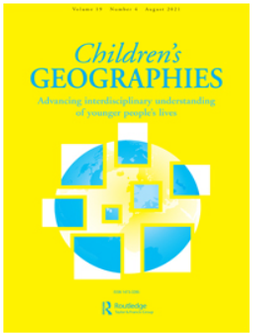

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Unpacking the ethics of access and safety of participants and researchers of child sexual abuse in Ghana

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ABSTRACT

Despite the generous legislative environments that protects children from sexual abuse, the magnitude of child sexual abuse has not changed much in most societies across the globe, especially in Africa. This has been attributed to the limited studies on the subject due to its sensitive and complex nature. Where studies are done, researchers have had to negotiate carefully through the matrix of gaining access and consent, through to ensuring that victims are not further victimized in the process of research. This paper discusses some practical and ethical challenges inherent in researching the phenomenon of child sexual abuse in Ghana. The paper outlines and discusses the undergirding principles and strategies for conducting child-sensitive research to serve as a framework for researches who want to conduct studies on child sexual abuse and other sensitive topics in Africa.

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Negotiating access; child sexual abuse; gatekeeping; preventing harm

Introduction

Many children across the globe continue to be sexually abused daily. Child sexual abuse (CSA) is a phenomenon which cuts across cultures and social status as a result of children's vulnerability (Hanzi 2006). Child sexual abuse is defined as 'any activity with a child before the legal age of consent for the sexual gratification of an adult or an older child' (Johnson 2004, 462). Due to research, there is more awareness about the phenomenon in contemporary times than was the case some decades ago (Townsend and Dawes 2004). Research over the years has given much insight into the experiences of victims of child sexual abuse in many cultures (Collin-Vézina, Daigneault, and Hébert 2013). However, there are limited studies on the topic in some societies, particularly in Africa, due to its sensitivity. Although there has been a wide increase in studies involving the views and experiences of children in social science (Morrow 2008), this is not the case for all societies. Gaining access to research participants has been identified as a major setback for research and researchers mostly spend much time in addressing the situation (Johl S and Renganathan 2010). This is important to ensure that children are not silenced and excluded from research because of over-protection and stress on non-interference often by gatekeepers (Alderson and Morrow 2011, 19).

There have been debates on appropriate ethics to employ for research involving children due to their vulnerability (Morrow 2008). Nevertheless, it is recommended that the best interest of children and the protection of their rights should be paramount in all studies involving children (British Educational Research Association 2004). Alderson and Morrow (2011) emphasize that researchers should always ensure that they use the most appropriate method that seeks to protect children from all forms of harm when working with them. In their book, 'the Ethics of research with children and young people: a practical handbook' Alderson and Morrow, suggest 10 critical questions that

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should be asked in any research with children. Though all these critical questions are important, the sections on consent and assessing harm and benefits are most relevant and essential to this paper. They provide a framework on how harm, risk and potential benefit should be addressed when conducting research projects involving children, as well as how to plan and execute research ethically with children (Alderson and Morrow 2011).

James and Prout (1990; 1997) believe that in childhood studies, children should be perceived as active participants who can influence happenings around them. Unlike developed countries, children in the developing world, are mostly regarded as 'invisible participants in society' (Morrow 2008, 52). When the competence of children are devalued, there are doubts in the data gathered regarding their experiences (Morrow 2008). However, in a model proposed by James, Jenks, and Prout (1998, 32), the 'social structural child' is considered as 'a body of social actors, and as citizens who have needs and rights'. This means ethical guidelines should be carefully considered in studies involving children. Some of the key ethical issues to consider when conducting research that involves children according to (Morrow 2008, 52) include the competencies, perceptions and frameworks of reference which may include culture, age, gender, ethnic background and personal characteristics. Further, children are at risk of being exploited and adults have specific responsibilities towards children (Lansdown 1994; Morrow 2008, 52). Hence, children should be protected in sensitive studies that involve them.

