Research Ethics for Social Scientists Avoiding Harm and Doing Good

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Avoiding Harm and Doing Good

Introduction

We might expect that all researchers would be very careful to protect participants from at least physical harm caused by their research programmes. After all, most moral systems require people to refrain from hurting anyone else intentionally unless there is good reason. However, as we have already discussed in Chapter 3, research ethics grew, to a considerable degree, as a result of the need to protect participants from the considerable harms that had been done to them. The appalling impact of medical experimentation on vulnerable groups made it imperative that researchers not be allowed to regulate themselves. As a result, early ethical codes sought to protect research participants from various forms of harm.

Contemporary researchers are normally expected to minimize risks of harm or discomfort to participants (the principle of non-maleficence). In some circumstances, they may also be expected to promote the well-being of participants or maximize the benefits to society as a whole (the principle of beneficence) (Tri-Council, 2003). In this chapter, we examine the ways social scientists have grappled with the concepts of harm and benefit and how they have sought to balance the two. Researchers have not always been successful. Some still leave participants feeling exploited, 'seething with rage and determined to skin alive the next aspiring researcher who seeks access' (Punch, 1986, p. 47; see also Darou et al., 1993; Scheper-Hughes, 2000).

Avoiding harm

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The meaning of harm itself is debatable. Joel Feinberg (1984) defined it as the 'defeating of an interest', where the interests of an individual are defined as 'the range of things in which that individual has a stake'. Although the influence of bioethics means that harm is most often thought of in physical terms, it also includes physical, psychological, social and economic damage (ESRC, 2005; NHMRC, 2001b). Indeed, in social science, research harm is generally more likely to involve psychological distress, discomfort, social disadvantage, invasion of privacy or infringement of rights than physical injury.

Just one research study may cause a range of harms. Consider two examples, the first hypothetical, the second real. The first involves a study of sexual practices among employees of a particular organization. Perhaps in an effort to assess the existence of discrimination or unsafe sexual practices, employees are asked whether they are sexually active, what types of sexual activities they have engaged in and the gender(s) of their partners. Various harms may flow from this research if, for example, confidentiality were to be breached and the answers given by individual respondents revealed to employers and fellow employees. As a result, one employee may be refused promotion because of his sexuality, another may be physically abused by colleagues because she is HIV-positive, a third might fear a break-up of his relationship with his partner after revelations of his sexual history, and so on.

The second case concerns an American PhD student's covert participant observation of undercover drug enforcement over one year (Miller and Selva, 1994). Miller posed as a 'confidential informant', participating in 28 narcotics cases and setting up 'reverse sting' operations for narcotics officers. This involved persuading people to buy illegal drugs from undercover officers. Agents would later move in to arrest the buyers and seize any of the buyer's assets or cash involved in the deal. Miller was highly critical of these operations and justified his use of covert techniques as a way of exposing 'this expensive and dysfunctional drug enforcement strategy' (p. 323). Miller did not discuss the impact his work could have on suspects. Some researchers might be able to justify providing information about drug dealers to the police, though many would be very uncomfortable about allowing their research data to be used that way (see Chapter 6). Moreover, Miller's role meant that he engaged in what other jurisdictions might term entrapment. In one case, for example, a small-time user and possible dealer of marijuana was arrested, his cash and truck were seized. Miller and Selva acknowledged

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that 'the buyer might never have acted on his [p. 97 \downarrow] intentions to purchase a felonious quantity of drugs if the researcher and the agent had not presented him with such an opportunity' (pp. 3245).

Researchers should try to avoid imposing even the *risk* of harm on others. Of course, most research involves some risk, generally at a level greater in magnitude than the minimal risk we tend to encounter in our everyday lives (Freedman et al., 1993). The extent to which researchers must avoid risks may depend on the degree of the risk (prevalence) as well as the weight of the consequences that may flow from it (magnitude):'It is commonly said that benefits and risks must be "balanced" and shown to be "in a favourable ratio" (NCPHSBBR, 1979). Or, put another way,'Grave risks require commensurately momentous goals for their justification'(Beauchamp and Childress, 2001, p. 118).

