NSPCC Learning

NSPCC Research Ethics Principles

January 2023

The NSPCC Research Ethics Committee (REC) ensures that research undertaken for, or in partnership with, the NSPCC is the best it can be. They make sure research is planned appropriately, safely and ethically. The aim of the NSPCC ethical review process is to provide a thorough, impartial examination of the ethical issues in a collaborative and proportionate way to facilitate safe and ethical research.

This document outlines the principles that the NSPCC and the NSPCC REC expects you to follow when conducting research. Other key documents are:

- NSPCC Research Governance Process (**nspcc.org.uk/researchethics**)
- NSPCC Proportionate Review Form
- NSPCC Research Ethics Committee Application Form
- Guidance for Completing the NSPCC Research Ethics Committee Application

Contents

Principles and practice

The NSPCC research ethics policy is based on the ESRC[1] Framework for Research Ethics (FRE) and the Government Social Research Unit (GSRU)[2] professional guidance. This guide sets out the key principles from these frameworks and provides practical guidance about using them in the NSPCC context.

However, this document is not a substitute for the ESRC Framework or the GSRU guidance. You should be familiar with both documents before applying for research ethics approval.

The aim of the ethical review process is to facilitate high quality, ethical research. The NSPCC REC works in a collaborative way and aims to help you think through ethical issues and find the best solutions. It does not try to 'catch out' or needlessly add to your burden. The committee's starting assumption is that you want to do your research ethically, even if they have to discuss with you the best way to do this.

Views on implementing ethical principles within research proposals will differ from researcher to researcher, and committee member to committee member, so there may be no absolute right or wrong approach. While the committee will want to make sure that the ethical principles are adhered to, it will mainly be looking for evidence that you have carefully considered the issues and come to reasonable conclusions that uphold the rights, welfare, and dignity of participants. The committee will also want to ensure that you understand the need for ongoing awareness of ethical principles throughout the study. The committee will also need to be confident that you will act in an appropriate way, should ethical issues arise. Therefore, it is important that you discuss the reasoning behind your decisions as well as describing the systems and processes you have put into place to ensure well conducted ethical research.

1 https://esrc.ukri.org/files/funding/guidance-for-applicants/esrc-framework-for-research-ethics-2015/
2 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/515296/ethics_guidance_tcm6-5782.pdf

Five ethical principles

The five principles underlying the NSPCC's ethical policy are:

1. Voluntary participation based on valid, informed, ethical consent.
2. Enabling participation where possible and seeking the inclusion of under-represented groups in research
3. Avoidance of personal and social harm to participants and researchers
4. Non-disclosure of identity and personal information
5. Ethical application and conduct of research methods

These principles are explored in more detail below, while also looking at the practical implications.

Principle 1: Voluntary participation based on valid, informed, ethical consent

What is informed consent?

Informed consent is a founding principle of research ethics. Consent means that participants in research should be able to agree to take part in the research with an understanding of:

- what the research is looking to explore or find out;
- what is expected of them as a participant;
- what the risks and benefits are for them when participating in the research; and
- the voluntary nature of their participation.

What is the role of assent and capacity to consent?

Assent in research is used when an individual can express a willingness to participate in research and an understanding of what is expect of them but are unable to fully understand the consequences of participating in the research. In some situations, assent may be sought when a child is not able to give fully informed consent. For these children, it is appropriate to gain consent from their parent, guardian, carer, or other appropriate adult with a duty of care toward the child and then obtain assent from the child.

Thought must also be given to the capacity of a participant to consent; this will depend on their level of understanding and the potential risks and benefits of taking part in research. For more information on capacity see 'Gillick' resources in the footnote.[3] In most instances, consent or assent should be sought from all participants, including children.

Participation must be voluntary

For the majority of projects, a key principle of ethical research is that the participants in the research should agree to participate voluntarily on the basis of adequate information. It must be clear that a refusal of consent will not affect the individual's rights and there will be no negative consequences as a result of refusing.

Consent is an ongoing process

It is important to remember that consent is not a one-off decision, but an ongoing process. You need to have appropriate checks to make sure that an individual is still happy to participate throughout the research. For instance, if some time has passed between a first and second interview, it is appropriate to check that the participant is happy to take part in the second interview, even if formal consent for the whole process had been sought and given at the beginning. Similarly, it should be made clear to participants that even if they have given consent at the beginning of the process, they can:

- decline to answer any particular question, without giving a reason;
- decide not to take part at any point without giving a reason; and
- ask for their data to be removed from the study where practical.

