Questions of Ethical Responsibility in the Research of Unaccompanied Minors

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Abstract

This paper presents a general discussion on ethical considerations in qualitative research in the applied social sciences. It reflects on the ethical dilemmas posed to this researcher prior to initiating a field-work process and during the methodological structuring process. The intention is to promote discussion on issues of ethics when researching new types of service user groups with attention to the value of ethics committees.

1 Introduction.

Both qualitative and quantitative paradigms in social science research lay weight to ethical considerations in the research process. As researchers we evaluate and consider power relationships. We do this by creating the means to question our social realities and social relationships where we then analyze, measure and account for societal relationships and phenomena.

Statements like these find uncomfortable seats next to those concerning the manufacture of power in the social sciences. The accepted constitutions of ethical responsibility that exist within each social scientific community, the laws by which scientists abide by to protect their research, the respondents and the social milieu in which they are situated, are central in assessing how searching for truths in contemporary science can affect individuals and communities for better or worse.

This paper aims to contribute to discussion concerning issues of research ethics in the applied social sciences, notably with reference to a new social care service user, the unaccompanied minor. It seeks to consider that with an increasing number of ethnic minority communities establishing themselves in Ireland, ethics as an element of research practice needs to be further investigated. Its purpose is not to review the extensive literature available on research ethics but to consider ethical issues that may evolve out of a research process involving an unaccompanied minor service user. This paper cannot aim to evaluate what ethical conflicts have emerged whilst in the field as this phase of data gathering has not yet commenced. However, it seeks to examine the conflict that occurs when researchers have to presume certain

ethical guidelines are appropriate, prior to engaging with the service user, while all the time uncertain as to how their role in the process may affect the service user.

II Ethics in the Social Sciences

Social science research by its very nature is a tool or collection of tools designed to gather information and generate knowledge about people and their social lives. In addition to this it sets out to gather information and generate knowledge about society itself and the structure of social relationships. Sarantakos' (1993:17) defines three basic motives in the gathering of data. The first motive, 'educational', sets social research on a path to *educate* the public so that it can form a 'qualified opinion on the issue studied.' The second, 'magical', involves offering *credibility* and *respect* to certain views 'through statistics or even the mere presence of findings.' Finally, 'tactical', aimed at 'delaying decision or action' for as long as the research is underway.

The aims or driving forces of most types of social research vary with each researcher and their research question, however Sarantakos (1993:16) identifies nine main aims that researchers usually refer to:

To *explore* social reality for its own sake or in order to make further research possible.

To *explain* social life by providing reliable, valid, and well documented information.

To *evaluate* the status of social issues and their effects on society

To *make* predictions.

To *understand* human behaviour and action,

To *emancipate* people.

To *suggest* possible solutions to social problems.

To *empower* and *liberate* people.

To *develop* and/or *test* theories.

What these aims may suggest is that social scientific research is a dynamic process where the epistemological contributions to society outweigh problems or hardship caused by the research process. There are cautionary tales however, within the social sciences as to how research practice can adversely affect the participants or the community in general.

Holloway and Walker (2000:71) examine the importance of ethical issues in the social care research process and provide a case study revealing damage to research participants. They explain:

> "*A study by Langer and Rodin (1976) set out to examine the effects of giving more control over volunteer visitors to elderly people in residential care settings. By the end of the study, the group that had control over the visits were less depressed and more active than the control group. However, on returning a year later, the research team were shocked to find that the death rate in the experimental group during the intervening period was double that of the control group and those still alive were more depressed.*"

This example is used by Holloway and Walker to highlight some unforeseen effects of 'interfering' in peoples lives for the purposes of 'well intentioned' research. Ryan (1997:3) cites Kellehear's (1989) experiences of ethical concerns that emerged as a result of interviewing the terminally ill, where she points to the need for researchers to recognize that the nature of some research questions may provoke responses that are 'traumatic' for participants.

There are generally accepted ethical standards in professional research practice that span the majority of research communities, from Europe and the United States to Australia and New Zealand. Many of these standards are borrowed or evolve from public documents like the Charter of Fundamental Rights of the European Union, Ratified at Nice in 2001, the UN Convention of Human Rights, The Helsinki Declaration, the Sociological Association of Ireland' s Ethical Guidelines and General Principles, to name but a few. If National Standards for individual countries fall short of detailing ethical considerations for specific groups, or researchers are not required to submit research questions and methodologies to university or other ethics committees, self-regulation is accepted as the norm. However many individual third level institutions and research centres produce their own codes, normally based on those accepted by the wider research community.