Ellsberg and Heise (2002) offered an example based on research on domestic violence in developing countries. For them, the major danger in research on abused women:

is the potential to inadvertently cause harm or distress. Respondents might be vulnerable to physical harm if a partner finds out that she has been talking to others about their relationship. Additionally, there is the potential for respondents to become distressed by an insensitive interview, or from having to recall painful or frightening experiences. (pp. 1599–600)

So, domestic violence victims in Mexico have been revictimized by partners because they participated in a survey that explored their experiences (Health and Development Policy Project, 1995; see also the guidelines devised by the World Health Organisation, 1999). In the field of indigenous health, Anderson asked researchers to contemplate and respond to problems as wide-ranging as:

Is the process going to accentuate internal community conflict? What is the effect of asking questions about women's parenting skills on their self-esteem as mothers? How will published reports be interpreted by the mainstream press, and is there a risk they will be misrepresented to



add currency to traditional colonial stereotypes? (Anderson, 1996, pp. 162–3)

Researchers are normally expected to adopt risk minimization strategies (NHMRC, 2001b; RESPECT, n.d.) which might involve monitoring participants, maintaining a safety net of professionals who can provide support in emergencies, excluding vulnerable individuals or groups from participation where justifiable, considering whether lower risk alternatives might be available, and anticipating and counteracting any distortion of research results that **[p. 98 \]** might act to the detriment of research participants (Rainwater and Pittman, 1967). So, for example, in the case of educational research, harm to children might also be caused by making them miss part of a curriculum or lose opportunities (perhaps by falling behind contemporaries or being placed in a slower stream). Professional associations generally require educational researchers to be 'sensitive to the integrity of ongoing institutional activities' (American Educational Research Association, 2000) and make provision for remedying such harm: 'This may require remedial teaching, teaching to compensate for lost time, counselling or debriefing' (Australian Association for Research in Education, 1997).

Debriefing has been used extensively within deception-based experimental research as a risk minimization strategy (Schuler, 1982). Once data have been collected, the researcher explains to participants the true nature and purpose of the research in the belief that this can act 'as an eraser for emotional and behavioural residues' (Tesch, 1977, p. 218) as well as offering some educational benefit. However, the process of debriefing may suffer from several defects. In terms of wiping away the effects of manipulation, Warwick (1982) argued that the effects may extend well beyond a debriefing. Indeed, in some cases the debriefing may exacerbate any harm caused (Keith-Spiegel and Koocher, 1985). Several psychologists have also found that participants may not place great value on the information they received during the debriefing (Smith and Richardson, 1983), some even believing that it was an additional part of the deception.

Another way of responding to the possibility of harming participants is by incorporating in the planning and running of the research members of those communities who form the focus of the work. For example, Martin and Knox (2000) involved members of an agency that provided services for gay and lesbian communities while planning

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their study of HIV risk behaviour among gay men. Under this model, the process could become an exchange between researchers and participant communities with researchers and participants collaborating on the development of appropriate questions and methodologies, researchers providing access to expert information and research resources in exchange for support and advice from community members (Rosenthal, 1991; Silvestre, 1994).

A related criticism of traditional views of risk minimization has emerged within anthropology. Graves and Shields (1991) argued that codes of ethics overstated the knowledge of, and autonomy of action available to, social scientists:

[p. 99 \downarrow]

... in biomedical experimentation the research paradigm gives researchers both maximum control over subjects and maximum potential to harm them irreversibly ... (p. 135)

... In contrast ... it is not at all clear in most forms of social science research who we are protecting, how we are protecting them, what we are protecting them from, or what constitutes the limits of our capacity to protect ... (p. 136)

