Listening with children: Research, Policy and Practice

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Abstract
This paper explores the related concerns of ethics and method in developing child centred research practice. This paper draws from our report, "Investigating the impact on children of witnessing domestic violence - nature and adequacy of child centred services" (Hogan and O’Reilly, at press, commissioned by the National Children’s Office). This research is framed with a vision of children, even those who have experienced violent and fractured childhoods, as being competent subjects in a social world. The main focus of discussion here is the ethical issues involved in including and interviewing children in research which explores sensitive intimate details of their lives. This paper also offers a discussion on methodological dilemmas where key methodological decisions are based on ethical concerns.

Introduction
Irish social policy and legal systems have recently become concerned with children’s rights most notably children’s rights to be recognized as persons. The United Nations Convention on the Rights of the Child (1989), the Child Care Act (1991) and The National Children’s Strategy (2000) together with the establishment of The National Children’s Office and the Appointment of The Children’s Ombudsman have all underpinned the endeavour to give children a voice in their own right. While there has been some recent attention to hearing teenagers voices in research and policy formation The Centre for Early Childhood Development and Education (CECDE) have already
recognised in their research strategy that: “the question of consultation with and empowerment of children in the early years is largely underdeveloped.”

This movement toward including children’s voices in collaborative research, policy and legal provision has created a new demand to have ways of accessing children’s narratives. However, the manner of engaging, listening with and making sense of children’s views remains somewhat challenging. The Centre for Social and Family Research, Waterford Institute of Technology is focused on developing research methodologies that honours and hears the voice of the child as central to research, policy and practice. Central to our previous work (Ferguson & O’Reilly, 2001, Ferguson & Hogan, 2004) is the recognition of the importance of providing children with the opportunity to be included in research about their lives. This paper draws from our report, "Investigating the impact on children of witnessing domestic violence - nature and adequacy of child centred services" (Hogan and O’Reilly, at press, commissioned by the National Children’s Office) highlighting considerations with regard to the ethics of interviewing children in such research and the consequent methodological issues involved.

Developing Child Centered Research; holding children at the centre of domestic violence research, policy and practice

Recent Irish research has highlighted the extent of domestic violence in intimate relationships (Bradley et al, 2002; McKeown and Kidd, 2003; Watson and Parsons, 2005; Buckley et al, 2006) and international studies have focused on the effects of this
violence on children who grow up living with it. However much of this research has focused on the narrative accounts of what professionals and/or mothers have to say about the effect of the violence on children. Much of this research can be seen as being child centred in that its central concern is the welfare, well being and protection of children and as such has been crucial in the development of policy and practice in relation to child and family services. However placing children at the centre of research on their lives is quite significantly different where their views and experiences of having witnessed domestic violence are directly explored; Privileging children’s narratives, interviewing children about their experiences of living with domestic violence, asking them how they felt the violence impacted on their lives as well as about the services they did or did not receive and what recommendations they would make for policy and practice development concerns viewing children as active agents in contemporary Irish society.

This paper is framed with a vision of children, even those who have, as in the case of our study, experienced violent and fractured childhoods, as being competent subjects in a social world rather than deficit objects to be randomly abused and manipulated. Notwithstanding this attitudinal disposition towards children, as researchers we struggled with issues of ethics, method and engagement and offer these struggles here in an attempt to further the development of collaborative research with children.

**Aims and Objectives of this Study**

The central focus of this research was to gather original narrative accounts from children who have lived with domestic violence exploring (a) their experiences of the violence itself and (b) the types of service responses they found most helpful.
Methodologically our study employed qualitative in-depth interviews with a purposive sample of key professionals (n=15), mothers (n=20) and children (n=22). Interviewees were sampled through women’s refuges and support services after a careful process of negotiation with gatekeepers. The sample of children consists of 22 children and includes 13 females and 9 males ranging in age from 5 – 21 years. These 22 children were members of 15 households, 10 of the children had either recently stayed in a refuge, or were currently in refuge at the time of the research interview, 11 children were accessed through community support services and one child was accessed through a residential unit. The sample reflects three distinct (if small) subgroups of children; (1) 7 of the children were aged between 5 – 11 years; (2) 12 children were aged between 12 and 17 years, and (3) 3 ‘children’ were young adults aged between 18 – 21 years, who reflected on their childhood lives growing up with domestic violence as a constant in their lives and the service responses.