Cultural differences, religion and other social factors largely play a role in the construction of childhood. The social construction of childhood defines the ideal relationship between children and adults. For instance, sexual discussions between adults and children are commonly viewed as a taboo in some societies in Ghana. In many situations, researchers are easily regarded as 'outsiders' or intruders and are often not welcomed (Okumus, Altinay, and Roper 2007). Research skills are therefore very necessary in gaining access to such 'difficult to reach population' (Neuman 2007; Wasserman and Jeffrey 2007). Although the importance of gaining access to research participants in sensitive studies has been acknowledged by researchers, there are very limited studies in that area (Feldman, Bell, and Berger 2003), especially in Ghana. This study therefore moderately contributes to the literature by sharing our experiences in gaining access to research participants in this qualitative study that involved child sexual abuse.

Conducting interviews on such topics can 're-traumatize survivors' (Baird and Mitchell 2013, 21) and victims. The safety of children who have been sexually abused is principal and this decision should be carefully considered in the interview process (Baird and Mitchell 2013). It requires asking the question of whether 'the research is worth doing'? (Alderson and Morrow 2011, 11). This is because victims of child sexual abuse are children who are mostly hurt by close relatives and friends they trust. These vulnerable children have the potential of not trusting anyone and become afraid of being harmed again. It is therefore essential to assure victims of secrecy prior to the interviews. Also, the emotions of research participants during interviews on sensitive topics like child sexual abuse make it important for researchers to exercise precautions in order to avoid the perception of being exploited by strangers (Baird and Mitchell 2013). This would ensure that the research participants are able to trust and have confidence in the researcher (Abrahams 2007). Against this background, this paper describes the process of negotiating access and the measures taken to protect victims of child sexual abuse from being harmed as a result of the research process. We document the process and the logic that influenced the choices made during the research process to ensure the safety and wellbeing of children in an African context. By doing this, we provide a reference for researchers on how to negotiate access and ensure the safety of child or vulnerable populations and researchers during research in similar contexts to conform to good ethical practice.

Conceptual framework: constructing the reality of sexual abuse-the influence of stigma

The epistemological perspective employed in this paper is the marriage between social constructionism and stigma. Berger and Luckmann (1967) define social construction as the subjective meaning

people give to reality through their daily interaction. This approach is employed to understand child sexual abuse among the Ga from the experiences of the victims of child sexual abuse. Essentially, social constructionist' argue against the idea that only one reality of child sexual abuse exists in the world and supports the view that alternative realities exist (Yerby 1995). These alternative realities are often coloured by stigma. The United Nations Convention on the Rights of the Child (1990), establishes the right of children to be protected from sexual abuse. In Ghana, many of the stipulations of this law do not reflect the reality of children who are sexually abused in the Ga community. In fact, many people, whether as victims, perpetrators or researchers are conscious of the stigma associated with child sexual abuse. Child victims' (non)disclosure and reluctance to recount experiences as well as perpetrators brazenness and sense of anonymity emanate largely from both parties' awareness of the effects of stigma which creates a possibility of abused children to not being believed. This often lets the perpetrator off the hook and the victim further victimized. Thus, we explore how stigma influences the experiences and construction of child sexual abuse from different perspectives. Indeed, the actual experience or imagined presence of stigma creates conditions of silence and sensitivity around the phenomenon which requires careful ethical navigation. The purpose of this paper therefore, is to discuss the practical ethical issues encountered during our research of child sexual abuse. Our aim is to present readers with a contextual appreciation and application of ethical rules and not necessarily to generalize the findings.

Methodology

The study employed a qualitative research design, which was relevant because it allowed the researchers to capture the subjective views of the research participants' perceptions and unique experiences of sexual abuse (Neuman 2011). The methodology used to obtain data was largely influenced by the ethical principles of beneficence and safety to participants and researchers as well. The guiding question was how to go about conducting the research without exposing any of the victims of sexual abuse to further harm than they had already experienced. This consideration is important because research can 'intrude into people's lives and cause them great distress and embarrassment' (Alderson and Morrow 2011, 24). Again, we asked how we could do this without compromising the scientific principles or shying away from asking the critical questions? How do we create that balance to ensure that we get authentic data but not at the expense of respondents' well-being and safety?

