Participatory Methodology:
An investigation into its use with primary school children in mapping HIV/AIDS as a barrier to learning in KwaZulu-Natal

by

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DEDICATION

This thesis is dedicated to my father and mother

Chirpanah & Applamma Naidoo

Your greatest investment in me was that you educated me.
Those seeds are still bearing fruit.
I am forever grateful to you.

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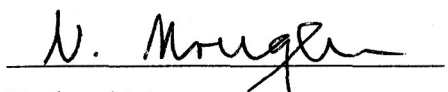
Declaration

I declare that this is my own work. It has been submitted in partial fulfilment of the requirements for the Degree of Master in Education (Psychology of Education) in the School of Education at the University of KwaZulu-Natal. It has not been submitted before for any degree or examination in this or any other university.



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ABSTRACT

This study examines the use of participatory methodology with primary school children in mapping HIV/AIDS as a barrier to learning in KwaZulu-Natal. The study draws on a larger National Research Funded (NRF) Project[1] undertaken in the Richmond area of KwaZulu-Natal. Data was produced through semi-structured interviews of six researchers involved in the NRF project; through document analysis of the data sets involving the learners and facilitators, the NRF project report and the related journal articles based on the project; and through field observation conducted by me. The findings of the study suggest that in research on HIV/AIDS it is essential to seek participatory ways of enabling children's voices on the pandemic as it unfolds in their context. High researcher reflexivity is necessary in order to become sensitive and responsive to the challenges of including children's voices in vulnerable circumstances. Findings also suggest the importance of viewing ethics as situated practice. The study ends with implications for research methodology courses, researcher training and evidence from children for policy on HIV/AIDS.

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CHAPTER 1

INTRODUCTION

South Africa is celebrating a decade of democracy, freedom from apartheid rule and human rights and dignity for all. However, looming in the shadows is the HIV/AIDS pandemic that affects all its citizens. The situation is particularly adverse for children and youth. First, with parents and adults sick or dying, young children carry the burden of caring for siblings and family members living with HIV/AIDS. Second, a significant number of children are themselves infected with the virus (Moletsane, 2003). Yet children's experience with the HIV/AIDS pandemic is mainly voiced through adults who act and speak on their behalf (Oakley, 1994).

Article 12 of the United Nations Convention on the Rights of the Child 1989 clearly states that children and young people have a right to be involved in decisions and matters that affect them. As such, the Convention places unprecedented value on children as people in their subjective worlds. Article 12 recognises the right of children to express their views on matters of concern to them. The views of children are given due weight in accordance with age and maturity. Article 13 provides children with the right to freedom of expression. These Articles have led to greater recognition of child participation and listening to children's meanings about their lives. Children have been increasingly involved in research, consultations, campaigning and advocacy, peer education and support, programme design, implementation, monitoring and evaluation, media work, policy analysis, conferences as well as the development and running of their own organizations (Hart, 1992).

However, Lansdowne (2004) argues that the primary emphasis in the work with children has involved older children in activities designed to provide new forums through which they can be heard, rather than on working within those institutions which have greatest impact on younger children's lives – family, school, health care and early years' provision. There is a pressing need, therefore to explore approaches which address the rights of younger children to participate, within the context of the school.

In South Africa, the ratification of the UN Convention of the Rights of the Child in 1995, serves as the official endorsement of children as players in their own lives (UNICEF, 1989). South African research with active participation of school age children is on the increase (Children's Institute, 2003; Nelson Mandela Fund, 2005; Van der Riet, Hough, & Killian 2005; Naicker, 2005; Govender, 2007; Ebrahim & Muthukrishna, 2005). To add to this body of literature, this study aims to investigate the participatory methodology used in the National Research Funded (NRF) project (2004, 2005) in KwaZulu-Natal with primary school children in mapping HIV/AIDS as a barrier to learning.

1.1. The NRF project (2004, 2005)

The project in KwaZulu-Natal referred to as the NRF project (2004, 2005), was funded by the National Research Foundation of South Africa. The project sought to examine barriers to basic education that may have been precipitated by the HIV/AIDS pandemic. The research context was the town of Richmond in KwaZulu-Natal. It serves the farming and forestry communities, and is surrounded by semi-formal and informal settlements and outlying farms and rural settlements.

The area has been hard hit by the HIV and AIDS pandemic, being situated in a province with the highest HIV - positivity rate (over 40% in 2004), and one which, despite predictions to the contrary, is ever increasing (National Department of Health, 2004). Van der Riet et al (2005) concur that the high population mobility, high unemployment, and the sustained social fragmentation have contributed to the extremely high rates of HIV/AIDS in the town of Richmond.

Prior to the project, a review revealed that much of the literature on HIV/AIDS in education has generally focused at the macro-level of national education systems within a quantitative research approach. In particular, this body of literature has drawn attention to the destructive impact of the pandemic on teacher numbers, learner attendance, and systemic management (School of Education, Development and Training, 2005). Little attention has been given to the micro-level of analysis of the effects of HIV/AIDS on particular schools and communities, and the concrete experiences and responses of educators, learners and parents regarding HIV/AIDS.

Furthermore, a study by Huber and Gould (2003a) suggests that micro-level research, using more qualitative and participatory methods, may elicit very different information and offer valuable insights. The research team of the NRF project (2004,2005), therefore, felt that there is need to complement the quantitative, macro-level studies with qualitative, micro-level research into how participants experience and make meaning of HIV/AIDS at a local level within the education system in order to fill this gap in the literature.

The NRF project (2004, 2005) was in the form of an in-depth qualitative case study located within a participatory research framework. The study with the learners attempted to capture their voices and obtain rich qualitative data through individual interviews and focus groups engaging in various participatory research techniques such as transect walks, vulnerability matrices, ranking exercises, social mapping, time lines, and venn diagrams. The study with the learners involved three high schools, five primary schools, two adult basic education centres, a school for the Deaf, and two early childhood centres (ECD). The geographical location of the schools ranged from rural, urban, deep rural, and peri-urban.

1. 2. The purpose of my study and research questions

Research studies with children have increased but there are many methodological and ethical challenges experienced when researching child participants. Jones (2004) and O'Kane (2000) cite unique challenges that are experienced in conceptualizing and implementing the research process when doing research with children in a marginalized context. Van der Riet et al (2005) concur that especially in developing contexts; the ethical and methodological issues are interrelated and result in inherent tensions in the research process. In their study with the learners in the NRF project (2004, 2005) they cited the following challenges viz. the dynamics of power relations that exist between adults and children; the stress and trauma related to researching a sensitive issue; the culture of silence, due to the stigma related to the HIV/AIDS pandemic, that affects the degree of open discussion; the language and race differences between researchers, facilitators and learners; finding ways to access credible data; and facilitating the expression of the children's voices.

My study aimed to gain a deeper understanding of the methodological and ethical challenges when participatory methodology is used with primary school children in the context of HIV/AIDS as a barrier to learning.

The main research question was:

What are the methodological and ethical challenges that exist when using participatory methodologies with primary school children in mapping HIV/AIDS as a barrier to learning?

The sub-questions to deepen understanding of the above were:

- What are the procedural considerations when using participatory methodology with children in primary school within the context of HIV/AIDS?
- What are the strengths in the use of participatory methodologies?
- What are the challenges that researchers face when using participatory methodologies?
- What are the ethical issues that frame the use of participatory methodologies and how are these dealt with?

1.3. Research Approach

I used a qualitative approach because it is well suited to gage an in-depth understanding of the phenomenon under study. Firstly, I interviewed six researchers from the University of KwaZulu-Natal working on the NRF Project in Richmond exploring barriers to learning amongst primary school children in the context of HIV/AIDS. All six participants used participatory methods to produce data and they had varied levels of expertise. Among the participants were the project leader, senior and junior academic staff , masters' and doctoral students, a sign language facilitator and an IsiZulu/English translator. The primary instrument used for data collection was semi-structured interviews. This allowed me to understand the experiences of the researchers I interviewed, and the meanings they made of those experiences (Seidman, 1991).

Secondly, I engaged in document analyses of the data sets involving the learners and facilitators, the NRF project research report and the related journal articles based on the project. These data sets were important bases of information as they gave me further insight into understanding how notions of participatory research were embedded in the data collecting process.

Lastly, I observed three focus group sessions conducted at a primary school as a non-participant (Mouton, 2003). This enabled me to gain an insider's knowledge, into the processes involved in using participatory research methods with children.

A limitation to my study is that I had a small sample group of six researchers as participants. I also observed three out of the four focus group sessions in one school only. Hence, the study cannot be generalized. However, this is not an obstacle in qualitative research that seeks in depth context specific information rather than general trends.