Similarly, Christopher Kovats-Bernat (2002), an American anthropologist engaged in fieldwork with street children in Haiti, has criticized those who assume that anthropologists are powerful enough to control or negotiate danger on behalf of those with whom they are working. Kovats-Bernat suggested that such a belief was part of his discipline's 'colonial legacy' (p. 214):

... the ability to protect against harm or to offer aegis is not the exclusive domain of the anthropologist but, rather must be regarded as power shared among actors in the field toward the well-being of everyone concerned. (p. 214)



Doing good

While researchers have tended to concentrate on the need to avoid harming others, some ethicists have argued that researchers' obligations extend well beyond this. On the basis of the principle of beneficence, some have claimed that, in certain circumstances, we should also act to benefit others. For example, Beauchamp and Childress (2001) argued that because we all obtain benefits from being members of a society, we all might be under an obligation of *general beneficence* to everyone else under certain limited circumstances. Paraphrasing Beauchamp and Childress, a researcher might have to act if he or she knew that: other people were at risk of significant loss or damage to a major interest; the researcher's action were needed to prevent loss or damage; the researcher's action had a high probability of preventing it; the action would not entail significant risks, costs or burdens to the researcher; the benefit that others could be expected to gain outweighed any harms, costs or burdens that the researcher was likely to incur.

Researchers might therefore be expected to owe a duty of beneficence to people even if they are not directly affected by the study. However, although some ethicists have suggested that we should try to help as many other people as much as possible (Singer, 1999), the obligations of beneficence are normally limited in some way. Some commentators have suggested that **[p. 100 \downarrow]** there needs to be a special relationship between the person who is under an obligation and the person or class of people to whom he or she has an obligation (Mill, 1863). So, an obligation of *specific beneficence* might flow from family or friendship bonds, or from a legal contract. It may also be the product of the sort of formal relationship created by a negotiated research agreement. In short, undertaking research may impose duties and obligations on the researcher to act to the benefit of participants.

One example of this occurs when commercial biomedical research is taking place in developing countries. Here, CIOMS (2002) has acted to stop research undertaken on behalf of multinational pharmaceutical companies exploiting research subjects in developing countries. Instead, CIOMS requires researchers to be responsive to the health conditions and needs of vulnerable subjects. This might involve supplementing health services where the government is unable to meet local needs (Guidelines 10

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and 21), or helping build the local research base by contributing to the host country's 'sustainable capacity for independent scientific and ethical review and biomedical research' (Commentary on Guideline 12).

In social science, scholars often claim that by contributing to a general body of knowledge, the class of people who make up the participants might eventually benefit from the research. For example, in the field of research on HIV and intravenous drug users, Singer and her colleagues pointed to several benefits that have flowed from their anthropological studies, including:

... documenting the rapid diffusion of HIV among injection drug users ...; identifying little known routes of HIV transmission in drug-using population; determining the important role of crack cocaine in the sexual transmission of HIV ...; monitoring the emergence of new drug use and HIV risk patterns ...; documenting the effectiveness of outreach approaches to the recruitment of hidden populations of drug users into intervention ... (Singer et al., 2000, p. 390)

Fontes (1998) took issue with approaches that stopped at this point and argued for

increasing use of research designs that benefit the participants directly ... Here I am not referring to some theoretical benefit down the road, but rather to the extent to which these specific participants benefit from their participation. (p. 58)

In fact, Singer et al. (2000) were sympathetic to arguments such as these. Indeed, they made an even stronger assertion:

[p. 101 \downarrow]

in working with high-risk populations, researchers should also be concerned with using their research findings and interactions with vulnerable individuals to help protect participants from harm that might befall them *outside* of the research context. (2000, p. 391)



In short, Singer (1993) maintained that researchers need to take an active stance to combat social suffering. Although Singer's team had used research money to fund a range of services for drug users in Hartford, Connecticut (including outreach educators, HIV testing and counsellors), had referred research participants to treatment and other health and social services, and had supported the development of a number of new service providers, following the death of one of their participants team members still wrestled with the possibility that they and researchers like them were not doing enough (Singer et al., 2000; see also Appendix, Case 2).