General guidance on consent

Below is general guidance that the NSPCC would like you to consider, but in all cases, you should justify your approach to ethical consent.

- A child or young person's wishes are paramount. In research, if a child does not consent or assent to participate, then this overrides the consent from the parent, guardian, carer, or other appropriate adult with a duty of care. While third parties (for example, parents or guardians) may be asked to consent on behalf of a child or young person, or in partnership with them, a child or young person's refusal of assent or consent should *always* overrule the parent's or guardian's consent to take part in the research.
- For children under the age of eight, ethical consent must be sought from the parent, guardian, carer, or other appropriate adult with a duty of care. Assent or consent must also be sought from the child. Assent or consent must also be sought from the child using age-appropriate information and support.

3 Some resources for assessing Gillick Competency are:
https://learning.nspcc.org.uk/research-resources/briefings/gillick-competency-and-fraser-guidelines/
https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-8-gillick-competency-fraser-guidelines
https://www.lindsaygeorge.co.uk/blog/is-a-young-person-gillick-competent-/

- For young people aged between 8 and 15 years, in most cases ethical consent should be sought from the young person and the parent, guardian, carer, or other appropriate adult with a duty of care.
  - There are situations in which it may be appropriate for *only the young person's consent to be sought* – for example, the young person has independently accessed a service being evaluated or researched. You will have to justify this and establish that the young person is competent and has enough information to make this decision. As part of this process, you will have to satisfy yourself that the young person is 'Gillick' competent.[4]
- For young people aged between 8 to 15 years with a learning disability, but with sufficient capacity to consent, the NSPCC REC expects consent to be handled as with other young people of the same age group. For young people aged between 8 to 15 years with a learning disability who *do not* have sufficient capacity to consent, consent should be obtained from the parent, guardian, carer, or other appropriate adult with duty of care, and assent should be sought from the young person.
- For young people aged 16 or 17 years, the assumption is that they have capacity to consent, and it is presumed that in most cases parental consent is not required. Regardless of this presumption, you should consider whether it is appropriate to also obtain consent from the parent, guardian, carer, or other appropriate adult with a duty of care. When making this determination, you should consider situations where the vulnerability of the young person or the sensitivity of the issue might make it appropriate to obtain parental consent. If you do not seek parental consent, you should consider if it is appropriate to require that parents be informed of the research. You should carefully consider and justify your approach.
- If a young person aged 16 or 17 years has a learning difficulty, but still has sufficient capacity to consent, the NSPCC REC expects consent to be handled as with other young people of the same age group, but with a clear process that ensures the young person is supported in the consent process if needed. If a young person aged 16 or 17 years *does not* have capacity to consent, they are covered by the Mental Capacity Act (2007) and third-party consent **cannot** be sought. In such a situation, an application for ethical approval must be made to the Social Care REC (**www.scie.org.uk/research/ethics-committee/index.asp).**
- Ethical consent should be considered separately from the lawful basis for processing personal data under GDPR.[5]

Disclosure

Safeguarding, poor professional practice, and NSPCC policy

While maintaining confidentiality is a priority, one of the key issues for research conducted within the context of the NSPCC is the disclosure of child protection concerns or safeguarding issues relating to adults at risk. The concerns could be triggered by what children or adults participating the research study say or write. Concerns could also be triggered through observation during the research. The NSPCC's policy is that if you become aware of such concerns then you have a responsibility to act on the information and pass it on to a relevant organisation, which in most cases will be the NSPCC helpline. If you are NSPCC staff, you must follow the NSPCC's safeguarding procedures. If you are an external researcher, you will need to be clear which procedures you will follow. To obtain a copy of NSPCC safeguarding guidelines, please contact **researchadvice@nspcc.org.uk**

As part of the consent process, you must inform participants of these limits to confidentiality surrounding safeguarding concerns. This is so that participants know the boundaries of confidentiality and that potentially sensitive information they share may be shared outside of the research setting. It is also your responsibility to be clear when safeguarding concerns may not be addressed, for example on an anonymous survey.

You must plan for safeguarding issues

You should also have clear protocols around when confidentiality may be broken and how the situation is managed. The protocol should include:

- guidance about what type of information should be discussed with a third party;
- what you should do within a data collection setting if you become aware of a safeguarding concern, including how you will communicate with the participant about the process you will be following;
- who you should report the information to; and
- what the process is for deciding whether the information should be passed on.