1.4. Theoretical Framework

My framework was exploratory and qualitative in nature. I used ideas from the interpretive and critical theory paradigms. Neuman (2000) states that an interpretivist researcher seeks to provide detail description of social settings, interactions and phenomena thus enabling the reader to step into another's social reality. Working within this framework, I collected my data using participant observation and data analyses of transcripts of conversations. This enabled me to capture participants' frame of references and their context to understand how they engaged with the participatory methodology. The HIV/AIDS pandemic is context bound and there are adults and children involved in the research process. Hence, issues related to power imbalances that exist between adults and children and the child being valued as a research participant with equal rights would come into play.

Burawoy's extended case method (Cited in Neuman, 2000) requires that critical researchers constantly build and rebuild theory. This takes place in a dialogue with the people studied and in a dialogue with other researchers in the scientific community. I did this by interviewing researchers who used participatory research methods with learners in

the NRF project in Richmond. This enabled me to go beyond surface illusions to identify grey areas that may require change in the use of participatory methodologies (Neuman, 2000).

A further theory that underpinned my research was the social construction of childhood. Until recently, understanding young children was largely dominated by positivist orientations (Woodhead & Faulkner, 2000). Young children were treated as depersonalised objects in research. Qvortrup, Bardy, Sgritta & Wintersberger (1987) concur that notions of incompetence and immaturity portrayed children as 'unreliable witnesses in their own lives'. This means that children were viewed as passive, uninformed people who cannot provide information of their experiences for research purposes.

However, the new sociology of childhood accentuates childhood as a distinct and important phase where the construction of human experience has value in its own right (James & Prout, 1997). This changing concept of childhood is creating new conversations about how we understand young children and their role in research (Mitchell & Reid-Walsh, 2002; Prout, 2005). Children are seen as experts, who are knowledgeable about their lives and provide information as they 'act, take part in, change, and become changed by the social and cultural world they live in' (Christensen & Prout, 2002).

Mitchell and Reid-Walsh (2002), point out that a perspective such as the social construction of childhood highlights key challenges in terms of research methodology. Child participation should be at the centre of any response to HIV/AIDS concerning infected or affected children. Mayall (1994), states that it is possible to ensure full child participation in research design, implementation and evaluation procedures and to redress the power imbalances through the use of enabling data collection techniques. O'Kane (2000) concurs that participatory techniques and methodology are very useful in providing young children with a platform from which they can talk about issues that affect them. It is within this theoretical framework that I investigated the use of

participatory methods when doing research with primary school children in an HIV/AIDS context.

1.5. Rationale for the Study

My personal interest in investigating the use of participatory methodology with children arises from my vocation. As Head of Department in a primary school, one of my roles is to provide pastoral care for my pupils. I have observed that more and more pupils in my school are becoming victims of various social problems including the HIV/AIDS pandemic. Presently, I have a pupil in my class whose mother is HIV positive. With the stigma attached to this disease and the sensitivity surrounding the issues related to this disease, I hope to become more competent in handling issues of this nature and better afford children their participatory rights when dealing with issues that affect them. I also believe that my study will assist in informing school policies by providing valuable, in-depth and context specific information on the handling of sensitive issues related to children within the school context.

In her work, Coombe (2001) argued for more detailed research and analysis to explore the consequences of HIV/AIDS for education. As mentioned in 1.2. above, there is a gap in literature regarding the micro-level of analysis of the effects of HIV/AIDS on particular schools and communities, and the concrete experiences and responses of educators, learners and parents regarding HIV/AIDS (School of Education, Development and Training, 2005; Huber and Gould, 2003a & 2003b). I believe my study can fill this gap in literature through examining methodological and ethical issues. Furthermore, my study aims to probe the lived realities of doing participatory research with children and in so doing, I will be highlighting the importance of the participatory rights of children especially their right to be equal partners in the research process. Finally, my study could create a deeper understanding of participatory research methods for researchers wanting to work with primary school children in vulnerable contexts.

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1.6. Summary of Chapters

In Chapter One, I outlined the need for my research study. Firstly, I focused on the need to compliment quantitative, macro-level studies with qualitative micro-level research into how the researchers in my study experienced and made meaning of HIV/AIDS at a local level within the education system (Huber & Gould, 2003, 2004; Baxen & Breidlid, 2004). By doing this I hoped to fill the gap that exists currently in researching children using qualitative research methods within a school. Secondly, I focused on the definition of participatory research and discussed the rationale for the use of participatory research methods in a marginalised context to deepen understandings for future projects involving sensitive issues related to child participants. Thirdly, I focused on the participation rights of children to be involved as equal partners in research in making meaning of their lived realities (UNICEF, 1989). I envisaged that the findings could inform education policies in affording children their participatory rights in issues related to them within the primary school context.

In Chapter Two I embarked on a literature review to gain perspective on the participatory research process. In paying attention to aspects of gaining access to research participants in my study I focused on the ethical issues related to the use of data from the NRF project, and consent and confidentiality issues in interviewing the researchers in my study. I questioned the choice of methods in researching a highly sensitive issue that will enable marginalised children their maximum participatory rights and that will eradicate the power imbalances that exist between adults and children. The strengths of participatory research methodology helped me identify how the researchers raised the voices of the children to capture in-depth data of their lived experiences in this marginalised context. Similarly, I identified how the challenges in the use of participatory research methods impacted the data collecting process of the researchers I interviewed.

In Chapter Three, I outlined the research methodology used in my research study. My study was qualitative and it was framed by interpretive and critical theory as well as the new sociology of childhood. The participants of my study were six researchers who were experts in their field and involved in using participatory research methods in the NRF

project. The research methods I used were semi-structured interviews, observation and document analyses. My research question was: 'What are the methodological considerations when using participatory methodologies with primary school children in mapping HIV/AIDs as a barrier to learning?'

Chapter Four represents the findings related to the procedures involved when using participatory methodologies with primary school children. In South Africa, gaining access to child participants requires negotiations with their gatekeepers i.e. the community, the school and parents since the maxim 'It takes a village to raise a child' is still a strong unifying factor. Children's informed consent had to also be negotiated as parent's consent does not automatically approve participation. A discussion of the design of the data collection technique viz. a four-stage focus group process to access the voices of the learners followed.

Chapter Five sought to identify the strengths of participatory research methodologies with primary school children. The findings confirm that these methodologies give space to children as competent knowers of childhood. They take an active stance in engaging with the issues that concerns them in their lived realities. Furthermore, the skill of the researcher is developed through interactions with the children. Knowledge is produced through many sources of data including those children who have previously been absent from research involving the sensitive issues around HIV/AIDS. The potential of working in participatory ways helps to raise awareness of the plight of children in the vulnerable context.

Chapter Six focused on the challenges of participatory research methodologies. The findings related to facilitation issues indicate that researchers lacked probing skills, the ability to cope with peculiarities of children from rural and urban areas and the inability to deal with sensitive issues. The use of focus groups emanated a large volume of data and this created management problems. Children's wishes to please adults surfaced as dilemmas in power dynamics.

Chapter Seven focused on the ethical issues that had to be considered. The findings of this chapter show that one cannot just think about ethical issues before the research commences. Researchers have to think of ethics as a practice shaped in a particular context. This broadens the space for researchers being reflexive in the methods they use with children in the context of their lives. In the study, researchers offered comfort in emotional responses; they were sensitive to the plight of children and knew when to stop even though the purpose was to probe for in-depth data. Dilemmas related to funded projects excluded the research community from the planning phase where the agenda for the project was set. Tensions between research methodology and outcomes presented ethical dilemmas. Furthermore, the funded project was not a participatory action research project and therefore, there was to be no intervention that would lead to immediate social change. Some researchers in this study saw this as exploitative to the particular marginalized, rural community.

In Chapter Eight I present the conclusion with implications that arise from my study followed by my reflections of my study.

CHAPTER 2

LITERATURE REVIEW

2.1. Introduction

My literature review will firstly, define participatory research to show how it differs from ordinary research and how my study pays attention to the elements of people, power and praxis that are so crucial in its implementation. Thereafter, I will present a rationale for its use followed by a discussion on the research process, the strengths, limitations and ethical issues relating to participatory research that I need to consider in designing my research study and in investigating its use in the broader NRF project. Finally, my literature review will examine various techniques that can be used in a participatory research context so that I could examine their effectiveness in the NRF project and apply the most appropriate methods in my research design.

2.2. Defining Participatory Research

Systematic attention to participatory approaches in research with children began to emerge through the 1990s, prompted in part by increasing awareness about child participation rights (Ennew & Boyden, 1997). In brief, participatory research has its roots in liberation theology, Friereian pedagogy and analytical tools, and development works such as participatory rural appraisal methods (Chambers, 1997). A core principle of participatory research is the generation of knowledge (rather than its 'extraction') through a merging of academic with local knowledge to provide oppressed people with the tools for analyzing their life condition.