In Ireland, no centralized Government forum or council exists within the social sciences that might consider ethical issues in the research of humans and their social worlds. The 'Sociological Association of Ireland' however, use and base their codes of research practice on those produced by the British Sociological Association, the American Sociological Association, and the Australian Sociological Association. General principles cited by the SAI (2001:1) include:

- Professional Competence
- Integrity
- Respect for Human Rights, Diversity and Equality

- Social Responsibility

Dublin Institute of Technology has gathered some of their ethical guidelines for students from the Helsinki Declaration 1964 (amended 2002) and the International Code of Marketing and Social Research Practice (1995). D.I.T's Ethics Research Committee has strict procedures in place where all researchers must submit an ethics declaration along with their proposal.

All research involving pharmaceutical preparations, pregnant women, women in labour, persons under the age of 18, persons with physical or mental disabilities, or other vulnerable categories or members of ethnic or other minority groups must present an ethics declaration. The sitting committee assesses and evaluates each proposal before accepting or rejecting a student for registration.

Some institutions have quite structured and phased evaluation systems where research proposals are scrutinized by what that SAI might define as Professionally Competent committees.

Harvard University has in place a standing committee that serves as the institutional review board for the faculty of arts and sciences. With a flowchart detailing ethical considerations integrated into its system, each researcher must consult and determine if their research question and proposed methodology require panel review.

As it stands, if my research in the area of Unaccompanied Minor Service users was initiated in Harvard University, I would be obliged to submit to the ethics committee for review at phase 1 of the chart. 'Minimal risk' as stated above also includes the possibility of causing 'mental harm or discomfort' which as discussed earlier is difficult to establish prior to engaging with this unique service user in the field.

While standards like these are there and available to peruse as a researcher, ethical considerations that emerge before or throughout a research process are often only regulated by the researcher alone, or in consultation with their supervisor. This usually occurs in institutions that do not have resident committees to sanction research.
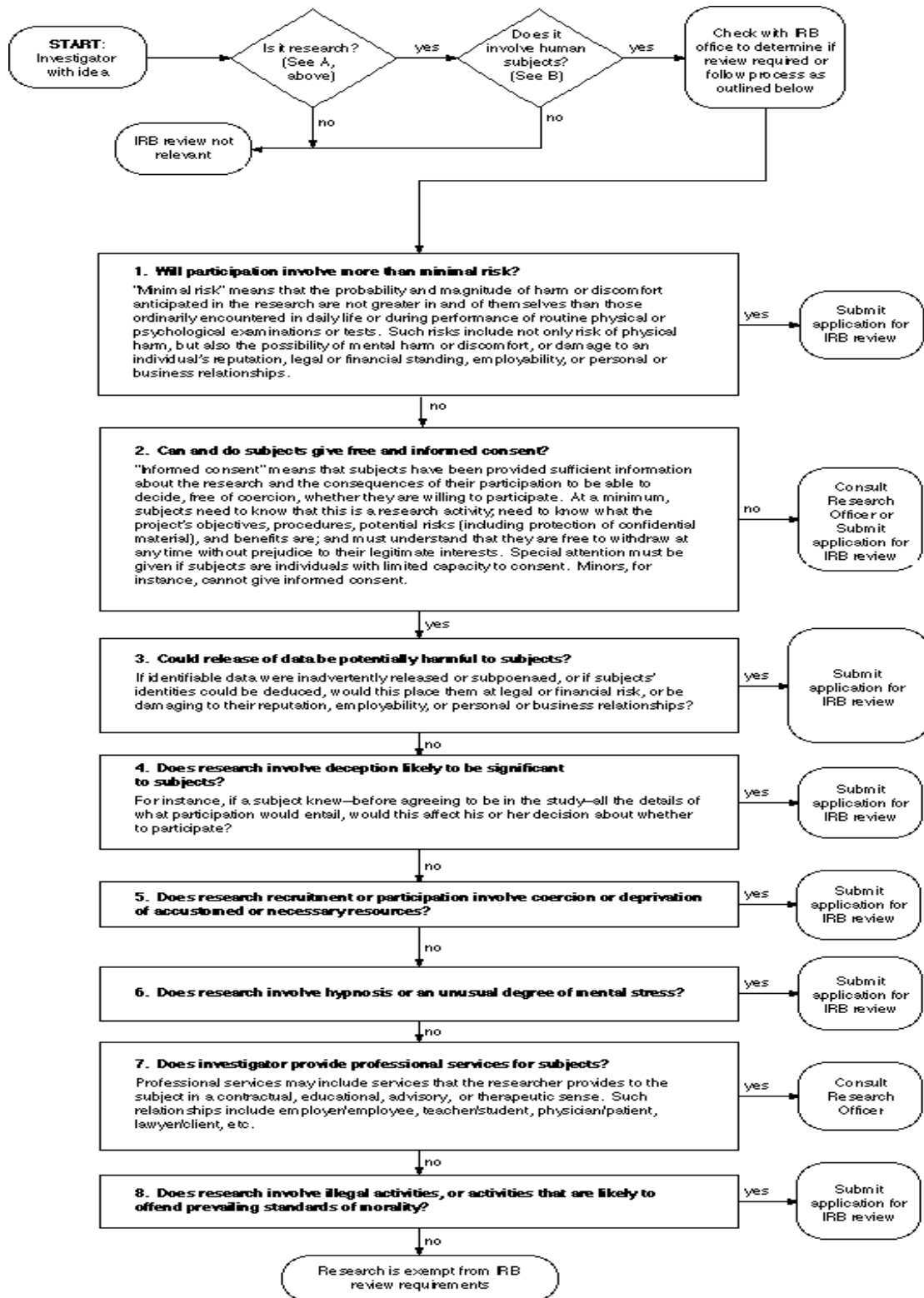
Figure 1: Harvard Human Subjects Committee Flowchart