Guidelines produced by indigenous groups have called on researchers to maximize the benefits of research to indigenous peoples:

Research in Indigenous studies should benefit Indigenous peoples at a local level, and more generally. A reciprocal benefit should accrue for their allowing researchers often intimate access to their personal and community knowledge. (Australian Institute of Aboriginal and Torres Strait Islander Studies, 2000, principle 9)

In some cases this might occur by 'upskilling key members of the local community in research processes and accessing funding' (Maori Health Committee, 1998, s.5.3.1), by providing broader education and training to indigenous researchers, communities and organizations (Australian Housing and Urban Research Institute, 2004), or by helping a community to engage with previously unrecognized problems (Anderson, 1996).

In the case of domestic violence research, Ellsberg and Heise (2002) maintained that interviews could provide an important opportunity for victims who might 'welcome the opportunity to share their experiences with someone who will not judge or condemn them' (p. 1600). Many studies try to provide emotional and practical support for victims, offering information about, and organizing access to, formal and informal services, providing feedback to the study community and relevant agencies, and supporting or engaging in advocacy on behalf of abused women (Ellsberg et al., 1997; Richie, 1996; Usdin et al., 2000; World Health Organisation, 1999). In her research on sexual abuse in Chile, Fontes (1998) collected data using focus groups of people involved in community [p. 102 \(\psi\)] or women's organizations in the hope that 'public discussion of sexual abuse would reduce shame and secrecy for the group members, and establish



relationships that might later serve to catalyse social change' (p. 58). After the focus groups were completed, Fontes ran free workshops on sexual abuse for the participants and for a local mental health network.

Many researchers in disability studies have been troubled by their position as data collectors who offer little more than the illusion of change to the subjects of their research (Stalker, 1998; similar issues arise in studies of homelessness see Cloke et al., 2000). Traditional research practices have also been vulnerable to attack from a politicized disability movement that described studies of disability as the exploitation and victimization of people with disabilities at the hands of traditional, non-disabled researchers who seemed more concerned with developing their own careers than in changing the position of disabled people (Lloyd et al., 1996; Newell, 1997). In the 1990s, some social scientists shifted away from notions of participatory research towards what they termed emancipatory research (Zarb, 1992). For Oliver (1992), it was exploitative to engage in research that simply captured the perspectives of disabled people. Instead researchers had a responsibility to work with people with disabilities and use their research to develop ways of empowering people with disability, by influencing policy-making and practice. Lloyd et al. (1996) argued that researchers should share knowledge, skills and experience with people with disabilities and offer them greater opportunities:

Empowerment and partnership will not just happen; they must be resourced, perhaps by challenging the impact on people of powerlessness, disadvantage and oppression, perhaps by providing opportunities for them to acquire knowledge, understanding and support which will increase their self-confidence, power, control and choice. (p. 306)

Contemporary debates in anthropology, however, suggest that we should be cautious. It may not always be easy to know how best we might support vulnerable populations. In 1995 an American anthropologist, Nancy Scheper-Hughes, called on her colleagues to engage in militant anthropology, taking an activist stance as comrades in the face of oppression, 'colluding with the powerless to identify their needs against the interests of the bourgeois institution' (1995, p. 420). She explained her return to activism as an

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anthropologist in terms of a research bargain she had reached with the inhabitants of Alto do Cruzeiro, a shantytown in Northeast Brazil:

[p. 103 \downarrow]

they gave me an ultimatum: the next time I came back to the Alto do Cruzeiro it would be on their terms, that is, as a *companheira*, 'accompanying' them as I had before in the struggle and not just sitting idly by taking field notes. 'What is this anthropology to us, anyway?' (p. 411)