Data were collected from 17 sexually abused children from the three selected largely indigenous Ga communities of Teshie, Jamestown and La. The traditional Ga community was chosen because of where it is situated, Accra, which is highly populated and has a very high incidence of CSA (Tetteh and Markwei 2018). Statistics from the Domestic Violence and Victims Support Unit (DOVVSU) of the Ghana Police Service, shows that the Greater Accra Region alone recorded 1,466 cases of CSA in the first 9 months of 2014 (DOVVSU 2014). This figure was described by many child rights advocates and the media as alarming. Further, the traditional Ga community provides the context to explore how meanings, interpretations and experiences are created and impacted by the community within which one finds himself (Tetteh and Markwei 2018).

Given that victims of sexual abuse are difficult to reach population, the sample was reached using pre-established networks in the community as well as a snowballing method. These participants were conveniently selected based on their availability and willingness to be interviewed. The initial plan was to interview more victims of child sexual abuse in the communities. However, this was not possible as a number of identified respondents were not willing to participate in the study due to the sensitive nature of the topic. As a qualitative study, a large sample size was not a priority; the focus was to engage a number that was available and willing to participate and provide in-depth insight into the phenomenon. The criteria for inclusion in the study were: children must be aged between 10 and 15 years, should have experienced child sexual abuse within the past six months prior to the study, lived in the selected community and willing to participate in the study. The victims of child sexual abuse

interviewed in this study were all females except one who was a male. Although the researchers initially identified more than one male victim for the study, the others did not give their consent. The ages of the respondents interviewed ranged from 11 to 15 years. Although the study allowed for the inclusion of 10-year-old children, the researchers did not get any respondent of that age. It was noticed from the data that almost all the respondents were Christians except two who did not belong to any religion and two others who were traditionalists. With regards to their educational background, almost all the children had low educational background; five of them had never been to school, 10 were school dropouts and two were in primary school. The family structure of the victims of child sexual abuse was presented as follows: 10 of the children's parents were either divorced or separated, three were deceased; two were born out of wedlock while two lived with both biological parents.

During the interviews, open-ended questions were employed to allow the children to respond freely and openly to the topic discussed. Respondents were seen as active participants whose insights, feelings, and cooperation were essential parts of the discussion process which revealed their subjective meanings (Kreuger and Neuman 2006). We were however not oblivious of the fact that participation and the need to be heard, though critical, do not fully embody the welfare of children. The in-depth interviews conducted for this study enabled the researchers to get detailed information on the lived experiences of the victims of child sexual abuse in the Ga Community. Children had the opportunity to be heard, but also to build their competence and self-confidence and knowledge deriving from the opportunity to talk to an attentive listener about their situation (Alderson and Morrow 2011, 29) All the interviews were conducted in the Ga language because participants stated they were comfortable using that. The interviews were translated verbatim into English by a translator in consultation with the authors to maintain the authenticity of the meanings produced from the narratives. The interviews lasted between 45 minutes to one hour. The instrument was pretested through a pilot study in one of the communities (La).

Thematic analysis was used to organize and categorize the data according to patterns and structures that connect the themes (Polit and Hunger 1997). The purpose of this was to have a full and clearer picture of the subject. Patterns in the data which included recurrent behaviours, beliefs, and practices (Neuman 2007) were noted and analysed. Ethical clearance was obtained from the Ethics Institutional Review Board of the Noguchi Memorial Institute for Medical Research (IRB-NMIMR). Additionally, the ethics employed in the study are reflected in the ethical framework proposed by Morrow (2008) for researching children. These ethical considerations included the process of obtaining consent, ensuring privacy and confidentiality, obtaining children's perspectives on the research, reporting back to the research participants, choosing pseudonyms and drawing out policy implications from the research (Morrow 2008, 4).

Negotiating access-meandering past gatekeepers

Gaining access to research participants in the field of study involves a lot of planning and hard work (Van Maaren and Kolb 1985) especially where the participants are children, and/or the phenomenon to be studied is a taboo/hidden or stigmatized subject. It involves getting in touch with many people to be able to build rapport with the community members (Feldman, Bell, and Berger 2003). Based on this, the data collection was carefully planned. Efforts were made to meet people and gatekeepers to build rapport and gain trust. There are four stages that need to be considered when negotiating access into the research field; these include getting in, getting on, getting out and getting back (Buchanan, Boddy, and Mc Calman 1988). The *Getting-in* stage looks at measures taken before going to the field, *Getting-on* refers to activities on the field while *Getting out* is exiting from the field and *Getting back* talks about going back to the research field for a clarification or future study (Buchanan, Boddy, and Mc Calman 1988). These four-pronged interrelated approaches by (Buchanan, Boddy, and Mc Calman 1988) provided the framework that guided the process of gaining access to the study site and participants.