(Source http://www.fas.harvard.edu/~research/flowchart.html)

III Unaccompanied Minors

The Irish social science research industry is busy and minority ethnic communities as Ryan (1997:2) comments are 'increasingly the subject of research undertaken by students at universities, professional researchers and researchers commissioned by government agencies.' So what of the unaccompanied minor as a 'research subject'? What ethical questions emerge when looking at the status and social life of this social care work client group, from a research perspective?

Unaccompanied minors have been defined by 'The Separated Children in Europe Program' (SCEP) (2000:3) as:

> "*Children under eighteen years of age who have been separated from both parents or their previous legal or customary caregiver. Separated children (unaccompanied minors) may be seeking asylum because of fear of persecution or the lack of protection due to human rights violations, armed conflict or disturbances in their own country. They may be victims of trafficking for sexual and other exploitation, or they may have traveled to Europe to escape conditions of serious deprivation.*"

While this definition is generally accepted at a European level each member state may have its own definition. In Ireland, the East Coast Area Health Board (ECAHB) (2002: 66) defines this service user group as 'children under the age of 18 who are identified as being unaccompanied by their parents/guardians or customary caregivers when they arrive in Ireland to seeks asylum.' The ECAHB is primarily responsible for the total care needs of these service users including the provision of 'appropriate, immediate and ongoing care placements and social, medical and psychological services,' as well as family tracing services. Veale et al (2003:16) identify these children as having a consistent profile of 'emerg[ing] from countries experiencing armed conflict, political repression or the breakdown of civil society.' If one can assume from Veale et al (2003:16) the UNHCR (2001:2) and the SCEP's (2000) Statement of Good Practice that this client group is in fact vulnerable, ethical considerations take on added dimension.

Ryan (1997:1) clarifies the position of the role of the researcher when engaging in the evaluation of research ethics or ethical responsibility. She contends that, 'essentially research ethics refer to the responsibility of the researcher to ensure that the participants in the research are not harmed by the research.' She continues, 'hence it is the responsibility of the researcher

to ensure that he or she has fully explicated the possible intended and unintended consequences of the research being carried out.'

What one can ultimately discern from this statement is that each social researcher has relative autonomy over the methodological strategies that they wish to employ. Sarantakos (1993:21) confirms this, defining the process as one that is based on 'mutual trust and cooperation as well as accepted conventions and expectations.' He pushes the issue further here stating that, 'on the basis of this, researchers enter the field with relatively few limits and many options for action.' While this freedom provides 'great opportunity,' he argues, 'it can also have an adverse effect on participants.'

Understanding the adverse effects of research on participants, namely the unaccompanied minor service user in this case, requires analysis of principles governing the researcher-respondent relationship. Sarantakos (1993:24) delineates these carefully, considering:

> Proper identification
> Clear outset
> Welfare of the respondent
> Free and informed consent
> Right to privacy
> Right to anonymity
> Right to confidentiality

While all of these are pertinent to research that involves the study of human beings in both the natural and social sciences, issues can arise when research subjects do not possess a traditional voice or a vocabulary conducive to effectively questioning the incentives of the research community. Ryan (1997:2-3) identifies this within the traveling community in Ireland where she claims that as a consequence of little formal education, members of this community possess minimal technical vocabulary, and as a result have little power with respect to how research is carried out and how the data is disseminated. She argues here that research communities should have regard for the impact of research and concern themselves with the ways in which research can 'affect the researched communities.'