However, Scheper-Hughes' paper drew sharp comment from some respondents. D'Andrade (1995), Kuper (1995) and Gledhill (1999) were all concerned that it was 'not always obvious that the oppressed constitute a clearly defined class with an unambiguous shared interest' (Kuper, 1995, p. 425). Indeed, as Philippe Bourgois (1995) found in his study of the crack scene in Spanish Harlem, the attempts of a researcher to contribute to the host community can be met with utter derision from research participants and may jeopardize the research project.

they thought I was crazy ... On several occasions my insistence that there should be a tangible political benefit for the community from my research project spawned humiliating responses: *Caesar:* Felipe, you just talking an immense amount of shit. (Bourgois, 1995, pp. 46–47)

Much of the literature that has called for researchers to provide greater benefits to research participants has been based on work with disadvantaged, powerless communities apparently in need of help. However, there has been little discussion of what scholars might owe powerful or unpleasant groups should researchers be required to provide benefits to corporations or government departments who are not paying for their services, to racist political groups or to men who engage in sexual violence? In those cases, would it really be inappropriate for researchers who might otherwise have a commitment to emancipatory or activist research to undertake work on, but not for or with, these groups? In addition, who is to decide what constitutes a benefit can we decide what is best for others? Given that the nature of many social science research

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projects may evolve during the course of the research, even researchers who enter the field intending to provide benefits may find that they reach conclusions that are quite critical of some participatory institutions conclusions that may not always be welcomed by host organizations (Lawton, 2001).

In isolation, the principles of non-maleficence and beneficence might justify a researcher acting against the wishes of others on the basis that he or she knows what is best. For example, a researcher might decide not to tell [p. 104] participants about all the risks they might face if they take part in a study. The researcher might argue that the risk is small and he or she does not want to worry participants. Alternatively he or she might claim that even though the risk might be significant, many other people would suffer if the participants refused to take part in the research. These are paternalist arguments and could be criticized on a range of grounds. For example, antipaternalists such as Ronald Dworkin (1978) and James Childress (1982) would argue that such a decision by the researcher displays disrespect to autonomous people, failing to treat them as moral equals. On the other hand, Beauchamp and Childress (2001) accepted that people might be able to weigh autonomy against paternalism and conclude that where very minor impositions on an individual's autonomy prevent significant harm or provide major benefits, there might be some justification for overriding an individual's wishes. However, their discussion of the possibility of justifying paternalism was limited to significant preventable harms associated with medicine and it may be difficult to extend that argument to social science.

Balancing costs, risks, benefits and opportunities

Even research that yields obvious benefits may have costs. It is likely to consume resources such as the time and salary of the researcher, or the time of participants. It may also have negative consequences, causing various harms. In general, obligations to do no harm override obligations to do good. However, there may be circumstances where this may not be the case, such as on those occasions where we might produce a major benefit while only inflicting a minor harm (Beauchamp and Childress, 2001). In such a situation, the decision whether or not to proceed with research might draw, in

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part, on utilitarian principles (Chapter 2). In the following three examples, Canadian and American scholars had to assess whether risks of harm to participants might outweigh the possible benefits.

Buchanan and his colleagues (Buchanan et al., 2002) investigated the use of syringes by intravenous drug users in Connecticut and Massachusetts. As part of the research, ethnographers followed informants and, with their consent, watched where they obtained their syringes. However, African-American and Puerto Rican informants who hung out with white ethnographers in particular neighbourhoods were more likely to be picked up by the police who appeared to assume that any minority person found in the company of **[p. 105** \downarrow **]** a white person is likely to be purchasing drugs for them. The researchers, and indeed the informants, had to weigh the benefits of identifying which sources might be distributing contaminated needles against the increased possibility that participants might be arrested.