Getting-in-the role of layered gatekeepers

A lot of planning went into developing the appropriate measures to use to gain access to the research participants. In an indigenous setting like the Ga community, it was necessary to gain access to an indigene or a person, known in the area. Getting an indigene who clearly understood our study and communicate it effectively to the community was not an easy task. The first person that was recruited and used for the pilot study, was disengaged after a few interactions with him because it was realized he was not able to communicate the purpose of the study clearly to the indigenes. However, through further consultations and search, a competent replacement was made. An indigene who was knowledgeable in the traditional custom, had good communication skills and was well-known in the community was engaged as a research assistant. The research assistant was trained on the purpose and ethics of the study and his role in the study. The research assistant provided some insights into the Ga culture which was necessary in building an understanding of the community and facilitating interactions and trust with the community members. He served an important role as a liaison to the communities studied. He helped in building relationships with the gatekeepers in the communities. In fact, the research assistants's 'personal access' was used to establish entry into the communities (Johl and Renganathan 2010). He assisted and facilitated informal calls and meetings for information from people (Johl and Renganathan 2010). This was very expensive to do because a lot of calls had to be made which sometimes yielded very little results. Several visits were made to the community in order to make contacts. Making contacts with people known and relatively popular in the community was necessary because such persons informed the community members of the impending data collection and assured them of the confidentiality of the information they would give during the process.

Thus, recruiting a research assistant not only facilitated the process of gaining access to the community, but also helped to build trust and rapport with respondents. For instance, during one of the informal visits to the community, researchers were nearly attacked by the youth in the community with the assumption that we were journalists coming for negative reports from their community. However, upon seeing the research assistant they backed off. He explained to them our mission and the relevance of the study to their community. They then assured the researchers of their support and protection during the data gathering process. For instance, one of them said 'Do not worry, you are now one of us. No one can hurt you, relax and go about your duties. We are here to protect you (smiles).' This means, working with an insider is very important in researching into sensitive topics in most African communities including Ghana (Johl and Renganathan 2010).

Getting-in to the community also required a series of meetings with the gatekeepers in the study area, notably the leaders of the men, women and youth groups. These are important personalities who are gatekeepers in the community due to the power and authority they wield and the following they command. These gatekeepers helped to establish relationships with informants (Feldman, Bell, and Berger 2003). The suggestion that the first meeting between a researcher and the key actors should usually focus on self-introduction and presentation of the research (Matthiesen and Richter 2007) was followed. This is necessary because a good impression about the researcher and the project at the first meeting can determine the success or failure in gaining access to the research participants (Bernieri and Gillis 2001). Based on this, the researchers of this project were duly introduced to the gatekeepers. The gatekeepers were provided with detailed information about the purpose of the study and the expected outcomes. During this meeting, they received explanations on how they could assist, the duration of the study and the relevance of the data that would be obtained. (Bell 1993; Hall and Hall 1996). We ensured that our physical appearance and mannerisms were in line with their culture (Martin 2005). A series of meetings followed subsequently to enhance relationships and contacts (Matthiesen and Richter 2007).

These first-line gatekeepers (women, men and youth leaders), acted as liaisons between us and the second line of gatekeepers – the family heads known as the 'weku onukpa' who are greatly revered in the Ga community. The 'weku onukpa' expected financial and other tokens from the researchers

before granting access to the respondents. Upon careful consideration and consultation with the research assistant, bottles of schnapps and a token amount of money, were presented to the family heads as is the Ghanaian custom when one comes before traditional authority. These items were mere tokens and not of the magnitude to influence our engagement with them. We, together with the gatekeepers explained the purpose of the study to the family heads to facilitate their granting us access. The informal interactions with the family heads helped the researchers to gain the confidence and trust of the community members which was essential in the data gathering process (Wasserman and Jeffrey 2007).