So what of my role as a researcher when qualitatively engaging with a new type of service user in the applied social sciences? Where do I fit into the process? What part will I play in constructing the knowledge? Will my very presence negatively affect the service user? Will my

presence, for example, raise questions in their minds as to their environment, identity, status, or security? Will my presence cause alarm, anxiety or even stress? Could this consequently affect the validity of the data? How will dissemination or publication of the findings affect the service user or indeed the service providers? As a researcher, how do you rationalize shifting balances, affecting policies, affecting change in standards of living, standards of care, moral codes and inbuilt practices? And what of the service user group? As Ryan (2003:4) argues, 'what happens when elements of research could be used to discontinue funding?'

With these types of questions in mind, there are no accepted ethical principles or standards exclusive to this service user type in Ireland, simply because this field is as yet relatively unexplored in the Applied Social Sciences. There are no guidelines as to what effect the researcher may or may not have on issues like identity, sense of security or levels of stress in the service user. What has emerged as part of the preliminary analysis is a sort of 'chicken and egg scenario'. This service user group has not yet been qualitatively researched in an Irish Social Care setting so there are no unique ethical guidelines that have emerged as a result of peer reviewed findings. So it may be that only after a data gathering process involving critical self-reflection is complete, that these ethical considerations emerge and guidelines for this service user become available. As it stands, this paper cannot aim to evaluate what hasn't yet been done.

IV Consent

Issues of consent are pertinent considerations when engaging in social science research. The Australian 'National Health and Medical Research Council' (NHMRC) (2002:1) look at this quite well, extensively evaluating ethical concerns relating to children as significant participants. While they are in general agreement with the premise that research is necessary in order to advance knowledge, they argue that research should only be conducted with children when certain criteria are met.

With respect to Sarantakos' fourth principle of *free and informed consent,* the NHMRC (2002:2) concerns are interesting considerations. Outlined in the Human Research Ethic Handbook, the National Statement on Children and Research requires that 'the child's consent be sought if he or she is able to make a decision.' This raises a number of concerns with regard to statutory law in Australia where ultimately, the National Statement admits to contradictions between research laws and statutory requirements. In addition to this, questions concerning 'consent to research' if the child is not in a position to make a decision appears to be left exclusively with the parent(s) or guardian(s) of the child. Ultimately however, it is taken for granted that the parents or guardians of the child should be approached before the child is

approached. In the case of children accommodated by statutory organizations, consent is required from those who have a legal duty of care to the child, in addition to the child themselves. McCauley and Brattman (2002:27) look at this in an Irish residential care context and question the appropriateness of seeking consent from care professionals who work with these children. Requesting clarification, they argue that it arises "*in particular with children and young people experiencing poverty and/or other forms of social exclusion.*"

Of those unaccompanied minors in Ireland who cannot consent to participating in a research process due to age, communications difficulties etc. are dependent on their care managers to provide consent on their behalf. With this in mind, managers are then the 'last bastion' of access. These personnel can in themselves act as research ethics committees where the researcher must provide declarations of ethical propriety. In the case of researching minors who's sole guardians are the state, it is to be expected that individual care managers will require evidence of good ethical consideration prior to access being granted.

V Conclusion

Unaccompanied minors have been traveling to Ireland in greater numbers from 1999 to the present day. As a result Irish based research projects that began around this time may only start to emerge over the next few months and years. Data and methodologies employed may reveal ethical concerns and considerations that are unique to this client group and their social worlds. If and until this evolves, research can only follow the ethical guidelines established by the greater research community or develop their own set of ethical guidelines with respect to the client.

When questioning ones ethical responsibility with regard to researching this client group, there is a need to strike a balance between the ethical dilemmas and the search for knowledge that may lead to improvements in the provision of care. Remembering my ethical dilemmas delineated in section II, the questions remain. Will my presence cause alarm, anxiety, and stress? What part will I play in constructing knowledge? Will my presence raise questions in their minds as to their value, identity or security? How do I marry the human, emotive *me* with the academic, scientific *'me'*. How do I reconcile these ethical concerns with my humane research objectives? The objectives here, being a desire to seek improvements in conditions and policy, and to provide generalisable knowledge to educators and students of social care in the applied social sciences.

Whether research simply contributes to implementing strategies of good practice, or whether it fundamentally alters relationships, locating the epistemological gaps with regard to ethics should be central to the agenda of the social research scientist.

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