In the second case, Flicker, Haans and Skinner (2004) created a youth-focused Internet health site with an online message board in order to study health-related behaviour among teenagers. Some of the dangers were obvious researchers might intercept messages on sensitive subjects from young people who had no wish to take part in the research. These messages might also be reported in such a way that the senders become identifiable. In addition, the research site could be used as a forum to promote dangerous behaviours and to abuse anyone who objected. By gaining informed consent from participants as they registered to use the site, and by ensuring that the research was anonymous and non-invasive, the research team argued that any risk of harm was minimized. The researchers attempted to meet their community responsibilities by directing users who indicated that they were at risk from self-harm to appropriate professional support. They also moderated postings that were abusive or threatened anonymity and provided reliable health information on a safe and youth-friendly site (for further discussion of risk in Internet-based research, see Sixsmith and Murray, 2001).

Finally, Weinberg (2002) investigated the use of a particular planning document by a maternity home that helped young single mothers in Ontario. Use of this document was a mandatory requirement for homes licensed under provincial legislation. However, Weinberg found that, although the executive director believed the home was complying with regulations, front-line staff had bypassed the legislative requirements. At the

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request of the research participants, the researcher had agreed to provide some benefit to residents by naming those who had helped her with her work. However, if she allowed the licensing authority to identify the home, the home might lose its funding. Weinberg was reluctant to harm an institution that, for all its faults, 'ultimately supported and protected the very young women whom I was concerned about serving ...' (p. 91) and concluded that the potential harm caused by the threat to the home outweighed the minor benefit offered by acknowledging those who participated in the research:

There is no simple, pat hierarchy of ethical principles ... in evaluating the conflicting needs of different participants, the researcher should assign very high priority to the needs of the most disadvantaged in determining which route to **[p. 106** \downarrow **]** take. However, doing no harm also maintains prominence as an ethical principle. Additionally, a researcher must weigh potential costs and benefits, which he or she can determine only situationally. (Weinberg, 2002, pp. 93–4)

The Belmont Report called for a 'systematic, non-arbitrary analysis' (para 1.91.10) of the risks that research may pose to participants and the benefits the work may produce for participants and the wider society. Attempts have been made to reduce the relationship between benefits and costs into financial terms. Costbenefit analysis allows research programmes with different goals to be compared. Although, in principle, any form of measurement could be used, in practice most measurements are expressed in financial terms. Any attempt to reduce relationships into such terms has its problems, partly because the process of reduction often displaces key non-financial values. While the use of costbenefit analysis has gained some purchase within bio-medical and other forms of experimental research, Cassell (1982) and MacIntyre (1982) questioned its value in supporting ethical decision-making by most social scientists. MacIntyre argued that even in more predictable, quantifiable and definable experimental and quasiexperimental research projects, costbenefit analysis could never by itself determine the appropriate course of action as it takes no account of matters of distributive justice who receives the benefits and who bears the costs, and places no constraints on what costs might be morally intolerable. In the less predictable realm of ethnography,

cataloguing potential harms and weighing them against benefits before research is carried out becomes primarily an exercise in creativity, with



little applicability to the real ethical difficulties that may emerge during the conduct of research. (Cassell, 1982, p. 150)

MacIntyre also warned that costbenefit analysis was neither culturally nor morally neutral. In order to decide what counts as a cost and what counts as a benefit, 'we must first decide who is to have a voice in deciding what is to count as a cost or a benefit' (1982, p. 183). This is a concern that can be raised for all harms and benefits. Freedman (1987) argued that any assessment of the value of research requires an investigation not only of the views of academic peers but also the opinions of the community as a whole, including, one would imagine, the many different views that may be represented among research participants. Some studies have started to examine how participants might view costs and benefits. When Milgram (1977) conducted a 12-month [p. 107 \downarrow] follow-up of participants in his obedience study, he found that fewer than 1 per cent regretted that they had participated in the research. In follow-up interviews with participants in his simulated prison study Zimbardo (1973) also found no persistent negative effects (see Chapter 5). However, Warwick (1982) criticized the methodology used in these follow-up studies, claiming that the researchers had adopted exactly those forms of instruments that they had discarded in favour of the simulations in the first place. As we have already discussed, there may be more sophisticated ways of engaging with the views of research participants.