Finn (1994), reviewing current literature in the field of participatory research, outlines three key elements that distinguish participatory research from traditional approaches to social science: people, power and praxis. Participatory research is people-centered in the sense that the process of critical inquiry is informed by and responds to the experiences and needs of oppressed people (Brown, 1985). Participatory research is about power. Power is crucial to the construction of reality, language, meaning and rituals of truth (Foucault, 1973). Participatory research promotes empowerment through the development of common knowledge and critical awareness which are suppressed by the

dominant knowledge system. Participatory research is also about praxis (Lather, 1986; Maguire, 1987). It recognizes the inseparability of theory and practice and critical awareness of the personal-political dialectic. Participatory research is grounded in an explicit political stance and clearly articulated value-base social justice and the transformation of those contemporary socio-cultural structures and processes that support degeneration of participatory democracy, injustice and inequality.

Since the elements of people, power and praxis are crucial to a definition of participatory research, firstly, I interviewed researchers who worked on the NRF project. More specifically, I attempted to understand how this cohort understood participatory research, to what extent the research they undertook was participatory, how notions of participatory research were embedded in the data they collected and what were the inherent strengths, limitations and tensions in the participatory methods they adopted (Francis, Muthukrishna & Ramsuran, 2006). Secondly, I explored how the researchers engaged with the views expressed by the participants. In this regard, I questioned the contextual power conflicts at work and how the researchers' social positionality (intersection of race, class, gender and sexual orientation) impacted on the research situation given that they were working within a historical and cultural context in which children's voices have been marginalized (Francis et al, 2006). Finally, I examined the link between theory and practice through paying attention to paradigms from which the participants were articulating their views.

2.3. A rationale for the use of participatory research methods

James (1995) favours participatory methods because children are allowed to participate on their own terms and hereby enabling the researcher to learn more about their experiences of the world. Research studies with children indicate that they communicate well through mediums other than verbal and thus it makes sense to utilise alternative forms of communication. Huber and Gould (2003) have used children's drawings, including maps and time lines, to investigate school non-attendance of orphans in Tanzania. Other methods that have worked well have included flow diagrams, play, matrices; transect walks, drama, stories and songs (Johnson, 1996; James, 1995;

Nieuwenhuys, 1996; Chalwa & Kjorholt, 1996; Alderson, 1995; Sapkota & Sharma, 1996). O'Kane (2000) found that talking to the children about the meanings they themselves attribute to their paintings or asking them to write a story, allows children to engage more productively with the research questions using talents which they, as children, possess. The same could be said of rural communities deepened by extreme poverty in a context where HIV/AIDs prevalence is high. Such communities usually have low levels of literacy, so participatory methods of information collection that do not rely heavily on reading or writing skills, but place greater emphasis on the power of visual impressions and the active representation of ideas are more favourable (O'Kane, 2000).

Babbie (2002) contends that a participatory research approach to data collection is an essential component of in-depth emancipatory research. It enables the production of knowledge in an active partnership with the participants who are affected by that knowledge. Furthermore, by locating the research in a community, grounded knowledge is produced through the collaborative relationships between participants and researchers. However, Morrow & Richards (1996) cautions that the biggest challenge for researchers working with children within a historical and cultural context in which children's voices have been marginalized, is the disparities in power and status that exists between adults and children. Researchers need to find ways to break down the power imbalance between adults and children, in creating spaces that enable children to speak up and be heard.

HIV/AIDS is an understandably difficult area of exploration, given the level of stigma currently attached to the disease. Participatory methods allow for the analysis of a number of different perspectives and dimensions regarding the extent to which HIV/AIDS is a barrier to learning and participation as well as its embeddedness within various social, political and symbolic contexts. This is achieved through the use of multiple instruments and multiple sources of data that allows for triangulation.

2.4. The Participatory Research Process

In order to engage with literature on the research process I look at the concept of knowledge production, gaining access to research participants, the research design and methods, facilitation, the setting, utilization of results and the trustworthiness of findings**.**

2.4.1. The concept of knowledge production

Participatory research views knowledge production as a dynamic process of "engagement, education, communication, action and reflection" (Finn, 1994). Knowledge exists in our everyday lives. We live our knowledge and constantly transform it through what we do. Knowing is part of our life; it informs our actions. Critical learning comes from the scrutiny of everyday life. This knowledge does not derive from analysis of data about other human beings but from sharing a life-world together, speaking with one another and exchanging actions against the background of common experience, tradition, history and culture (Park, 1993). It is this engagement and its impact on ways of looking and developing knowledge which is crucial, rather than articulation of a set of techniques that can be mimicked (Pretty et. al., 1995).

Niewenhyuys (1996) concurs that participatory methodologies is no doubt a highly relevant and promising way of generating knowledge that is respectful of local practices and reflects everyday reality of children in the majority world.

2.4.2. Gaining access to research participants

Researchers need to take responsibility for developing an informed and critical view of the daily realities surrounding research issues before starting the research project (Sohng, 1995). They need to be knowledgeable about the specific substantive content areas of the research topic, about the cultures and life experiences of those whose lives would be the focus of the research. Researchers need to be aware of how members of a group perceive and speak about their lives. This means they must learn everything that can be found out about the community and its members historically and sociologically through available records, interviews, observation and participation in the life of the community (Hall, Gillette & Tandon, 1982). In the ideal situation, the researcher already lives in the

community and partakes in its affairs (Brown, 1985). Typically, however, he or she must be a committed participant and accepted by the community.

During this phase the researcher explains the purpose of the project and begins to identify and solicit help from key individuals who would play an active role in the execution of the project. In this process the researcher acts as a discussion organizer and facilitator and as a technical resource person (Park, 1993), Community meetings are organized where the relevant research issues are discussed. This initial organizing phase of the project can take considerable time and effort and demands interpersonal and political skills of the researcher as an organizer. It is, however, a crucial stage in the participatory research process because it puts community members in the role of active researchers, not merely passive providers of information.

2.4.3. Participatory Research Design and Methods

Sohng (1995) states that participatory research, in theory, draws upon all available social science research methods. However, it excludes those techniques that requires a separation of researcher and researched, and that are beyond the technical and material resources of the people involved in the research. Field observation, archival and library research, historical investigation using documents and personal history, narratives and story telling as well as questionnaires and interviews, have been used in participatory research.

Communication is a key methodological concern in participatory research (Sohng, 1995). It draws upon creative combinations of written, oral and visual communication in the design, implementation and documentation of the research. Grassroots community workers, village women and consciousness raising groups have used photo novella (people's photographic documentation of their everyday lives) to record and to reflect their needs, promote dialogue, encourage action and inform policy (Brown & Tandon, 1978; Carr-Hill, 1984; Wang & Burris, 1994). Researchers use theatre and visual imagery to facilitate collective learning, expression and action (Antrobus, 1989). Other forms of popular communication are utilized such as collectively written songs, cartoons,

community meetings, community self portraits and videotape recordings (Bell, Gaventa & Peters, 1990; Conchelos, 1985; Randall & Southgate, 1981; Sarri & Sarri, 1992).

2.4.4. Facilitation within power dynamics

Research relationships that involve children must pay attention to the broader cultural notions of power imbalances that exist between adults and children (Alderson,1995). Ebrahim (2005) observed in her study with children between two and four years, that the balance of power was heavily skewed toward adults. Embedded in many responses from adults to children were notions of control, norms, standards, conditions, and restrictions. It is within these grids of power that various roles of the researcher have to be negotiated.

O'Kane (2000) encourages researchers to find ways of engaging with the child, in order to build a relationship where respect, openness and a genuine intent to listen is evident. To do this she advocates the use of strategies to break down the power imbalances between child participants and adult researchers. Such strategies include giving child-centred information; the choice to participate, as well as the choice of when, where, how and with whom the meetings take place; the use of participatory activities; humour; seeking children's views on how to improve the research; valuing their time, by thanks, as well as by payment for their participation in the activity days.

Lansdown (2004) cautions that researchers also need to accept that all children are capable of expressing their views, understanding and contributing thoughtful opinions on a range of issues affecting them. Too often, he cautions, adults fail to recognize these capacities because they assess children from an adult perspective. He cites many areas where young children can demonstrate equal or superior competence e.g. at their capacity to acquire computer skills, remember where things are, use their imagination, mediate between arguing parents, show willingness to forgive, learn new languages, or express creativity, love and compassion.