4 Some resources for assessing Gillick Competency are:
https://learning.nspcc.org.uk/research-resources/briefings/gillick-competency-and-fraser-guidelines/
https://www.cqc.org.uk/guidance-providers/gps/nigels-surgery-8-gillick-competency-fraser-guidelines
https://www.lindsaygeorge.co.uk/blog/is-a-young-person-gillick-competent-/
5 https://ico.org.uk/for-organisations/guide-to-data-protection/guide-to-the-general-data-protection-regulation-gdpr/lawful-basis-for-processing/

If you are conducting a study involving practitioners, you should also consider what should happen in cases where poor professional practice comes to light.

Whatever approach is chosen to address safeguarding concerns and, if relevant, poor professional practice, this should be included in the information given to participants when they are asked for consent to participate.

Please also see the Publication section later in this guidance for a further discussion of issues relating to confidentiality when publishing findings.

Consent process

Another important issue that the NSPCC REC will consider is the process by which ethical consent is obtained, including who asks for it, and how and when they ask, as well as any materials given to participants to support the process. It is normal practice to provide information leaflets about the research, and these need to be tailored so that they are appropriate to the participant, in an easily understandable form that uses accessible lay language. In some cases, this will mean it is necessary to produce several versions of an information leaflet. For example, research that involves children and young people with a wide variety of ages or cognitive abilities may need a range of information sheets. Similarly, consent forms need to be tailored to the participant group. You can combine information sheets and consent forms into one document, as long as they are tailored for participants. You can use the Flesch-Kincaid[6] test to help improve the readability of your consent and information sheets. However, the Flesch-Kincaid test alone is not enough to ensure your documents are accessible to your participants. You should also consider whether your consent and information sheets should be translated.

The appropriateness of obtaining written versus oral consent is likely to vary between projects.[7] You should assess which method is most appropriate for your project, and clearly justify the proposed approach to obtaining consent in the ethics application form. Please note that studies being assessed by the Health Research Authority (HRA), which has specific expectations for consent, should comply with the HRA's guidelines for obtaining consent. Studies assessed by other external RECs (other charities or universities) should follow the NSPCC REC consent guidelines.

Written consent provides you with some assurance against accusations of failing to secure informed consent (see the Social Research Association [SRA] guidance[8]). For this reason, it has become common practice. However, it should be noted that written consent is not always necessary for ethical research, though typically it is expected. In some cases, it could be seen to undermine the ongoing process of ensuring consent. This happens if people feel that by signing a consent form they are 'obliged' to continue to take part or answer particular questions when they are not comfortable doing so.[9] It may have the unintended consequence of placing barriers to participation for those with literacy problems or those finding the process of written consent too 'official'. For some interview modes, for example by telephone or online, written consent raises a series of practical difficulties.

If you opt for verbal consent, you should consider how to put in place mechanisms for recording that verbal consent has been given. Where interviews are being recorded, verbal consent can be recorded; for survey interviews, researchers or interviewers can be prompted to document that consent has been sought, or that leaflets have been given, for example. While this is not 'proof' of consent, it helps ensure that you take all appropriate steps to explain and obtain consent, and record that you have done so. This form of prompting may be of particular importance when you are not carrying out all the interviews yourself.

Where you use written consent, you must ensure this method does not compromise the process of ongoing consent or place barriers to participation. You should also consider the timing of gaining consent to ensure that participants have the time and space to reflect on whether they want to take part.

In some cases, some research activities are optional, such as recording of an interview. It is, therefore, important that information sheets and consent forms are clear about what is mandatory and what is optional.

6 Guidance on how to use the built-in function in Word https://support.office.com/en-us/article/test-your-document-s-readability-85b4969e-e80a-4777-8dd3-f7fc3c8b3fd2

7 These guidelines draw on a discussion of informed consent within NatCen Social Research's internal research ethics guidelines.

8 See section 4.2 in: http://the-sra.org.uk/wp-content/uploads/ethics03.pdf

9 See Department of Health Archive for guidelines questioning of assumption that written consent equates with fully informed consent: http://webarchive.nationalarchives.gov.uk/+/www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/documents/digitalasset/dh_4019079.pdf

Gatekeepers

The role of gatekeepers in accessing participants

It is often necessary for you to contact participants through 'gatekeepers' who have immediate access to the research participants. The role and position of gatekeepers can vary enormously, from a personal assistant of a busy professional, to teachers in schools, or social workers. When managing these diverse situations, you must consider the particular relationship between the gatekeeper and the individual being recruited. Below are important issues to consider when working with a gatekeeper.

