

Research and Child and Adolescent Mental Health: Ethical Considerations
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Abstract:

The purpose of this paper is to explore ethical research practice in the field of child and adolescent mental health and in doing so contribute to the overall development of the research capacity of mental health practitioners and researchers (Gould, 2010). Social work practice is changing; research is now an integral part of practice. The need for practitioners to be able to engage in research is becoming more important both for clients, organisations and communities. We should assume that research and practice are not mutually exclusive and that as practitioners, committed to social justice and human rights, we are also social researchers who embrace these same commitments. This paper explores the link between socially just practice, research and ethics; and highlights the political nature of not only knowledge creation but also the relationship between researcher and researched. The paper concludes that our commitment to our clients and their communities is strengthened not only by an evidence base but also ethical research practice that embodies and manifests the principles of human rights and social justice.

Paper:

Knowledge is never innocent or neutral. It is a key to power and meaning. (Morton-Robinson, 2000, p. 93)

Social work practice is changing; research is now an integral part of practice. The need for practitioners to be able to engage in research is becoming more important both for clients and organisations. Rubin and Babbie (2005, p. 5) point out that:

Even if you never consider yourself a researcher, you are likely to encounter numerous situations in your career when you'll use your research expertise and perhaps wish you had more of it. For example, you may supervise a clinical program whose continued funding requires you to conduct a scientific evaluation of its effects on clients... You may be involved in community organizing or planning and want to conduct a scientific survey

to assess a community's greatest needs... You may be engaged in social reform efforts and need scientific data to expose the harmful effects of current welfare policies and thus persuade legislators to enact more humanitarian welfare legislation.

The Australian Association of Social Workers states that: "Research is key to the continued development of the theory and knowledge base of social work practice" (2008, p. 6). This professional practice standard emphasises the importance of the creation of an evidence base to inform our practice; that as social work practitioners we continue to monitor and evaluate what we do in a structured way; and that through these processes we are accountable for the quality and effectiveness of our practice. Practitioners also need to undertake research to determine the needs of clients, to test new ideas and to confirm practice wisdom. Research underlies the accomplishment of all of these expectations. It is also worth remembering that research is not clear and straight forward, nor is it tidy and uncontroversial.

As practitioners in the in the child and adolescent mental health field we are committed to socially just practice that aims to make a positive difference to in the lives of our clients and their communities. Further, we have the belief that "human rights are important, and that they are particularly important for those in the human service professions in general, and for social workers in particular... human rights can provide social workers with a moral basis for their practice..."(Ife, 2009, p. 1). We should also assume that research and practice are not mutually exclusive and that as practitioners, committed to social justice and human rights, we are also social researchers who embrace these same commitments. Such commitments assume a connection to ethical research practice.

The National Health and Medical Research Council (1999, p.1) clarify the role of ethics in social research:

Ethics and ethical principles extend to all spheres of human activity. They apply to our dealings with each other, with animals and the environment. They should govern our interactions not only in conducting research but also in commerce, employment and politics. Ethics serves to identify good, desirable or acceptable conduct and provides reasons for those conclusions... The primary purpose of a statement of ethical principals

and associated guidelines for research involving humans is the protection of the welfare and the rights of participants in research.

Codes of ethical research practice with human participants were originally established in the Nuremburg Code, adopted during the Nuremburg Military Tribunal held after World War II (Neuman, 2011). These codes were enshrined in the Universal Declaration of Human Rights in 1948, and form the basis of current ethical practice in social research. Central to the codes of ethical research practice is the notion of informed consent. That is at no time should research participants feel coerced into participating in the research: "It is not enough to get permission from people; they need to know what they are being asked to participate in so they can make an informed decision" (Neuman, 2003, p. 124).

Research today, as in the past, involves ethical dilemmas. Glesne and Peshkin (1992) refer to the complexity of ethical considerations in research noting that a brief acknowledgment of ethical standards at the commencement of a project is not enough. All interaction throughout the research project should be viewed in the context of ethical behaviour. Ethical considerations are positioned within the context of power relations, most commonly between the researcher and the respondent. There are a number of strategies the researcher can use to promote an ethical research process: acknowledgement of the impact of power and difference; reflexivity; attention to research practices; and the adoption of protocols for ensuring ethical standards are adhered to (Hesse-Biber and Yaiser, 2004). Of course some theorists (Roberts, 1981; Oakley, 1999) have wondered if ethical research is even possible since all research is embedded in oppressive material realities. Nevertheless, the researcher, acknowledging the complex contexts within which research is undertaken, should prioritise ethical research practice. Ramazanoglu and Holland (2002) specifically suggest: "You will need to work out your ethical position in relation to the researched, your accountability for the research, how you should present yourself (and) what the researched are to be asked to consent to..." (p. 157).

Further, I argue, as ethical social researchers we should be concerned with issues of power and, specifically, how patterns of domination and subordination are reproduced in the relationship between the researcher and respondent. Positivists accept the implicit authority of the researcher, failing to acknowledge the potentially exploitative nature of the research relationship (Oakley, 1981; Stanley and Wise, 1983). The taken

for granted superiority of the 'objective' scientific mind concerned early critical theorists such as Horkheimer, who challenged the apolitical, ahistorical positioning of the scientist claiming that the scientist and the person should not be separated (Stanley and Wise, 1983; Horkheimer, 1989). Implicit in this separation is a failure to recognise that the scientist is embedded in oppressive social structures and is implicated in supporting and reproducing oppression. Dismantling these power relationships is a primary task for social researchers. The unchallenged researcher and researched relationship is like a "... colonial power relationship – the oppressor defines the problem, the nature of the research, (and who is researched) ... Research is inherently value laden and reflects the power structures within which the research exists" (Hesse-Biber and Yaiser, 2004, p. 107).