Ebrahim (2007) found that the dilemma "Do you have to be a child to research one?" tended to be a nagging concern at the beginning of her study. Mandell (1991), in

responding to the power relations in her research, refused to be an adult with the children she researched. She joined the children in all their activities and attempted to participate as an equal. However, Lee (2001) cautions that this creates tension in that human variation needs to be recognized. Differences may exist between adults and children, without robbing children of the right to be treated equally in terms of being given recognition that they have worthwhile opinions and perspectives. Thus, whilst human variation is acknowledged, age based discrimination must be resisted. Mayall (2000) concurs that adults can never be children. They have to accept the differences between themselves and children.

Cloke (1995) in highlighting the differences between adults and children, recognize that adults are often ascribed authority over children who often find it difficult to dissent, disagree or say things which they fear may be unacceptable. Many children are also not used to being asked their views or may feel that their views are often disregarded by key adults like parents or teachers. In order to empower children, Hill (2005) argues that research should start from the perspective of the children and involve them actively in the whole research process.

2.4.5. The Setting

According to O'Kane (2000), the setting has a significant effect on the way techniques can be used. Private space with minimal disturbances in an environment where the child feels comfortable is likely to be most conducive for productive research meetings. Factors such as when and where interviews take place, who is present, who will be told, are all likely to have an effect on what the child will talk about. While the presence of some adults may facilitate explanations and communication with a child, at other times adults may have a tendency to regulate children's voices, by challenging or redefining what they say and similarly, older or more confident siblings may dominate the direction of discussions.

Lansdown (2004) cautions that the failure to provide children with respectful environments in which to express their views, and the damaging consequences of that

failure, are starkly illustrated in the experience of many young children who are deemed to be incompetent witnesses in child abuse cases. Many prosecutors fail to create a framework through which children are able to express themselves fully; with the result the cases get dropped. Researchers developed an alternative test based on simple picture identification tasks. In other words, when an appropriate environment was created, the children were able to demonstrate their actual capacities to participate in court hearings.

Similarly, Lansdown (2004), in emphasizing the provision of an environment that is safe cites work done in the Birmingham children's hospital. Since many children are afraid of injections, they were told why the injection was necessary to help them overcome their anxiety and to give them space to articulate their fears. Conversely, imposing the injection without consideration of children's perspectives is likely to exacerbate the terror.

Govender (2007) in investigating grade three learners' knowledge and experience with HIV/AIDS and its impact on schooling seated herself on the same type of chair that participants were seated on. This she explains, brought her to the same level as the participants so they could easily establish eye contact with her and they did not have to look up to her.

2.4.6. Utilization of Results

The path from knowledge generation to knowledge utilization is direct in participatory research, since the same actors are involved in both activities. Often in participatory research, what is investigated is not a theory to be applied but rather the ways of implementing a practical idea, such as leadership development in the labour and civil rights movements (Horton, 1990); starting a community cooperative (Conti, Counter & Paul, 1991); policy initiatives for inner city youths (Checkoway & Finn, 1992) or a homeless persons union (Yeich & Levine, 1992). In such instances, action takes place concurrently with research activities. The resulting knowledge often leads to collaborative ventures. Most important the assembled findings of the investigation serve as topics of collective reflection achieved through dialogue. Sarri and Sarri's (1992)

comparative study of a participatory research project in a Bovilian community and one in Detroit, Mitchigan illustrates the potential for international collaboration and learning. The Bolivian Project used citizen surveys, community forums and group interviews to understand and develop action plans around community health care needs. Knowledge from the Bolivian experience informed plans for a youth shelter in Detroit by engaging staff, residents and family members.

According to Muthukrishna (2006) it is hoped that the findings from the Richmond research project will enable informed debate and dialogue amongst the various government departments, schools, centres for adult basic education, tertiary institutions, community structures, local, provincial and national government, NGO and NPO sectors, and policy makers on how to address the challenges that face schools and their communities.

2.4.7. The Trustworthiness of Findings

Trustworthiness criteria were first developed by Guba (1981) to judge whether or not any given inquiry was methodically sound. But these criteria "had their foundation in concerns indigenous to the conventional, or positivist, paradigm" (Lincoln, 1990). To distinguish between elements of inquiry that were not derived from the conventional paradigm, further 'authenticity" criteria have been suggested to help in judging the impact of the process of inquiry on the people involved (Lincoln, 1990). Have people been changed by the process? Have they a heightened sense of their own constructed realities? Do they have an increased awareness and appreciation of the constructions of other stakeholders? To what extent did the investigation prompt action?

However, Pretty, Guijt, Thompson, and Scoones (1995) note that it will never be possible to be certain about the trustworthiness criteria. We cannot say that x has a trustworthiness score of y points, but we can say that x is trustworthy because certain things happened during and after the process of joint investigation and analysis. The trustworthiness criteria should be used to identify what has been part of the process of gathering information and whether key elements have been omitted. Knowing this should make it

possible for any observers, be they readers of a report or policy makers using the information to make a decision, also to make a judgement on whether they trust the findings.

2.5. Strengths of Participatory Methodology

In engaging with the literature on strengths of participatory methodology, I focused on how the use of participatory methodology disables power imbalances and forges partnerships between the researcher and the researched. I looked at the role of the researcher as a facilitator and enabler who shares expertise rather than impose it. I examined the notion of researcher reflexivity through every stage of the research process. I took a closer look at the importance of dialogue in building connections amongst the research participants. By acknowledging children as active participants in the research process, I examined how researchers enabled the voices of children to be raised. Finally, I focused on transparency in the research process.

2.5.1. Disables Power Imbalances

A participatory approach attempts to disable the power imbalances between the researcher and the participants in the research. Rather than researchers as professionals acting upon rural often unschooled community members, creative, multiple participatory tools will give participants voice. For example, interaction between group members around specific tasks, such as completing a time line, generates shared information and enables new perspectives to be gained. According to Mouton (2003), the key components in this approach are: participation, engagement, involvement and collaboration – with participants involved in the research process as equal partners. The participants are co-researchers whose insider 'local knowledge' is valued for sense-making.

2.5.2. Forges Partnerships between the Researcher and the Researched

Participatory research challenges practices that separate the researcher from the researched and promotes the forging of partnership between researchers and the people under study (Freire, 1970, 1974). Both researcher and participant are actors in the research process, influencing the flow, interpreting the content, and sharing options for action. Ideally, this collaborative process is empowering because it brings isolated people

together around common problems and needs and it validates their experiences as the foundation for understanding and critical reflection. It also presents the knowledge and experiences of the researchers as additional information upon which to critically reflect. Group members are able to contextualize what have previously felt like "personal," individual problems or weakness and link such personal experiences to political realities. The result of this kind of activity is living knowledge that may get translated into action.

2.5.3. The Researcher as Facilitator

In participatory methodologies the role of the researcher is seen as the facilitator of activities (Robinson-Pat, 1996). Both researcher and participants are recognized as active participants in the collection of data. However, in seeking to involve participants in the research project, 'participation does not simply imply the mechanical application of a 'technique' or method, but is instead part of a process of dialogue, action, analysis and change (Pretty et al, 1995). The successful use of participatory techniques, according to O'Kane (2000), lies in the process rather than simply the techniques used.

According to Vygotsky (1978), there is a gap between what children can achieve with and without assistance. This is defined as the 'zone of proximal development'. Through a process known as scaffolding children can perform tasks they are incapable of completing on their own. Lansdown (2004) cites a study in Columbia where children have developed a forest conservation project to save the mountain slope by planting native species of trees. The strength of the programme lies in the wide range of competencies the children acquire backed up by the opportunity to learn through practice with the support of committed adults.

The researcher is, therefore, an enabler who shares expertise rather than one who imposes it; and the genuine use of participatory techniques with children requires a commitment to ongoing processes of information sharing, dialogue, reflection, action and support.

2.5.4. Engagement with ethics in practice

Traditionally, a universal approach created the idea that general ethical principles and codes were adequate for dealing with participants in the research context (Simons & Usher, 2000; Birch, Miller, Mauthner & Jessop, 2002). However, Simons and Usher (2000), in advocating a situated ethics approach argue that whist there are general ethical principles researchers must examine the mediation of these principles in practice with the acceptance that they will be diverse and complex. Within a participatory research framework, researchers can become sensitive to the socio political context, adopt fair practices to disadvantaged groups (like children and those living in poverty) and take a reflexive stance to how ethics is mediated by situational factors (Ebrahim, in press).

Flewitt (2005) argues that children giving consent to participate in research is not a once off act that is approached at the beginning of the research. Within a situated ethics approach attention is paid to informed consent as an ongoing process in order to create spaces for information sharing, choice in participation and dealing with the complexities of doing so. Ebrahim, (in press) in her research with young children used participant observation to become sensitive to how children were giving assent and the factors that influenced the process. She found that children not only used verbal language to show assent and dissent but also non-verbal ways e.g. hand gestures, eye gaze, facial expression, posture and behaviour. The time of day, the nature of activities, props used and spaces had an impact on children's voice to participate. The front of the classroom was traditionally for teacher-directed activities and thus restricted spontaneous participation. The play corners and the playgrounds were more spontaneous environments to engage with children's meaning making.