- When a gatekeeper is in a position of power with respect to the potential participants (for example, a teacher), there could be a risk of potential participants feeling coerced, or at least pressured, to take part in research.
- Gatekeepers may not explain the research to potential participants very well, so the initial decision to take part in a study is not on a fully informed basis. You must consider how best to ensure that the potential participant understands what taking part involves, and that they have done so freely by going through a thorough process to ensure consent is informed and voluntary before the study commences.
- Continuing/ongoing consent or assent remains an important aspect of research when working with a gatekeeper. You must consider how ongoing consent is obtained and how withdrawal from the study is facilitated.
- When the gatekeeper is also the service provider, you and the gatekeeper must ensure that potential participants know that their receipt of services will be unaffected by whether or not they agree to take part in the research.

Compensation and remuneration for participants

Compensation is usually only offered when participation in the research might be considered onerous, for instance participation that may be very time consuming, or require the participants to travel. If compensation, remuneration, or incentives are to be used, the NSPCC REC will expect that you will set out in your application the appropriateness of this for the participants involved in the study.

Impact of remuneration on benefit entitlement

You should be aware that these payments may impact upon participants entitlement to benefits and be aware of Department for Work and Pensions and Home Office guidance regarding payments. This is particularly relevant when you are using participant researchers as this might be seen as remunerative work, given the higher level of incentive that would be offered. This may also potentially count as unavailability for work, which could also affect benefits.

General guidance on remuneration

- Participants must be made aware of potential issues regarding benefit eligibility in the participant information sheet.
- Details of incentives should appear in the participant information sheet and should be known to potential participants before they consent to take part. If planned incentives are not included on the participant information sheet, this should be justified in your application.
- One-off incentives *must not be dependent upon completing their participation* in the research. This means that participants would still receive the incentive if they were to withdraw early from the study.
- NSPCC REC applications should make clear what form incentives take. If the incentives are cash and not vouchers, this must be justified.

Observation studies and obtaining consent after data collection

Deception or misleading participants is not acceptable in research that is reviewed by the NSPCC REC. Historically, research using deception has been conducted with research participants who are from minority, marginalised or powerless groups.

However, there are some rare situations where it is necessary to not inform participants in order to obtain unbiased observational information. An example of this is an evaluation where an integral part of the study is to observe what happens during the course of the intervention (e.g. a training programme or a behavioural intervention), without the participants being aware that they are being observed.

If using covert observation, you should ensure your research protects an individual's rights as outlined in the Human Rights Act 1998. Article 8, concerning the right to respect for private and family life, is particularly relevant.

For these studies, you need to explain clearly in the ethics application form:

- why prior consent is not possible;
- why the research still needs to go ahead;
- what procedures will be in place to protect participant; and
- how the issue will be dealt with after data collection.

In some cases, it may be feasible to obtain consent from some parties (for example, the professionals) and not others (for example, the participants) prior to the observation. If so, consent should be sought from whoever it is feasible to do so. Where it is not possible to obtain informed consent before data collection, but it is possible to obtain it afterwards, this should be done as soon as possible. Mechanisms must be put in place to remove someone's data if they retrospectively decline to give their consent. You should be clear about how you will manage situations where an individual in a group observation declines consent.

When the study is complete, you must debrief the participants and explain any incomplete disclosure that occurred.

The British Psychological Society (BPS)[10] and Social Research Association (SRA)[11] ethical guidance outlines elements that must be considered within research designs where observation of participants is taking place without their prior consent or knowledge. These include:

- restricting observations to situations where the people being studied would reasonably expect to be observed by strangers;
- always considering the local cultural values and privacy of individuals; and
- placing clear and legible signs in the area where observation is taking place.

Although not specifically addressed by the above guidance, researchers should consider how these elements may be addressed when using publicly available data online, such as forums, message boards and social networks.

It is also vital to ensure that the NSPCC compliance team has reviewed how the research will comply with data protection requirements, including the General Data Protection Regulation (GDPR), and agrees that the research is compliant.

