over a quarter of the sample said they found some of the questions *too long* (28%), but on the other hand, three-quarters (76%) *would recommend* to their friends that they take part in the survey.



Base: all respondents (705)

Figure 9 Children’s views on questionnaire length and recommending to friends

These questions related to how children felt about completing the main survey, and were asked at the end. Clearly, while the majority of children would recommend the survey to a friend, we need to ensure that we do not ask questions of children that are too lengthy. Research has shown that if children are not committed to taking part in a survey, for whatever reason, they are likely to give negative responses, or not engage at all with the questions (Morrow 2000; Hill & Morton 2003). This provides another more pragmatic reason for ensuring that children do give their *informed* consent to take part in the survey.

Privacy and confidentiality

It has been shown above that while the vast majority were happy to take part in our research, there may be some areas that disturbed children, and that they felt were too 'personal'. This raises issues about how children view privacy and confidentiality in the research that they are asked to do. Hill *et al.* (2004) point out that much research is carried out in schools, and it could be argued that there is an assumption that children will take part in these surveys, many of which ask them challenging questions about bullying, teachers, diet, exercise and lifestyle.

Powell and Smith (2009) asked a network of child researchers involved in health, education, psychology, social work, geography, law and childhood studies to discuss the issues that arose from their experience in involving children in research. The biggest area of debate that arose was the sensitivity of the subject and the discrepancy between what an adult and a child believe is sensitive. This seems to be borne out by our research with children. This group of researchers also felt the greatest challenge was ensuring that children really are well informed about the purpose of the research, and that they are able to decline or consent in a truly pressure-free environment.

Challenges for researchers

Our research showed that the children involved were pleased to be asked their opinion, despite the potentially sensitive nature of the survey. It also indicated that some children were uncomfortable with the questions they were asked. These findings support the views of Graue and Walsh (1998) that it is important for researchers to appreciate that children are smart, that they make sense and that they want to have a good life. Most want to be involved and are quite capable of active involvement but they also

want to be protected. Walsh (1998) argues that acknowledging these characteristics is a vital prerequisite to being an ethical researcher, as he believes that research can be an intrusive act which needs negotiated consent that goes far beyond a signed consent form. He writes of an 'upside down' world (p. 57) where children are suddenly in charge rather than adults for, as a research participant, the child becomes not only a person who can consent but the holder of knowledge that the researcher seeks to understand. Given the complex and unusual position in which the child participant finds him/herself it is crucial not to make an assumption that all of our child and adolescent participants are able to understand why they are taking part in a survey, and that they will not be upset by taking part.

This is particularly so given that a sizeable proportion of any sample of participants may be especially vulnerable. In 2006 the BMA estimated that 20% of young people experienced a mental health problem at some point, and 10% were likely to have a clinically recognisable mental health disorder. While it can be argued that these children can be empowered by being asked their opinion, nevertheless it may be that the increasing emphasis on well-being issues addressed in surveys may be upsetting for some children. This leads us to emphasise the importance of the three ethical principles. Children have a right to be asked their opinion, but their well-being is paramount, they should genuinely have given informed consent, and they have a right to privacy and confidentiality.

Conclusion

As children's role in society becomes more prominent, their participation in research seems set to increase. All research participants have human rights that are encapsulated more or less well in research ethics code. Children are universally treated as a special ethical case and they have been accorded their own special set of human rights (UNCRC), which primarily grants them rights to protection and participation. The core research principles of well-being, voluntary informed consent and privacy/confidentiality thus must be applied to children with particular caution and care. While as market and social researchers we have ethics codes to guide us, applying the principles of children's rights to practical everyday decisions is complex and delicate, and we are all still learning. We need to be attuned to the fact that social shifts will also impact on children's sensitivities and that ethics is an ongoing process rather than a static set of rules.

Commercial market researchers (as distinct from social researchers working for government, charities or universities) must also be aware of the very distinct role that market research plays within the wider marketing mix. Research must never be confused with selling and our codes are set up for research whose ‘purpose is to collect and analyse information and not to create sales or to influence the opinions of anyone participating’ (MRS). Therefore practices such as brand ambassadors, which is clearly a word-of-mouth selling technique, must never be confused with research, and no member of MRS doing pure research with children should simultaneously be running a sales or marketing campaign for the same client.

Future directions

As an industry we need to start to track whether we are fully taking children’s well-being into account when they participate in our research; whether they really do understand what the survey is about, why we are seeking their opinions and what will happen as a result; whether they all feel completely free to say they don’t want to take part; whether they feel research does not intrude on their lives, and that they are reassured and trust us with the data they have given us. While this issue is being addressed to some extent in medical research (e.g. Kafka *et al.* 2011), there is a clear gap in social science and market research literature.

It is vital to ensure that children and their parents trust the agencies that are enabling their voices to be heard. With compliance levels to research diminishing all the time and trust by the public in how organisations use their data at very low levels in many countries (Eurobarometer 2008) if we do not behave ethically with today’s children, we risk completely alienating tomorrow’s adults.

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