Ebrahim (in press) advocates that in the South African context the notion of situated ethics is valuable. It opens up an agenda that pays attention to the subjective experiences of children; to learn about them, from them and about how to work with them in participatory ways in the context of their lives. Van der Riet et al (2005) concur that a situated ethics approach with the focus on the agency of children as social actors and as

people with minority status has a significant influence on the nature and quality of data produced on childhoods.

2.5.5. Building connections

A key methodological feature that distinguishes participatory research from other social research is dialogue. Through dialogue, people come together and participate in all crucial aspects of investigation, educational and collective action. It is through talking to one another that people get connected, and this connectedness leads to shared meaning. The dialogic approach differs from conventional "interviewing" in several aspects. Interviewing presupposes the primacy of the researcher's frame of reference. It offers a one way flow of information that leaves the researched in the same position after having shared knowledge, ignoring the self-reflective process that the imparting of information involves. The dialogic approach and self reflection require the inevitable engagement of the researcher in the critical process, in the discussion of meanings and perspectives.

Dialogue helps people to look at the "whys" of their lives, inviting them to critically examine the sources and implications of their own knowledge. The role of the facilitator in this process is not only to learn from the participants, but also to facilitate learning. The researcher's sharing of his or her perceptions invite the participants to critically reflect upon their own experiences and personal theories from a broader context. This is the meaning of conscientization, which Freire (1970) has helped popularize. Boettiger (2004) concurs that local people become aware of other community members' perceptions of problems through this process of reflection and analysis by both the researcher and the participants. It opens up a safe environment in which to communicate.

2.5.6. Children seen as Active Participants

Research has moved away from seeing children as passive recipients of socialization to recognizing them as active participants in constructing meaning of their experiences (Christiansen & James, 2000). Many adults misunderstand the meaning of participation and fear it may give rise to inappropriate burdening of children, disrespect for parents and excessive freedom without corresponding responsibilities (Lansdown, 2004). The

Convention on the Rights of the Child poses a profound challenge to these traditional attitudes towards children.

Respect for children as participants is most clearly elaborated in Article 12 and is a substantive right and which entitles children to be actors in their own lives, not merely passive recipients of adult care and protection. Article 12 is also a procedural right through which to realize other rights, achieve justice, influence outcomes and expose abuses of power.

However, Article 12 requires adults to hold a more inclusive and respectful dialogue with children. Participation means more than just taking part. Taking part in a sporting activity organized by an adult is not participation. Creating a game, deciding on respective roles, rules and focus, is. Lansdown (2004) emphasizes that creating the space for children to contribute their ideas on organizing the day and working with them to implement their suggestions offers a deeper level of involvement and responsibility.

Participatory methods enable children to direct the content of discussions and rely on children explaining their interpretation of their reality to the interviewer. By encouraging children to set the agenda we are more likely to encompass new and more relevant areas of questioning as we proceed (O'Kane, 2000). In any exploratory study concerned with listening to children's experiences or views, the researcher cannot predict the content of the discussions. While there may be a sense of wanting to charter a boat in unknown territory, use of participatory techniques allows children to navigate and set the parameters thus enhancing children's capacities and competences.

In this regard, Lansdown (2004) cites a study in India involving children from a marginalized group. After a young girl joined the working children's union she learned to socialize, speak up without hesitating, and to determine what is right and wrong. When her family tried to make her marry against her will, she was successful in protesting against the marriage and later became president of the children's village council and led a protest movement against child marriage in her village. Alderson's work (1995) with one

hundred and twenty 8-15 year olds on capacity to consent to surgery also highlight children's competence to participate in complex and profound levels of decision making.

2.5.7. Raising the Voices of Children

Participatory techniques are a powerful tool enabling children's voices, needs and interests to be articulated. Adults can learn from listening to children. Young children have insights, perspectives, ideas and experiences which are unique to them.

A study conducted by Willow and Hyder (1998) with 6–7 year olds on their experiences of physical punishment reveals a different reality to that offered by adults. Adults argue that they are able to exercise appropriate restraint and judgement in the use of such punishment. However, children observe that parents hit them when they have lost their temper and their behaviour is out of control. Children in primary schools in Bangladesh cite the absence of physical punishment as one of the most important factors enabling them to stay in school (Primary School Performance Monitoring Project, 2002). It is clear from these and other studies that children themselves have a significant contribution to make towards an understanding of their lives.

Respecting the rights of young children to be heard necessitates a preparedness to listen to their views in appropriate ways to them – through music, drawing, painting and photography.

2.5.8. Transparency in Research

Participatory techniques facilitate explanations about the purposes of the research and the form that it will take. The activities provide a degree of transparency which displaces 'mysticism' about research and lessens children's fears about what might happen next. Transparency also enhances working relationships and establishes trust in the researchers by the children's adult care-givers. O'Kane (2000) advices that in seeking to involve children in any participatory activity it is important to gain active support from children's adult caregivers for it is through this that the child may be given more space and autonomy to make choices about when and how to participate in the research.

2.6. Limitations of Participatory Methodology

In this section, I focus on the limitations on the use of participatory methodology with special reference to the lack of uniformity in its use; the claim that it can be time consuming; that it may be labeled as 'childish' techniques; that its use may sometimes require complex skill on the part of the participants and the researchers; and the challenge for high researcher's reflexivity.

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2.6.1. Lack of uniformity

In choosing to use research techniques which are more responsive to the participants, rather than the researchers' agenda, the opportunity to gather information in a uniform way is forfeited (O'Kane, 2000). This implies that if the same study is conducted on various groups, each study will differ according to the relativity of the context and the participants. This would then require competence and skill on the part of the researcher to cope in the varied contexts. Though the framework of an activity can be carefully designed to ensure that a broad area of interest will be discussed, participants are given more control over the focus and agenda. The field of investigation may become more limited to issues that they find significant, and/or are willing to discuss and often the reasons why certain topics are excluded may be unknown. It may be that the issue has little significance or that it may be too sensitive to talk about.

2.6.2. Time Consuming

Christensen and James (2000) argue that the use of participatory methods requires much time to give researchers the space to develop, use and analyse techniques with children, individually and in groups. Processes of contacting, information-giving, negotiating, arrangement-making, travelling to and from, conducting interviews, analysis and feedback all require a large amount of time.

2.6.3. Can be labeled as 'Childish' Techniques

Christensen and James (2000) argue that although participatory methods can be adapted to suit children of varying ages, with a variety of literacy, oracy or conceptual skills, some techniques clearly require a certain level of conceptual or physical ability.

However, the use of pictures in all of the activities can assist in appropriateness when literacy skills are an issue. With the fun element, they caution, there is also a danger that participatory techniques may be taken less seriously. Therefore, participatory techniques should not be labelled as 'childish' techniques but seen, rather, as child-centred.

2.6.4. Requirement of complex skill

A range of myths about participatory methods exists. Contrary to the common criticism that it is a quick way of doing things, the proper use of participatory approaches by the facilitator encourages dialogue, joint analysis and much learning. These processes take time and may be complex in themselves. There is a danger that participatory approaches may be used as a simple technique without recognition of the importance of the additional skills needed by the facilitator such as communication, facilitation and conflict negotiation skills. Christensen and James (2000) concur that attention to personal style and facilitation skills are essential for while the activities provide a source of data in themselves the dialogue around the activities provides the richer source of interpretation and meaning.

2.6.5. High Researcher's Reflexivity

Gray, Lyons and Melton (1995) state that those affected and infected by HIV/AIDS are often the most vulnerable and marginalised social groups This, therefore, calls for high researcher reflexivity through every stage of the research process. Francis, et al ((2006) concur that ethical issues allow us to question underlying assumptions, for example: What are the hidden values and interest? Who benefits from the research process? How is power used, abused and shared? Does the sample chosen enable participation by marginalised groups?

For the researcher it may be difficult to relinquish the role of expert, imposing ones ideas consciously or unconsciously. To counter these tendencies, Harding (1991) encourages researchers to engage in explicit reflexivity. They need to examine privately and publicly the sources of social power in their lives and how these sources appear in their research.

These sources include class, culture, ethnicity, gender assumptions, beliefs and behaviours.

2.7. Ethical Issues in Participatory Methodology

In examining the ethical issues embedded in the use of participatory methodology, I question the concerns that arise when researching sensitive topics e.g. HIV/AIDS; the dignity in researching sensitive issues; the respect for persons and their privacy in research practices; the ethical principles necessary for social and scientific acceptance; and the constraints and its effects.

2.7.1. Researching Sensitive Topics e.g. HIV/AIDS

Gray, Lyons and Melton (1995) raise a number of concerns that arise when researchers study problems related to AIDS. These are listed in Table 1 below.