The family heads subsequently led us to the parents/families and victims of child sexual abuse. Thus, though the family heads wield a lot of power among the Ga, they still needed to speak to the parents of these children before we could engage them. Indeed, the family heads knew which families and homes to lead us to because most cases of child sexual abuse in the Ga Community were first reported to them for arbitration.

The final stage of the getting-in process was a meeting with the research participants-the parents and the child victims of abuse. We briefed them on the purpose of the study and their role in the data gathering process. In all the instances, though we tried to get the consent of both parents of the child, we often only met and got the consent of the residential parent. They voluntarily narrated the experiences of the abuse of their children to the researchers because they hoped our research would provide an outlet for their stories to be heard and provide opportunities to obtain justice for their abused children. We explained clearly that our aim was not to get them justice in the courts and in fact, we did not have such power. However, it would be useful to speak to us to enable us document the experiences of their children to gain an understanding of their experiences.

Having negotiated our way almost in, past these gatekeepers, we needed ultimately to get the child victims to agree to speak to us. We met and interacted with the victims of child sexual abuse at different times to build rapport and gain their trust and confidence. The interactions also made the victims of child sexual abuse feel at ease with the researchers. It was after building this rapport with the children that we asked their consent to participate in the study. Farrell and Danby (2005) posit that young persons are competent to indicate their desire to participate in or withdraw from a research. To enable children give consent that is informed, we explained the objectives of the study to them in simple English and in some instances the local language (Bryman 2008, 445). Following Dockett, Einasdottir, and Perry's (2009) guidelines on how to obtain consent, participants were further briefed on the time and commitment required of them and the potential distress they might feel recounting their experiences. This consent was re-negotiated throughout the interview process to ensure that children's initial and continued participation in the process was voluntary (Alderson 2004). We emphasized to the child respondents the right to not answer a question they were uncomfortable with and the right to exit the interview at any point in time without any consequences to them (Veale 2005). Both parental consent, and children's assent were obtained using written consent forms where these were literate; otherwise an oral consent was obtained and recorded.

Preventing risks: *getting-on* with data collection

Though the processes of getting-on and getting-out are all associated with different levels of access negotiation, they typically are associated with, and require adherence to some ethical standards to provide safety to both participants and researchers. The first step in the process of *getting on* began with the 'bracketing' of the researcher's assumptions and knowledge concerning the phenomenon (Langdridge 2007; Morse and Richards 2002). The researchers, being Ghanaians with their own personal thoughts about child sexual abuse, endeavoured not to view the stories from their own perspectives. Reflecting on our positionality was critical to avoid the risk of distorting victims' stories and realities with our definitions of the situation. Being both mothers with daughters, we could empathize with what the mothers of the abused children may be feeling. We were however very conscious of the need to 'balance the potential harm (emotional distress and tearfulness) that may be

caused by interviews against the potential benefits of the research for children … ' (Evans and Becker, quoted in Alderson and Morrow, 2011, 28). Thus, we were conscious of our own potential and real distress and emotions (Ansell and Van Blerk 2005) as well as that of our respondents. In those moments when participants seemed distressed, the interviews were paused and conversations were drawn to less distressing subjects such as what respondents want to become in future (Tetteh 2013). Some interviews were suspended and continued on different days.

During the fieldwork, the researchers dressed casually to identify with the community members. This was important so as to not intimidate the victims and their families and to bridge the age and social status gap between the researchers and the former. Irrespective of this adjustment, there were times the community members could not identify with them due to some variations in the clothes they wore. However, through consultation with the research assistant, the researchers attuned themselves with their style of clothes.

All the interviews lasted between 45 minutes to an hour. The children were made to know that there was no right or wrong view on any of the issues discussed and that they were free to express themselves. Despite this assurance, there were times when the participants wanted to consult with their parents and guardians to confirm the appropriateness of their answers. The researchers had to tactfully convince them that no answer was wrong, but allowed them to consult their parents. This situation is common in research with children. Some children may prefer to be interviewed with their parents to have the latter help them to provide fuller insights. It may also be to ensure a family's privacy (Alderson and Morrow 2011). For instance, Akweley, an 11-year-old girl who was interviewed said, 'please let me call my mother to join us. I do not want to make any mistake. She knows everything and she will correct me when I make a mistake'. These parental consultations delayed some of the interviews. Recorders and field notes were used to record data in cases where respondents gave permission for their use. In situations where participants were not comfortable with the use of recorders, the interviews were recorded in notebooks. Before conducting each interview, the children were encouraged to relax and feel comfortable with the questions that were asked. Also, the relationship between the researchers and the children was that of 'openness, compassion and gentleness' (Matthiesen and Richter 2007, 24). Children were made to feel very comfortable with the researchers and could ask any question that they were unclear about. This 'intimacy' between us and the respondents was achieved by using several 'sympathetic techniques' as postulated by (Alderson and Morrow 2011, 39).