In the field of trauma research, investigators might end up either helping participants reduce isolation and support their recovery or, alternatively, they may retraumatize them. A British researcher engaged in interviewing former cancer patients was not certain how the research experience had been perceived by interviewees:

I was never sure how they really felt ... sometimes they said it was the first time theyd been able to talk about it ... one or two were really quite upset by the experience ... it really worries me. (quoted by Johnson and Clarke, 2003, p. 430)

Other researchers have been more strident in their criticism. Gerard went so far as to characterize colleagues' activities as secondary victimization caused by what he called 'research abuse:

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the practice of researchers parachuting into people's lives, interfering, raising painful old feelings, and then vanishing - leaving the participants to deal with unresolved feelings alone and isolated ... (1995, p. 59)

Similar issues may arise in research on child abuse and neglect. Matters may be particularly complex in the case of participants who have experienced post-traumatic stress disorder with associated emotional numbing or intrusive symptoms. Newman, Walker and Gefland (1999) investigated the perceptions of those adult women who had participated in their research on experiences of childhood sexual maltreatment. Although some women underestimated the upset they thought they would experience, most reported that their participation in the interview- and questionnaire-based study had been a positive experience despite the sensitive nature of the questions.

Similarly, McGrath (2003) found that parents of Australian children with a haematological disorder (akin to leukaemia) had positive attitudes towards a longitudinal qualitative study in which they had enrolled because it had **[p. 108** \downarrow **]** provided a range of benefits, including: opportunities to talk to a sympathetic listener; the release of pentup negative emotions which might otherwise have been imposed on the sick child; the possibility to share their emotional journey with others and break down feelings of isolation; and the possibility that others might benefit from learning about what they were going through. On the basis of his research on cancer patients' experiences of dying, Kellehear (1989) cautioned:

against the arrogance of assuming that comfort and safety are more important to them than their desire to be heard, or their desire to contribute to our attempts to understand them. (p. 66)

It may be difficult to assess how costs, benefits and risks might be distributed across a population both socially and spatially (Smith, 1998). In one situation, the same person may face all the risks and stand to receive all the benefits. However, in another case, one person may bear all the risks while another is likely to receive all the benefits. Alternatively, several people may bear the risks but only a few obtain the benefits or, conversely, all reap the benefits but only a few share the risks. For example, according to Fontes (1998), one Indian researcher decided not to investigate what had happened to women who had been burned by their husbands as a result of disputes

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about dowries. She was unwilling to place the women at further risk. However, Fontes drew attention to the costs of this decision: it also removed any possibility that the women interviewed and women like them might benefit from an end to their isolation and vulnerability. In this case, the researcher had to balance the potential harm to participants against the possible benefits to a larger group of women.

While explorations of research ethics may have concentrated on harms and risks, as a result of clinical AIDS trials, more recent interest has focused on fair access both to participation in, and to the results of research (Kahn et al., 1998; Mastroianni and Kahn, 2001; NHMRC, 2001b; Tri-Council, 2003), on the basis that:

no persons should receive social benefits on the basis of undeserved advantageous properties ... and that no persons should be denied social benefits on the basis of undeserved disadvantageous properties ... (Beauchamp and Childress, 2001, p. 235)

Charles Weijer (1999a), a bioethicist, highlighted the adverse consequences for health provision of excluding women from clinical trials. **[p. 109** ↓ **]** A similar argument might be made for research that influences other forms of social policy on the basis of a sample that excludes ethnic minorities, women, children or the elderly, or people from developing countries (Dresser, 1992; Morrow and Richards, 1996; Nama and Swartz, 2002). For example, until the 1970s, most empirical studies in criminology were of men and boys, leaving issues associated with female criminality, female victimization and women's needs completely under-explored (for example, Smart, 1976).