Table 1: Concerns regarding the research of sensitive topics (Gray, Lyons & Melton, 1995).

- Is mandatory participation in research ever ethically permissible?
- Should participants in research be required to learn personally relevant information?
- Do the ethics of research change when the topic is socially sensitive?
- Under what circumstances, if ever, is it permissible to seek research involvement of individuals who are in public places (e.g., bathhouses, gay bars) but engaged in what they probably regard as private behaviour?
- Should researchers be required to consult with the community of potential participants about the ethics of their research?
- Is political or cultural competence a requisite for socially sensitive research?
- Do researchers have a duty to act either to stop illegal behaviour or to 'blow the whistle' on it?
- Are researcher's duties different when illegal behaviour is learned though a 'confession' as opposed to witnessing it directly?
- Do the researchers owe any duty to participants' parents who have given consent but may be implicated in illegal behaviour by the participants' accounts?
- Is the application of procedures for informed consent borne out of arrogant disregard of indigenous norms, or is such an approach indicative of a partnership with local hosts that is based on mutual respect- a desire to avoid cutting corners when people's dignity are at stake?

Source : Gray, Lyons & Melton, 1995

2.7.2. Dignity in Researching Sensitive Issues

Concern for dignity is a human universal, but sensible and sensitive researchers will enlist local leaders in finding ways to communicate that concern. Muthukrishna (2006) concurs that since the NRF research project involved entry into the private spaces of participants in a community, it had to be particularly sensitive to issues around

confidentiality and anonymity. Agreements had to be reached with participants about the limits to accessibility to records and documents, and to the process of dissemination of findings.

Furthermore, Muthukrishna (2005) argues that a more interactive approach to data analysis that involves participants in ongoing discussions of the meanings and implications of emerging interpretations must follow. Ethical questions will alert the research team to underlying issues, for example: What are the hidden values and interests? Who benefits? How is power used, abused and shared? How are children perceived? How is the sample chosen and does it enable participation by marginalized groups? How does one gain access to the participants and is there constant engagement regarding continued participation or are participants given an option to opt out of the research process? How is trust cultivated in addition to informed consent?

2.7.3. Respect for Persons and their Privacy

Gray, Lyons and Melton (1995) identify respect for persons and their privacy as key ethical issues in HIV/AIDS research. This is the case not only because of the stigmatization and discrimination associated with the disease. Psycho-social research into HIV/AIDS involves highly personal and sensitive topic areas, and researchers need to exercise respect and circumspection in engaging with participants. This is accentuated because those affected and infected by HIV/AIDS are often the most vulnerable and marginalised social groups (Gray, Lyons & Melton 1995). Situated ethics are a set of practices well suited to working with marginalized research participants (Simons & Usher, 2000). In this view, ethical principles are mediated within different research practices, questioning the notions of scientific objectivity and value neutrality by recognising the socio-political context of all research.

2.7.4. Ethical Principles necessary for Social and Scientific Acceptance

A number of writers consider three major ethical principles as necessary for research to be both scientifically and socially acceptable: autonomy, non-maleficience and beneficence (Emmanuel, Wendler & Grady, 2000). The facilitator respects the *autonomy*

of the people, avoid speaking on their behalf, and he/she reports to the community when asked to play a mediator or interpreter role, always accountable to the people. In PAR autonomy is complex because conflicts may arise between individuals and groups, and between groups. The ethical principle of *beneficience* requires that the research be of social benefit, even though the subjects themselves may not directly benefit from participating. The principle of *non-maleficience* demands that the researchers be particularly sensitive to potential harm that may befall subjects and take the necessary steps to avert detrimental consequences of participation (Van der Riet et al, 2005). The research aim itself could lead to unethical consequences. Research usually has an underlying moral agenda and while some children may need help the research may overstate children's problems and their reliance on adult solutions (Anderson, 2004).

2.7.5. Constraints and its effects

Alderson (1995) notes the constraints under which research operates. Professional researchers often have little choice over the nature of funding or even the broad research remit, when responding to a program. Restrictions on grant levels often mean that costings have to be pared to the bone, necessitating a quick start and an abrupt end. This leaves no formal time for wider dissemination or personal feedback to participants.

2. 8. Ethical Issues related to Child Participants

In examining the ethical issues embedded in researching sensitive issues with primary school children, I focus on the children's right to participation by exploring the degrees of participation and the implementation of a guide to monitor and evaluate research with children. I then examine the possible harm or distress that can arise; the notion of children as captive subjects and finally the acquisition of informed consent and children's assent.

2.8.1. Researching Children and the Right to Participate

Alderson (2004) outlines three main ways of thinking about what is 'good' research related to good ethics in research with children. Firstly, the principles of respect and justice recognise that children have views that researchers cannot take for granted.

Ethical research includes sensitive methods for discovering children's own views and meaning. Secondly, rights based research involves respect and children's rights have been listed under the '3Ps' viz. *providing* for basic needs; *protection* from harm, abuse, neglect and discrimination; and *participation* (United Nations, 1989). Participation rights include children being well informed and having their own views being listened to and respected by adults. Finally, best outcomes based ethics means working out how to avoid or reduce harms and costs, and to promote benefits.

Article 13 of the Convention on the Rights of the Child 1980 states that children have a right to freedom of expression, which includes seeking, receiving and giving information and ideas through speaking, writing or in print, through art or any other media of the child's choice. Their participation is not a mere formality: children must be fully informed and must understand the consequences and impact of expressing their opinions. The corollary is that children are free not to participate, and should not be pressured. Participation is a right, not an obligation (UNICEF, 1998).

2.8.2. Degrees of Participation

While the Convention establishes a right to participation, participation is many things to many people. Roger Hart (1992) used an eight-degree scale to define the nature of children's participation as illustrated in Table 2.

Table 2: Degrees of Participation (Roger Hart, 1992).

Degrees of Participation
Child-initiated, shared decisions with adults
Child initiated and child-directed projects
Adult-initiated, sharing decisions with children Participation in which children are consulted and informed (run by adults, but children understand the process and their opinions are treated seriously).
Assigned but informed participation
Degrees of Non Participation
Tokenism …. Children are given a voice but have little choice about the subject, the style of communicating it or any say in organising the occasion
Decoration …. Children are asked to take part in an event but are not given any explanation of the issues or the reason for their involvement
Manipulation

Efforts that fall under tokenism, decoration and manipulation not only fail in their objective to foster the participation of children, but can also discredit the effort and the organisations involved, ultimately undermining the meaning of the right to participate (UNICEF, 2002).

An example of participation involving "Child-initiated, shared decisions with adults" in one community in Uganda cited by Lansdown (2004) reveals that it was young children who identified the need for improved water and sanitation for the village. The 600 children at the primary school became concerned about animals using the village pond that was the main water supply. They spoke with the village leader who called a meeting where the children presented poems and dramas about the value of clean water. As a result, children and adults worked together to clean the pond and build a fence to keep the animals out.

2.8.3. A Guide to Monitor and Evaluate Research with Children

Several complex ethical issues emerge around children's participation in research. Alderson (1995) outlines 'Ten topics in Ethical Research', in Table 3, that can be a guide to monitor and evaluate research activities in which children are involved.

Table 3: Ten Topics in Ethical Research" (Alderson, 1995)

- Purpose – Is the topic worthwhile? How are the findings likely to benefit children? How will they add to what is already known?
- Costs and hoped-for benefits – Might there be risks or costs – time, inconvenience, embarrassment, intrusion of privacy, sense of failure or coercion, fear of admitting anxiety. Might there be benefits for children who take part – satisfaction, increased confidence or knowledge, time to talk to an attentive listener, an increased role in decision making processes affecting them. What has been planned to reduce or prevent any risks? What will be the procedure with children who become distressed (e.g. if they simply feel uncomfortable, or if participation requires them to relive or experience emotional or psychological trauma) on the spot and in terms of referrals and follow-up?
- Privacy and confidentiality – Names/pseudonyms? Storage of data collected while research in progress/ after research completed? Will records be destroyed after completion of research project? Who will have access to it? Do researchers have the appropriate values, attitudes and skills to deal with each child ethically and compassionately?
- Selection, inclusion and exclusion – Are issues of accessing children satisfactorily dealt with in the methodology? Does methodology address differing capacities/capabilities?
- Funding – Are the participants expenses paid if any incur? Are children given some reward for participating during and after the project ends?
- Complaints – Are there agreed methods of dealing with complaints if any arise?
- Informing children, parents and other caregivers – How is this done? Are key concepts and purposes discussed? Do participants have access to contact details of researcher as well as team leaders?
- Consent – Are children given the right to consent or refuse to participate? Are parents/caregivers asked to give consent? Is the consent written, oral or implied? What is legally implied and appropriate in the consent/context?
- Dissemination – Will the children or caregivers receive short reports on the main findings or other forms of feedback?
- Impact on children – What models of childhood are assumed, e.g. children as weak, vulnerable and dependant on adults; as immature irrational, and unreliable, as capable of being mature, moral agents? How do these models affect the methods of collecting and analysing data? Is the approach reflexive, in that those involved in data collection and analysis critically discuss their own prejudices? Do they use positive images in reports and avoid stigmatising, discriminatory terms?