**Ethical issues involved in interviewing children**

Sound ethical practice governing the inclusion of children in non-medical research has received very little attention until recently (Greene and Hogan, 2005; Guirin and Heary, 2006). Given the nature of this study ethical considerations were paramount. The study was granted ethical approval from the Waterford Institute of Technology ethics committee. Key ethical issues that we attempted to foreshadow were (1) Children’s informed consent (2) Issues of confidentiality (3) Limits to confidentiality / child protection concerns (4) Recognising the possible impact of interviews on children.
**Informed Consent:** Perhaps one of the most challenging ethical concerns is obtaining children’s informed consent. This raised questions such as; do children really understand the aims of the research? Do they feel able to refuse or compelled to participate as a ‘favour’ to a gatekeeper whom they have a relationship with? At what age can children make informed decisions? Hill (2005) points out that some researchers (although few) have rehearsed with children how they can say no. In this study, preliminary discussions with children provided a space within which children could say no. In terms of at what age a child can make an informed decision to participate in research Weithorn and Sherer (1994) suggest that younger children will need very careful explanations on the research process however 'it is wrong to assume that younger children are incompetent to assent. Alderson (1995) highlights how children’s agreement to be involved in research must be open to review at all stages of the process. Thus we were extremely careful to practice process consent, whereby children can and indeed did exercise their right to withdraw from the study at any stage. Mothers and children were reminded as the interview progressed of their choices around what they were comfortable discussing. As outlined by Morrow and Richards (1996) ethical issues were considered at all stages of the research, ‘they are not simply a preliminary stage or hurdle to be got out the way at the beginning, (Hill in Greene and Hogan, 2005: 65). Mothers and children were informed that they could terminate the interview at any stage, should only talk about issues they felt comfortable with, and should ask the researcher to ‘explain more’ or ‘move on’ if any particular questions were uncomfortable. Interviews were driven by the children themselves in terms of content and duration.
Confidentiality: Issues of confidentiality in social science research includes ensuring the anonymity and privacy of interviewee’s details and narrative. In discussing confidentiality with the children themselves we carefully explained the aims of the research, who was commissioning the research and why, that the interview would be taped and typed by someone other than the researcher. Assurance was given that only the researchers and the typist would have access to the transcripts however we did clearly inform children that what they told us would be put into a report. It was extremely important to make children aware that what they told us would be placed in the public domain, albeit anonymously. Children were assured that what they told us, the researchers, would remain confidential. Children were also informed that what they said would remain anonymous in the final report.

Limits to such confidentiality/ child protection concerns: Limits to confidentiality were also explained in advance of the interview with all participants including when child protection and issues of risk and safety are concerned. Within the Centre for Social and Family Research at WIT we adhere fully to the child protection guidelines outlined in the Department of Health and Children’s (1999) Children First: National Guidelines for the Protection and Welfare of Children. Thus as part of the process of seeking written informed consent we explain that where a child protection issue is raised with us in the interviews we will join with the interviewee in reporting the issue to the Health Services Executive.
Recognising the possible impact of interview with children: Given the sensitive nature of the interviews themselves and how we wanted to ask children about their experiences of living with domestic violence and also living with the range of service responses, including living in refuge accommodation, we were conscious that such interviews may ‘bring things up’ for children and we were concerned to hold the interviews in a way that did not further hurt the children. A key ethical concern (of both the researchers and the gatekeepers- see discussion below) was the potential to damage children through the research process. However we firmly believe that the time spent explaining and discussing the research with the children prior to the interview, the reassurance offered throughout the interview, and the time spent with children post interview, meant that every effort was made to minimize any potential negative impact. Notwithstanding these strategies, as researchers we can never guarantee that the research interview will not have a negative effect. However to exclude children from such research on such grounds denies children a voice in hugely important debates about their lives. Ultimately, this research empowered children to make decisions for themselves about their participation and what that participation involved.