Thus far I have acknowledged the link between socially just practice, research and ethics; and highlighted the political nature of not only knowledge creation but also the relationship between researcher and researched. I have noted that ethical research should occur within a framework that is sensitive to politics and power. I have also provided a brief history of research ethics and noted particularly the importance of informed consent. I argue that all these considerations are vital to our exploration of ethical research within the area of child and adolescent mental health.

Child and adolescent mental health research is important. A review of child and adolescent mental health literature reveals extensive reference to research in the field. The research varies and is large and small scale; primary and secondary; quantitative, qualitative or mixed method. Its relevance to the field is unquestionable. Srinivasa Murthy (2011) acknowledges the contribution of research to our understanding of mental disorders and notes that: "This new knowledge has continuously supported the development of mental health programs" (p. 104). Research not only describes the practice field it also provides the evidence on which to base our practice and is a mechanism for linking theory and practice. Such links "stress the important relationship between research and practice effectiveness" (Trevithick, 2012, p. 57).

When we specifically consider undertaking research in the field of child and adolescent mental health – whether our research is with clients, practitioners, agencies or governments – our priority is to embed our research activity in ethical principles that acknowledge politics and power and principles that value of human rights and social justice. But what strategies can the researcher use to ensure that their research practice

reflects these principles and values? A number of authors have provided guidance in this area and recommended that the basic tool in this process is reflexivity. Reflexivity refers to "... the tendency to reflect upon, examine critically, and explore analytically the nature of the research process" (Fonow and Cook, 1991, p. 2). Hesse-Biber and Yaiser (2004) argue that reflexivity is a powerful tool for recognising the researcher's own social position and assumptions; and reflexivity is the first part in the process deconstructing the authority of the researcher. They recommend researchers convey their own positionality to respondents and to the research audience. The researcher should also engage in processes that promote collaborative research – "This includes building on the existing achievements of service user researchers in initiating and leading research collaborations..." (Gould, 2010, p. 180). The principles of collaboration and reflection should guide and inform all research in the child and adolescent mental health field.

I also argue that child and adolescent mental health researchers particularly value opportunities for clients to tell of their own experiences, to share clients' knowledge and to explore experiences relevant to client's lives. Research that articulates these values assumes that some of the research in the field of child and adolescent mental health will involve primary research with clients. It is imperative that we consider the vulnerability of young people who have a mental health condition and the implications of this vulnerability for research protocols. Informed consent is at the heart of our considerations. Informed consent assumes the following:

- *The person making the decision must be able to understand the necessary information and be able to use that information to reach a decision.*
- *The person must know all the necessary facts, be offered all available choices and be aware of any risks associated with these choices.*
- *The person must reach a decision voluntarily and not because they have been coerced into it (O'Connor, Wilson and Setterland, 1998, p. 228).*

It is important that we recognise that our clients' status as children and adolescents with a mental health condition may diminish their capacity to give informed consent to participate in research projects. Their capacity to understand the nature and intent of the research may also be diminished. As practitioners we must recognize that in relation to our clients we are in a position of power – after all we may control the resources on which their well-being depends. In such circumstances consent by clients to participate in our research may at best be un-informed and at worst given in a context of fear of significant negative consequences – amounting to a perception of coercion. As

practitioners and social researchers we must recognize the general principle that “It is unethical to involve ‘incompetent’ people (e.g., children, mentally disabled) in our study unless we have met two conditions: A legal guardian grants written permission, and we follow all ethical principles against harm to participants” (Neuman, 2011, p. 151). In India, as in Australia, we must of course refer to our country specific ethical research guidelines. Although, generally, meeting these requirements would mean, for example, that we reflect on our position of power and the impact of that position on potential respondents, that we engage collaboratively with parents, guardians and clients in the formulation and design of the research project, and that the intent and requirements of involvement in the research are articulated in a way that is sensitive to the needs of our client group.

Given these considerations we can assume that socially just research practice means that:

- As researchers we accept responsibility for the ethics of our research.
- We avoid research that will cause harm to our participants.
- We recognize the vulnerability of our clients and the consequent impact on their capacity to give informed consent.
- Respondents are free to withdraw from the study at any time during the study, even if they have initially consented to participate.
- We ensure that the participation of the respondent and the information they provide is confidential and their anonymity is preserved.
- We approach our research in the spirit of collaboration and partnership.
- We clearly articulate the purpose and design of our study and disclose the nature of any sponsorship of the study.
- We give due consideration to the possible consequences and repercussions of our research and the publication of our results.
- The intention of our research is to improve the quality of life of our clients and their communities.

The purpose of this paper has been to explore ethical research practice in the field of child and adolescent mental health and in doing so contribute to the overall development of the research capacity of mental health practitioners and researchers (Gould, 2010). At the beginning of this paper I focused attention on the political nature of knowledge, knowledge production (that is research) and the research act itself. This ‘truth’ about research sets the scene for the conduct of ethical research and, particularly,

ethical research in the area of child and adolescent mental health. As social scientists and practitioners in the field of child and adolescent mental health we are concerned with making respondents and their experiences visible, exploring and understanding the context in which we practice and, most importantly, promoting positive social change (Roberts, 1981). Emeritus Professor Jim Ife argues: "From a human rights perspective, social work research needs to address a human rights agenda... [and] research that aims to further the cause of human rights must itself respect human rights principles in its own methodologies" (2009, pp.179-80; 181). This consistency between what we aim to achieve and how we go about achieving our goals is at the heart of ethical research practice. We also recognise, as social researchers and practitioners committed to a human rights perspective, that socially just research forms the basis of socially just practice. These connections lead us to one conclusion – that our commitment to our clients and their communities is strengthened not only by an evidence base but also ethical research practice that embodies and manifests both the principles of human rights and social justice.

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