2.8.4. Informed consent & children's assent

According to Weithorn and Sherer (1994), having the opportunity to give or deny informed consent is not only a right in relation to research which children share with adults, but it also contributes to their wellbeing, through giving respect for their sense of control. Harker (2002) regards obtaining consent not as a once only event, but as a continuous process, with opportunities to withdraw at any stage, either temporarily or permanently. Children may also require reassurances that they or their family will not lose access to a service if they decline to cooperate with research (Cree, Kay & Tisdall, 2002).

Alderson (1995) suggests that one requirement for giving consent is being reassured that the research is worthwhile. To be valid, consent needs to be appropriately informed. Thus children should be told such things as: the aims of the research; what time and commitment is required; who will know the results; whether there will be feedback; and whether confidentiality is promised. According to Farmer and Owen (1995), a few researchers have rehearsed with children on how they can say 'no' since it can be hard for children to say 'no' to a more powerful adult.

Ebrahim (in press) in her research with young children used the term children's assent since children are minors and are unable to give consent. According to Cocks (2006) assent is the gaining of children's agreement within concrete situations in the research process. Ebrahim (in press) became sensitive to how children were giving assent in her research study by asking the questions: What are the communicative cues used by children to show their meaning making? What is the dominant visual message? How is the body positioned? How are gestures and eye contact used to show meaning bearing in mind that there may be cultural specificities? How is rejection of ideas handled? How is unwanted presence handled?

2.8.5. Possible Harm or Distress

An important consideration has to be whether an adult with abusive intentions may use research as a means of access to children. Fine and Sandstrom (1988) cited the case of

Horan (1987) who invited two boys to his house to watch a break-dancing video. One of the boys' parents called the police. After the police investigation Horan abandoned his 'folklore' study.

It is hoped that the chances of physical harm are slight in social research, but emotional harm is a more likely risk. Research on sensitive topics like divorce may lead to distress, even resulting in a child crying. There is a need for care and skill on the part of the researcher not to press a child too far. It is important to heed the warning by Fratter (1996) that researchers should be careful not to 'open up painful or distressing areas', especially in one-off contacts, unless it is clear that follow-up support is available to a child. If a child becomes upset, the researcher is beholden to offer immediate comfort. It may be appropriate to give details of Childline or equivalent confidential telephone helplines (Greene, 2005).

A further possibility is that a child will disclose an incident of abuse during the course of an interview, resulting in a need to inform parents or other adults. Opinions differ on whether revelations of abuse should automatically lead to reporting the situation to the relevant authorities, but it is generally agreed that the implications should be carefully discussed with the child before any action is taken. Greene (2005) links this with the issue of confidentiality.

Risk and harm may apply not only to research participants but to people affected by the research findings. Researchers therefore need to take control of dissemination. There is an onus to try and present findings in ways so that they cannot be misused by others against children's interests. Findings that get into the hands of the media can easily be misrepresented in order to make a 'good' story. Research on parental alcohol misuse stressed that some families and children coped well in adverse circumstances (Laybourn, 1996), but the media concentrated on the horror stories and most extreme accounts. Research evidence that many young people prefer residential care to foster care has been often used to support blanket statements that disregard the fact that just as many prefer foster care to residential care (Hill, 1995).

2.8.6. Children as Captive Subjects

Some writers (e.g. Morrow & Richards, 1996) have questioned the ethics of research where children are 'captive subjects'. In schools the balance of power is heavily skewed towards adults, and children are least able to exercise participant rights. Adults control children's use of time, occupation of space, choice of clothing, times of eating- even their mode of social interaction. So how does this impact on the nature and outcomes of school based research. One of the first considerations is the degree to which children can exercise freedom of choice with regard to participation in research. Much has been written about informed consent (Morrow & Richards, 1996) and ethics (Alderson, 1995) but less attention is given to children and young people's right to dissent. However, in a study on children between two and four years, Ebrahim and Muthukrisna (2007) noted dissent as failure to engage with props, creating distance from the researcher and pursuing own agendas during research activities.

2.9. Participatory Research Techniques

Constructivist tools are favourable in research with children in vulnerable contexts because they enable children to describe and analyse their experiences and give meaning to them. Through debate, reflection, argument, dissent and consensus, they lay the foundation of empowerment.

2.9.1. Semi-structured Interviews (SSI)

This is guided interviewing and listening in which only some of the questions and topics are predetermined; other questions arise during the interview (Pretty et al, 1995). The interviews appear informal and conversational, but are actually carefully controlled and structured. Using a guide or checklist the multidisciplinary team poses open-ended questions and probes topics as they arise. New avenues of questioning are pursued as the interview develops. Semi-structured interviews are a central part of all participatory methods.

2.9.2. Drawings

In qualitative research, verbal dialogue or observation is sometimes seen as the optimal means in which to collect data. But as the saying goes, a picture can be worth a thousand words. Deacon (2000) proposes that drawings can provide quality information in a fun and creative manner.

In an effort to understand the street life of rural Indonesian at-risk youth, Moelino, Anggal, and Piercy (in press) asked the youth to create maps of their neighbourhoods and indicate what activities (prostitution, drug deals, etc) took place where. In finding out about people's perceptions of their family's history, participants were asked to draw a picture of their family or create a family tree labelling family members according to certain characteristics (e.g. history of depression, substance abusers, ethnicity, educational level, etc.). Symbolic drawings can also be useful (Deacon, 2000). For example, when a group of participants were asked to draw a reflection of their work with HIV/AIDS prevention, one woman drew a bridge to symbolise the path of education from 'uninformed' to 'safe and educated'.

Deacon (2000) cited a research study, where the researcher asked participants to create life-size collages which others could view through an actual window (the director set up a temporary wall with windows from where the participants displayed their collages). Participants created a scene with various media and pictures and then supplemented their creation with their own reactions and words. Furthermore, observers were also able to react to the scenes and share their own stories and meanings about what they saw.

Huber and Goud (2003), make use of children's drawings including maps and time lines to investigate school non-attendance of orphans in Tanzania. Methods that have worked well in other research projects with children include drawings, mapping, flow diagrams, plays, matrices, transect walks, drama, stories and songs (Johnson, 1996; James; Niewenhuys, 1996; Chawla & Kjorholt, 1996; Alderson, 1995; Sapkota & Sharma, 1996). For example with an action research project with street children, Niewenhuys (1996) found that the 'preferred activities of children such as games, story telling and

drawing may be more effective in bringing out the complexities of their experiences than methods and techniques used by/with adults'. Additionally, in an ActionAid research project in Nepal, drawings allowed children 'the freedom to express views, imagination, and interpretation of the surrounding world in their own terms' (O'Kane, 2000).

Children's drawings may be interpreted in a variety of ways. Cantlay (1996) claims that distress and trauma, including sexual abuse, is reflected in drawings that include such signs as large heads, large, empty eyes, abundant hair, shaded clouds, knotholes in trees, large hands, large pointed teeth, abnormally tiny eyes, eyes without pupils, crossed eyes, excessive details, box-shaped bodies, poorly integrated body parts, lack of gender differentiation, hair that is long at the sides or thinning at the crown. Di Leo (1973, 1996), advices that the presence of genitalia is often considered a sign of sexual abuse because it is considered rare for normal, non-abused children to include genitals in their drawings.

2.9.3. Transect Walks

The transect walk is a spatial gathering tool which involves a systematic walk through a community with key community members (Mapping HIV/AIDS as a barrier to education PR data collection workshop, 2004). Transect walks provide an opportunity to observe, ask, listen, discuss, identify, find out why people do certain things and how it all fits into the overall picture. Transect walks may reveal things people don't normally talk about. Theis and Grady (1991) concur that the purpose of transect walks is to observe, listen, discuss and identify e.g. the conditions, problems, opportunities and solutions and to get a clearer understanding of the participants context and its related issues.

Mahiri (1998) states that 'local transects created an open and free atmosphere for people to express their knowledge and views'. She explained further that the transect walk is a forum for participants to express themselves and to learn from each other. The transect walk also creates a point of contact with fellow participants and an opportunity to learn about what others do to tackle various issues.