10 https://www.bps.org.uk/news-and-policy/bps-code-ethics-and-conduct
11 http://the-sra.org.uk/wp-content/uploads/ethics03.pdf

Principle 2: Enabling participation where possible and seeking the inclusion of under-represented groups in research

Participants in research should reflect the diversity of our culture and society, for example in race, ethnicity, gender, age, and disability. A lack of diversity among research participants can limit how useful your research is to the broader community, how effective interventions are, and it prevents some populations from benefitting from research.

When considering how to facilitate participation and inclusion of different sections of society you must consider the following elements:

- how to best communicate with your research participants;
- how to best to facilitate understanding of your research among participants;
- how to best facilitate access to research participation; and
- what financial burdens or barriers may result from participation.

You should consider the subtle ways in which people with various social, religious, educational, gender or sexual identities, or cultural backgrounds may be excluded, and devise appropriate strategies to facilitate inclusion wherever possible.

While not every study can include all sections of society, you should be aware that a number of tools and strategies are available to facilitate participation, some of which are outlined below. Additional information can be found in SRA guidance[12] and the Office of Disability Issues guidance.[13]

- You should consider translating research tools and documents for non-English speakers.
- You should consider using interpreters to facilitate participation, but recognise that:
  - the use of interpreters for interviews can greatly add to the burden for a participant as they may take much longer; and
  - the use of interpreters in small communities or using family members informally as interpreters can negatively impact on the participant's ability to fully participate in the research.
- You should consider how you may need to adapt your research to take into account literacy issues and learning difficulties.
- You should consider access to the facilities where the research is taking place, both in the ease at which participants can travel to the facility and any mobility issues that may need to be taken into account.
- You should consider participants access to technology (for example, smartphones, tablets, computers) and/or access to the internet that allow individuals to participate in online studies.
- You should consider reimbursement of costs incurred by participants, such as travel and subsistence.
- You should consider the timing of interviews and focus groups, considering not only the time of day but also day of the week.
- You should consider if the design of the research may exclude certain groups. For example, lesbian, gay, bisexual, transgender and queer or questioning (LGBTQ+) participants may need specific recruitment strategies, or studies involving parents may need specific recruitment samples to ensure fathers are represented.
- You should consider if particular groups or individuals may have a preference for an interviewer of a specific gender, ethnic background, or age.
- You should also consider whether research participants may have caring responsibilities and how that might impact on their participation.

It is important that participants are able to contribute to research not only for their own benefit but for the benefit others, if they do so in an informed and voluntary manner through a proper process of consent.

12 http://the-sra.org.uk/wp-content/uploads/ethics03.pdf
13 https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/321254/involving-disabled-people-in-social-research.pdf

Principle 3: Avoidance of personal and social harm to participants and researchers

Avoiding personal and social harm to participants and researchers is the key aim of the ethical principles and guidelines. However, the NSPCC REC recognises that the risk of causing harm or upset can never be entirely mitigated. Therefore, the committee will be looking for evidence that you have reduced the risk as much as possible, including taking a trauma-informed approach, and that the remaining risk is justified given the research question and research design.[14] In addition, the NSPCC REC will want to know what measures and have been put into place to address the impact of any harm or upset (for example, through the provision of support services or advice). Particular attention should be paid to issues related to the availability of support – for instance, scheduling an interview when the support service suggested is closed.

For social research, the main risk to participants is the potential to trigger and/or cause emotional or psychological distress. This can be linked to a number of issues, including:

- individuals may find participating in research stressful;
- the research may 'reawaken' or trigger old feelings or memories;
- the research may uncover hidden or suppressed feelings;
- the research may create additional distress; or
- the participant may be concerned about what they have shared.

Research should not involve any greater stress than is commonly experienced in day-to-day life or in the interventions that are being evaluated. The risk that a participant may become upset does not necessarily mean that the research should not go ahead. Questions asked would normally be considered ethical if:

- the questions are appropriate for the research;
- the stress or distress that may occur is not excessive;
- the participant has been fully informed; and
- given their consent.

While there are a range of ways in which research can cause distress, it does not mean that the distress is necessarily harmful. Participants may become upset when discussing difficult or sensitive issues, but nevertheless feel that the research is important. They may feel that participating in the research is part of the process of coming to terms with the issue on a personal level. A participant becoming upset during the research does not necessarily mean the research should not go ahead or should stop. As long as the participant is clear that they wish to continue and the situation is handled sensitively, with appropriate support in place it should be reasonable to proceed. In some cases, shutting down appropriate expressions of emotion can also have a negative impact on participants.