It may be tempting to over-generalize obligations of beneficence and non-maleficence on the basis of principles developed to meet the needs of medical research. Indeed, several ethical codes do (NHMRC, 2001b). However, research undertaken in the social sciences may quite legitimately and deliberately work to the detriment of research subjects by revealing and critiquing their role in causing 'fundamental economic, political or cultural disadvantage or exploitation' (ESRC, 2005). For example, Israel (1998) explored the violent counter-exile activities of the South African intelligence agencies in the 1960s. He had little interest in minimizing harm to those agencies. Similarly, researchers uncovering corruption, violence or pollution need not work to minimize harm to the corporate or institutional entities responsible for the damage though, as

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far as the Economic and Social Research Council (ESRC, 2005) are concerned, they might be expected to minimize any personal harm. As the Canadian Tri-Council Policy Statement (2003) acknowledges: 'Such research should not be blocked through the use of harms/benefits analysis' (2003, p.i.7).

Early ethical codes were concerned primarily with the welfare of individuals. Recently, ethicists have also become interested in how communities might be protected in research (Levine, 1988; Weijer, 1999b). Weijer and his colleagues (Weijer et al., 1999) identified 23 specific requirements for the protection of communities that had been adopted by national or international research ethics documents.

Of course, we have also noted that there is considerable difficulty in defining a community or identifying what steps might be justified in order to protect one. In Chapter 5 we discussed attempts to negotiate with indigenous communities. Indigenous communities may have shared histories and cultural traditions, can be geographically bounded and may elect their own political representatives (Maori Health Committee, 1998). It may be more difficult to negotiate with other collectivities based on ethnic, political, sexual, professional or other commonalities.

Conclusion

[p. 110 \downarrow]

In most contexts, researchers are expected to develop strategies that minimize the risks of causing physical, psychological, social or economic harm to research participants. These strategies include debriefing after an experiment in psychology as well as the participatory and emancipatory methodologies adopted by feminist, indigenous and activist scholars.

In addition, many researchers seek to provide benefits to participants either as individuals or as collectivities. Researchers in those parts of social science such as disability studies or indigenous anthropology who work regularly with disadvantaged groups are particularly keen to improve conditions for their research groups. Nevertheless, some of their colleagues have been concerned that these goals overstate

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the ability and resources of researchers to achieve meaningful change in the lives of the groups they study. Others have noted that attempts by researchers to help may be judged paternalist, misguided, partisan or simply incredibly stupid. In many regulatory environments, those researchers who investigate more powerful parts of society may have to justify not only their failure to promote the interests of elite groups but also the possibility that their findings might be intended to undermine the privileged positions of such groups.

Many research projects in the social sciences do provide some benefit but at some cost. As a result, researchers may have to assess the relative weight of a diverse array of potential harms and benefits. They may also discover that these harms and benefits have different impacts on, and different meanings to, various parts of a community. Assigning financial values to each element may be attractive in some situations but, in others, such an exercise runs the risk of ignoring key non-financial matters and imposing the researchers' values on participants.

It is not surprising, therefore, that many researchers have found it particularly difficult to use rule-based approaches in the field and have adopted other responses. We suspect that the approach taken by a team of British geographers investigating homelessness may not be uncommon:

The practice of research can never be a neutral exercise. For good or ill, the very act of entering the worlds of other people means that the research and the researcher become part co-constituents of those worlds. Therefore we cannot *but* have impact on those with whom we come into contact, and indeed on those with whom we have not had direct contact, but who belong in the social worlds of those we have talked to. Much of this impact is, frankly, unknown. For every **[p. 111** \(\psi\) i visible occurrence of distress or other harm, there are hundreds of invisible impacts amongst networked actors. Ultimately, such matters are entwined with the need to avoid exploitation of research subjects, and to give something back to them through the research process. These are matters of complex negotiation. There are, and must be, ethical standards 'in the fielD'; ends can never totally justify means. Yet to suggest that a degree of negotiation does not regularly take



place over differential ethical risk, in order to garner material with which to achieve certain ends, is to hide behind ethical standards so as to obscure the real-time dilemmas of research. These dilemmas are most often worked out in particular situated contexts ... (Cloke et al., 2000, p. 151)

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