Ensuring the safety of research participants

According to Alderson and Morrow (2011), researchers working with children have the responsibility of protecting them from physical and psychological harm. Furey et al. (2010) state that children should be safeguarded during research and this includes protecting children from maltreatment, preventing impairment of children's health or development and ensuring that children are growing up in circumstances consistent with the provision of safe and effective care. In conducting a sensitive research like child sexual abuse, there are measures and ethical considerations that are necessary in protecting the research participants from any harm. It is no exaggeration to say that the physical safety and mental wellbeing of both respondents and the research team can be put in jeopardy if adequate precautions are not taken. Based on this, careful steps were taken to protect the participant's safety. These steps related specifically to ensuring anonymity, confidentiality and preventing distress. The participants were assured of confidentiality by maintaining the confidence of data from other respondents and the general public. Both parents and children were assured that anonymity would be maintained by disguising their names through the use of pseudonyms and codes. The children were also told to express any emotions they felt during the interviews. For example, they were allowed to cry if they felt like doing so. In such cases, their consent was renegotiated for the interviews to be conducted at a later date if they so desired-otherwise we terminated the interview. Researchers did not probe into areas that respondents preferred to keep private. Distress was

minimized through the use of consoling phrases and refrains: in situations where children seemed distressed but agreed to continue the interview. Researchers had received prior training and tips from the counsellors on the use of appropriate and effective phrases and body language that minimize harm when interviewing children on issues that cause distress. For instance, researchers learnt to not say 'it is nothing', a typical phrase used to console people in the Ghanaian context, as using it would suggest trivializing the experience of victims and potentially or actually muting them from sharing that experience.

During the interviews, some child respondents were visibly traumatized as they recounted their experiences. In such situations, they were referred to professional counsellors at the Department of Social Welfare for counselling. Despite the availability of this free service, some of the participants who were traumatized were not willing to see any professional. This position can be explained as emanating from the perception by many Ghanaians that persons who seek psychological counselling are mentally unstable. Respondents perceived that using the counselling service held further potential for stigmatization as their identity and story may get to be known by others. We respected their decision to not use the service where they did not want to, but made them know the service was still available to them should they change their minds afterwards. Thus, we exercised sensitivity by respecting the feelings of respondents and ensuring that participation in both the study and counselling services was voluntary and not through coercion.

The ethical guidelines for conducting sensitive research by (Alderson and Morrow 2011; Furey et al. 2010) states that providing a safe environment should be a priority for conducting interviews. This was done by asking participants to suggest a place they deemed safe and convenient to express their views freely without any intimidation. The researchers also consulted with the parents/guardians and key personalities in the communities with the approval of the children for safer places for the interviews to be conducted. This was to enable the respondents express their experiences openly and freely. However, agreeing on a safe place did not come easy as children's levels of trust had been compromised due to their experience of abuse. It took several days for them to decide on the places they deemed safe before agreeing to be interviewed there. There were times some participants agreed on places they deemed safe only to change their decisions on the day of the interview. New locations subsequently chosen by them were used in such instances.