Assessing and managing risk

In order to *assess the risk* of participants becoming distressed, and the risk that the distress results in harm, you will need to consider:

- how vulnerable participants are likely to be;
- how sensitive the research topic is;
- the appropriateness and acceptability of the research instruments; and
- how much burden the data collection is likely to place on the participant given the context in which it is occurring.

In order to help *mitigate the risk*, you should consider the following.

- How you can make sure participants are prepared for participation (as part of the informed consent process).
- How data collection can be minimised to reduce distress (for example, through taking appropriate breaks or leaving gaps between episodes of data collection).
- The positioning of sensitive questions in a topic guide or questionnaire.
- The provision of support services or contact information depending on the likelihood and degree of distress caused. If support or helpline numbers are being provided you will need to make sure interviews are scheduled at a time when the services will be available after the interview. Often, this will mean avoiding conducting interviews on Friday afternoons, as many services are closed at the weekends.

14 The following article provides a framework for assessing. Emanuel EJ, Wendler D, Grady C. (2000) What Makes Clinical Research Ethical? *JAMA*, 283(20): 2,701–2,711. doi:10.1001/jama.283.20.2701

- where the research will take place, and the impact that this may have on mitigating or exacerbating any distress that participant may feel.

Consideration should also be given to where it may be appropriate to provide information or encourage participants to seek help in the case where an unmet need is disclosed (for example, a mental health need like depression).

It is good policy to consider debriefing participants at the end of the study or stressful situations, in order to identify any participant needs and refer them to appropriate help or allay their fears. A 'Thank you' leaflet containing information and contact details on help and support is particularly useful and should be given to all participants.

Qualitative research and risk

While all of these issues apply to both quantitative and qualitative research, qualitative research brings additional risks because of the nature of the data collection. This is because qualitative research will often go into more depth than an equivalent quantitative approach and there is more scope for discussing issues that have not been anticipated by either you or participant.

Informed consent is vital, but may not be sufficient in preventing harm

Gaining informed consent is crucial but does not absolve you from considering the risk of harm. In some cases, particularly for children or vulnerable individuals, you may have a better understanding of what is likely to cause harm than the participant. In these cases, you are required to act upon that knowledge, irrespective of whether the participant has agreed to take part in the research. This action could take many forms, including discussing with the participant the option to not take part in the research.

The following are two ways in which this additional risk can be minimised, but other approaches can also be used.

- Structuring interview schedules or topic guides so that the more sensitive material is in the middle of the interview, means participants are given a chance to return to a more 'normal' level of conversation at the end of the interview.
- Ensuring that while the interview remains focused on the research topic, there is space for participants to talk about less difficult topics before returning to more sensitive topics. However, participants who discuss sensitive or traumatic issues that are not related to the topic of the research often feel embarrassed and distressed afterwards at having inappropriately disclosed, so it can be a careful balancing act for interviewers.

When conducting qualitative interviews, you need to make sure that the boundary between a research interview and counselling is rigorously maintained, even if you are also a trained counsellor. However, it is important that information is provided to all participants to sign post them to sources of support. In addition, a debrief with the participant after the interview can be an appropriate way of helping to manage any feelings prompted by the interview and for the researcher to gauge whether additional information or support would be appropriate.

Risk to researchers

The main risks to researchers in conducting research are:

- that they can become distressed or upset, including in some extreme situations suffer from vicarious trauma; or
- that they suffer physical injury.

These risks are present during a research encounter, but potentially also on the journey to and from the location where the research is to take place. The main ways in which this risk is mitigated is through having a robust risk assessment process that involves ongoing risk assessment by you, and by ensuring that an appropriate and adequate level of internal or external support is available for you or your researcher before, during and after the data collection.

You should also consider you own physical safety, especially when working outside of the workplace or at unsocial times. Your organisation may have their own policy for lone working. In addition, the Social Research Association has a Code of Practice for the Safety of Researchers (see SRA research ethics guidelines[15]) and The Suzy Lamplugh Trust[16] also provide advice on ensuring the safety of lone workers.