These central ethical considerations had a direct influence in how we developed our methodological approach to the research project where key methodological decisions are based on ethical concerns.

Methodological Dilemmas
The aims of our study required a methodology that allowed us to draw on the experiences of a strategically designed sample of children, mothers, and key professionals. A qualitative approach was adopted, through the use of in-depth interviews, which provided rich contextualised data from children on their experiences of living with domestic violence and domestic violence services as they relate to children. Given the sensitivity of the subject area, other qualitative methods such as focus groups were considered potentially limiting. According to Greene and Hill (2005) individual contacts with children are generally preferable for the exploration of personal issues, as children may be reluctant to discuss such issues in a group setting.

**Access / Gate Keepers:** The sampling framework utilised purposive sampling which is designed to enhance understandings of selected individuals by selecting ‘information rich’ cases, that is individuals, groups, organisations, or behaviours that provide the greatest insight into the research question’ (Devers and Frankel, 2000:264). Thus, the first phase of our recruitment was to purposefully target children, through their mothers, via the professionals working with victims of domestic violence. Before we met with any children we first had to meet with, and discuss in detail our research with two sets of gatekeepers, service providers, and children’s mothers. In doing this we also gathered rich data on this subject from both groups (which we draw on in detail in the full report). While this process was both a necessary and time-consuming way into children’s lives, it was not particularly fruitful in ultimately gaining access to children. In effect, negotiating two stages of gatekeepers in this way doubled the possibility of being refused access to children. In the first instance, professionals differed in who they judged as being suitable
mothers to refer to us; some believed that women and children currently living in a refuge were ‘too vulnerable’ to be interviewed for research. Other professionals felt that it was unethical to contact women and children who had left the refuge, either because they had returned to live with the violent man, or because the professionals wanted to allow the women and children bring some ‘closure’ to their experience. The complexity of ethical concerns resulted in a gatekeeper filtering process which ultimately dictated the overall sample profile. In general however we found that where mothers and service providers did support and encourage the children’s participation in the research the children were more likely to be involved, though children did make decisions not to talk with us also.

Setting and presence of other staff: All of the interviews were carried out in a site of the child and mothers choosing, thus we held interviews in rooms provided at refuges, community centers and children’s homes. We introduced ourselves to the children in the presence of their mothers and as part of seeking their informed consent we gave them the choice of being interviewed by either of the researchers (male or female) but we did not notice any discernable pattern in their response, most children said they did not mind. We offered to interview them in the company of their mother if they wished, but again children did not opt for this and interviews with them happened in rooms next to where their mothers were being interviewed.

On a few occasions staff in the refuge service asked to sit in on the interviews with the children, explaining this as their wish to protect the child, in discussing this ‘condition’ to access via the gatekeepers we were careful to try to better understand who’s needs were
being met in such a request. When children requested their presence we welcomed staff into the interviews, we also made clear that mother and staff may enter the interview room at any time and on occasions we were most grateful of the assistance of staff in minding other children when we were busy interviewing mothers and siblings. The availability of relevant child care professionals post interview, should children be distressed by the research, was identified as an ethical requirement. All agencies that provided access to women and children were requested to provide such support, with any associated costs borne by the research. In some cases child care workers accompanied the researchers to children’s homes or were available to meet with children in the relevant agency.

Conclusion

Children’s capacity to reflect on their (sometimes painful) experiences was evidenced in this research. Accessing and utilising such reflections requires very careful consideration. Ethical issues were always to the forefront of this research, to the extent that key methodological decisions were made solely on ethical grounds. Notwithstanding these ethical concerns the importance of understanding children’s experiences, of often traumatic situations, from the perspective of the child cannot be over estimated. The voice of the child, in this research, has made a huge contribution towards our understanding of the impact of domestic violence on children and how we best might protect children and promote their welfare.
The importance of including children in research as active agents rather than passive subjects is now recognised. The challenge for social researchers is to explore children’s private experiences and present them for public debate using non-intrusive and safe methods.

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**References**


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