Getting out and getting back to the field

Ending a fieldwork can be very challenging for the researcher and the participants due to the emotional attachment that develops during the research process (Matthiesen and Richter 2007, 147). It was very difficult for the research participants and the community members when the data collection came to an end because this was seen as an end to a good relationship. For instance, some of the children considered the researchers as persons who cared about them and willing to share their stories to the world. For example, in the words of Laale, a 12-year-old girl who was sexually abused by her father 'Aunty, please can I talk to you anytime I am sad? I want to be happy again so I can become the medical doctor I have always dreamt of becoming'. This was mostly so because there were no counselling services in the community where children could receive counselling and be guided on issues concerning their lives. Sometimes, family members and some few community members whom children could confide in did not believe their stories of abuse or were disinterested because they perceived the children as having brought this on themselves (Tetteh and Markwei 2018). This is illustrated in the story of Ataami, an 11-year-old girl who was sexually abused by a neighbour:

> Nobody believed me when I told them I was forcefully abused by brother Kwodjo. When I got pregnant, my mother was very angry at me and blamed me for having a boyfriend and engaged in sex with him. I pleaded with her to believe me but she sacked me from the house and asked me to live with my Uncle for being promiscuous. I explained the situation to my Uncle but he just smiled and said I was making up the story up. I know the truth will surely come out someday. Madam, please how can I get my family to believe me?

The children thus, viewed the researchers as persons they could trust and confide in. These children sometimes called and met with the researchers on the field at different times to pour their hearts out to them. For example, Naa Ashorkor, a 12-year-old girl who was defiled by her father, asked to meet one of the interviewers to clarify some issues concerning her abuse. On the said date, she said:

> Madam, please there is something that has been bothering me for some time. Do you think a father would abuse her own daughter? I do not believe he is my real father because he has been so wicked to me. How do I get to know if he is my real father or not? Please help me.

Thus, from the perspective of the participants, ending the research meant something valuable had been taken away from them. However, the researchers assured them that although the data collection had ended, they remained a part of the community. It is always necessary for a researcher to leave the research field on a good note and leave a 'route back through the maintenance of contacts' (Matthiesen and Richter 2007, 147). This is essential because the researcher may have to go back to the field for clarification on some aspects of the collected data or for future studies. In view of this, the researchers had to plan their exit from the field tactfully. We had to meet with the gatekeepers and elders of the community to thank them for allowing us into their community. The researchers also explained to them what could necessitate a comeback to the community and received an assurance of continuous support should we return.

Ensuring safety of researchers

It has been recognized that, conducting research that is sensitive or related to violence does not only pose a risk to the participants but the researchers as well (Etherington 2007). This situation can be stressful to the researchers and possibly affect the credibility of the studies (Williamson 2007).

To mitigate these effects, a number of measures were put in place to protect researchers. First, obtaining the approval of the legitimate layered gatekeepers and having a research assistant who was an indigene of the community provided physical security to researchers. We were not seen as 'intruders' but as 'guests' of the community who should be protected. Thus, the local groups in charge of security in the community were aware of our presence. This facilitated our movement in the community largely; but there were a few times when we still needed our assistant to go along with us to some areas in the community to conduct interviews. We were assured that the police would be on hand to help should we encounter any violence from any person or group of persons. Thirdly, a safe place for the research was provided by key personalities of the community which was approved by the parents and guardians of the participants. These were often the places that the children had also selected and considered safe. Finally, safety for the researchers was ensured through a debriefing session and counselling by a professional psychologist in order to minimize trauma or any form of emotions that were generated during and after the interviews.

Conclusion

In this paper, we have described and discussed some of the pertinent ethical issues and dilemmas encountered in researching a sensitive subject such as child sexual abuse in an African context. The ethical principles employed were mainly to ensure respect and the rights of participants, prevent harm and protect respondents. We acknowledge that given that ethical processes are not universally applicable, the approaches adopted in this study may not be appropriate in other contexts. However, the ethical principles followed in here, ensured that the community was entered properly and parents, children and gatekeepers' rights and authority were respected. Children's rights were further ensured by obtaining their consent and giving them room to determine where to be interviewed to ensure privacy, whether to continue participation and/or use counselling services. We ensured that our respondents were not harmed by following the strict ethical principles of confidentiality, anonymity and the right to privacy. When research assistants and counsellors assisted researchers, they

conformed to these same ethical principles. In sum, we posit that ethical research requires careful planning and re-planning. There is need whilst upholding standard ethical rules, to be flexible as ethics needs a contextual and a situated approach. Thus, the only constant in conducting a research such as this is to be ethically sensitive but there is no closed-jacket approach on how the ethics can be applied as these are influenced by the values, beliefs, cultural sensitivities, context, age of respondents and the sensitive nature of the research subject.

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