15 http://the-sra.org.uk/wp-content/uploads/ethics03.pdf
16 www.suzylamplugh.org

Principle 4: Non-disclosure of identity and personal information

Although there are limits to confidentiality, in particular in the case of safeguarding issues involving children and adults who are vulnerable, in general a participant's personal information and their identity should not be disclosed. This confidentiality should operate on at least two levels:

1. Within an organisation. Only those people who need to know a participant's identity and personal information should do so. Normally, this will be only those within the immediate research team.
2. Beyond the organisation conducting the research. Findings that are published or made available to others will need to be written in such a way as to ensure that personal information and identities are not disclosed. This includes attention to the selection of quotes in reports. Where this is not possible (for example in the case where there are a small number of potential participants who could have taken part in the research), the limits to confidentiality should be made clear to participants before they participate, and the proposed dissemination approach discussed.

You should also have appropriate processes and procedures in place to ensure data security in line with the General Data Protection Regulation.[17]

Principle 5: Ethical application and conduct of research methods

While the scholarly, scientific standards or merits of the research are not the responsibility of the NSPCC REC, some methodological issues can have an ethical dimension, and these should be considered.

- Designs that are fatally flawed or that contain an inherent bias, to the extent that the research would be misleading or damaging, will not be approved.
- Questions that are so 'leading' as to render participants' responses tokenistic or of limited value will not be approved.
- You should pay particular attention to ensuring that the risk of harm or upset is justified by the research findings.
- You should demonstrate in your application how your research will contribute to gaps in the evidence base or will be useful in policy and practice.
- You will need to justify your research design and demonstrate that it is suitable and robust for the aims of the research.
- You should clearly explain how the researchers are appropriately trained and experienced to undertake this particular research.

17 UK Information Commissioner's Office, https://ico.org.uk/

Complaints procedure

In addition to adhering to the above principles, procedures should be in place to facilitate participants making complaints about the research in general or about a particular researcher. The arrangements should include the ability to talk to someone not connected with the research. You should consider if measures need to be put in place to aid children in making complaints. These measures could include providing a guide or support materials to identified trusted adults to help them support the child through the complaints process.

A formal complaints procedure must be included on the participant information sheet. It is possible that more than one complaints procedure will need to be included. The following is the NSPCC complaints procedure and **must appear** on participant information sheets:

If you would like to complain about any aspect of the study, the NSPCC has established a complaints procedure. You can contact any NSPCC member of staff, volunteer or local office or email **researchcomplaints@nspcc.org.uk**. You can also call the NSPCC Supporter Care team on 020 7825 2505.

To help us respond to your comment or complaints effectively, please tell us your complaint is related to [NAME OF RESEARCH PROJECT]. Also, please include your full name, contact details, and let us know how you would like us to contact you.

Publication

From an ethical standpoint, the NSPCC REC would normally expect all research to be placed in the public domain and published unless there is a strong argument against this. It is important that research is disseminated so that practitioners and policymakers can adapt their policies and work practices based upon the best available evidence, and other researchers can build upon existing work.

It is essential that the anonymity and confidentiality of participants is protected during the publication of research where this has been promised as part of the informed consent procedure. Withholding names may not be sufficient and you should be aware that no attributes should be reported that might allow someone to work out the identity of a participant – for example, in the use of case studies.

In some situations, the confidentiality of participants may be impossible to ensure in publication. In other situations, it may be desirable to identify individuals, especially senior people in policymaking roles. In such cases, prior consent for this must be sought. It is appropriate that participants are consulted on publication drafts and the final report, ensuring that they have the opportunity to comment and challenge what is presented. It is important that any rights participants may have, with respect to sight of drafts and rights over excluding material, are addressed in the participant information sheet and are clear and explicit.

Child protection

The NSPCC believes the principles outlined above are entirely compatible with its child protection and safeguarding policies. However, if situations arise where there is a conflict between these, ***the child protection and safeguarding policies take precedence***. If you have a question about NSPCC child protection and safeguarding policies, please contact **researchadvice@nspcc.org.uk**.

Further guidance

Additional information and guidance on the ethics of carrying out research can be obtained from the following organisations:

- The Economic and Social Research Council (https://esrc.ukri.org/funding/guidance-for-applicants/research-ethics/)
- The National Childrens Bureau (www.ncb.org.uk)
- The British Psychological Society (www.bps.org.uk)
- The Social Research Association (www.the-sra.org.uk)
- The British Sociological Association (www.britsoc.co.uk)
- The Market Research Society (www.mrs.org.uk)
- The Medical Research Council (www.mrc.ac.uk)
- UKRIO Code of Practice (https://ukrio.org/publications/code-of-practice-for-research/)
- UK Policy Framework for Health and Social Care Research – Health Research Authority (hra.nhs.uk)

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