2.9.4. Focus Groups

Powell and Single (1996) define a focus group as ‘a group of individuals selected and assembled by researchers to discuss and comment on, from personal experience, the topic that is the subject of research. Focus groups, according to Morgan (1997) rely on interaction within the group based on topics supplied by the researcher.

The main purpose of focus group research is to draw upon participants’ attitudes, feelings, beliefs, experiences and reactions in a way in which would not be feasible using other methods, for example observation, one-to-one interviewing, or questionnaire surveys. These attitudes, feelings and beliefs may be partially independent of a group or its social setting, but are more likely to be revealed via the social gathering and the interaction which being in a social group entails. A focus group enables the researcher to gain a larger amount of information in a shorter period of time. Observational methods tend to depend on waiting for things to happen, whereas the researcher follows an interview guide in a focus group. In this sense focus groups are not natural but organized events.

Kitzinger (1994) argues that interaction is the crucial feature of focus groups because the interaction between participants highlights their view of the world, the language they use about an issue and their values and beliefs about a situation. Interaction also enables participants to ask questions of each other, as well as to re-evaluate and reconsider their own understandings of their specific experiences.

The benefits to participants of focus group research should not be underestimated. The opportunity to be involved in decision making processes (Race, 1994); to be valued as experts and to be given the chance to work collaborately with researchers (Goss & Leinbach, 1996) can be empowering for many participants. However, not everyone will experience these benefits, as focus groups can also be quite intimidating at times, especially for inarticulate or shy members.

A limitation to focus groups is that by its nature focus group research is open ended and cannot be entirely predetermined. The moderator has to allow participants to talk to each other, ask questions and express doubts and opinions, while having very little control over the interaction other than generally keeping participants focused on the topic. Focus group discussion may also discourage some participants from trusting others with sensitive or personal information. In such cases personal interviews or the use of work books alongside may be incorporated. Finally, focus groups are not fully confidential or anonymous, because the material is shared with others in the group. This can be overcome by pledges of confidentiality and the use of pseudonyms.

In focus groups the role of the researcher is a demanding and challenging one, and researchers will need to possess good interpersonal qualities, being good listeners, non-judgmental and adaptable. Researchers need to promote debate, challenge participants especially to draw out their differences and tease out a diverse range of meanings on the topic under discussion. Sometimes they have to probe for details, or move things forward. They have to ensure everyone participates and gets a chance to speak. They must avoid giving personal opinions so as not to influence participants towards any particular position or opinion.

Ethical considerations for focus groups are the same as for other methods of social research (Homan, 1991). For example when selecting and involving participants, researchers must ensure that full information about the purpose and uses of participants' contributions is given. Being honest, keeping participants informed about the expectations of the group and topic, and not pressurizing participants to speak is good practice. Participants need to be encouraged to keep confidential what they hear during the meeting and researchers have the responsibility to anonymise data from the group.

Practical considerations and the time it takes to conduct focus group research may discourage many from attempting to collect data using this method. Nevertheless those who participate in this kind of research often find the experience rewarding. The process of research can be more collaborative than other forms of study, and so focus group

research can be an empowering process for participants, and an exciting challenge for social researchers wanting to gain a different perspective on their field of interest (Gibbs, 1997).

2.9.5. Timelines

Often researchers are interested in changes over time, history and developmental processes. Timelines are one way in which researchers can document such events. Duhl (1981) discusses the use of a chronological chart to track family events and compare family member's reactions to them. Researchers can gather information about births, deaths, marriages, divorces, job history, education, relocations, immigrations, etc. Timelines are simple and easy ways to organise this information and analyse the impact of context on current life.

Together with participants, researchers can create timelines of specific family histories, program histories, historical developments and events. Deacon (2000) cited one human service program that tracked its history and development by creating a timeline on the wall of major events that occurred. The employees tacked up news releases, programme brochures, pictures of meetings, minutes, etc. as they occurred chronologically. They were then able to see where periods of progress occurred and analyse periods of 'quiet'. They could discuss the successes and shortcomings of the program's development as they actually viewed it through time.

2.9.6. River of Life

The River of Life is another participatory method that can be used. Children are asked to draw a river. The river flows up at good times and down at bad times. The children put small pictures and/or labels on their drawings to explain events which make their rivers flow up and down. Mary a grade 2 learner drew the river going up on her entrance to school. The downward turn was when her parents got sick.

By looking at a large sample of children, the direction of the line will give researchers an indication of the degree to which these children feel supported by their environment. It

will also show the extent to which they have a positive self-image and a realistic and constructive goal for the future. These are all significant elements in determining children's resilience. The belief in a positive future may be crucial in determining whether or not young people engage in risky behaviour in relation to HIV and other issues. (Healthlink Worlwide, 2005).

2.9.7. Ranking Exercise

Ranking is concerned with placing something in order. The process of the exercise is more important than accuracy (Boettiger, 2004). Ranking involves "ranking certain objects or issues according to a certain criteria, such as preference, importance or prevalence" (Van Vlaenderen & Neves, 2004). It is suggested that the researcher lets the participants conduct the activities in their *own* way, according to their "*own* units of measurement" using their *own* names for categories (Theis & Grady, 1991). This is an illustration of how participatory research techniques/processes emphasise the accessing of local categories and frames of reference (Boettiger, 2004). Ranking calls for the researcher to be both patient and organised at each step of the exercise (Theis & Grady, 1991). He/she must learn to sit quietly, listen and learn from the local people and be organised in that he/she must be prepared to ask questions that probe deeper into what is being said as well as with regard to practical considerations - taking notes, having enough materials e.g. audiotapes and paper (Boettiger, 2004). Various forms of ranking exist.

2.10. Summary

In this chapter I embarked on a literature review to gain perspective on the participatory research process. In paying attention to aspects of gaining access to research participants, in my study I focused on the ethical issues related to the use of data from the NRF project, and consent and confidentiality issues in interviewing the researchers in my study. I questioned the choice of methods in researching a highly sensitive issue that will enable marginalised children their maximum participatory rights and that will eradicate the power imbalances that exist between adults and children. The strengths of participatory research methodology helped me identify how the researchers raised the voices of the children to capture in-depth data of their lived experiences in this

marginalised context. Similarly, I identified how the challenges in the use of participatory research methods impacted the data collecting process of the researchers I interviewed.

In the next chapter I focus on the research methodology that I applied for my study in investigating the methodological and ethical considerations when using participatory methodologies with primary school children in mapping HIV/AIDS as a barrier to learning.

CHAPTER 3

RESEARCH METHODOLOGY AND DESIGN

3.1. Introduction

This chapter will focus on the research methodology that I applied for my study in investigating the methodological and ethical considerations when using participatory methodologies with primary school children in mapping HIV/AIDS as a barrier to learning. I will discuss the research paradigms that frame my study. I pay attention to the Richmond context as my study focused on the NRF project that was based in this context. I outline the participants in my study. I discuss the qualitative methods that I used in producing data, the ethical issues I considered and I discuss the data analysis techniques I applied in my study.

3.2. The Research Paradigm

The research paradigm of my study is framed by interpretive and critical theory. Both these theories promote qualitative research methodologies. The interpretative approach is 'the *systematic analysis of socially meaningful action through the direct detailed observation of people in natural settings in order to arrive at understandings and interpretations of how people create and maintain their social worlds'* (Neuman, 2000). As an interpretive researcher, I conducted semi-structured interviews with the researchers, observed how the researcher and the researched interacted in their natural settings and I analysed transcripts of conversations in detail. During my analysis I studied meaningful social interactions not just the external or observable behaviour of people. I took into account the participants reasons for their actions and the social context in which the data was gleaned.

Neuman (2000) suggests that critical social research can be best understood in the context of empowerment and bringing about change at grass root level. Within the critical social research paradigm, I identified participatory methods that empower children from marginalized contexts enabling them to be equal partners in the research process and I identified ethical considerations necessary when doing research with children.

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3.3. Context of the study

This study is based on a larger research project involving a team of researchers from the disciplines of education and psychology at the University of KwaZulu-Natal. The project was undertaken in 2004 – 2005 and was funded by the National Research Foundation of South Africa (NRF). The research sought to examine barriers to basic education that may have been precipitated by the HIV/AIDS pandemic.

The research context was the town of Richmond, Kwa-Zulu Natal. It comprises semi-formal and informal settlements which house about 700 000 people. It is noted for its high rate of political violence and its high rate of population mobility, with thousands of refugees leaving the area and later returning when peace was restored. Population mobility and the disruptions caused by political violence are associated with high rates of HIV infection (Whiteside & Sunter, 2000; Van der Riet, Hough & Killian , 2005).

The research project with primary school children involved 5 primary schools, a school for the deaf and two early childhood centres (ECD).

3.4. The Sample Group

The sample group for my study comprised of six researchers whom I interviewed; learners and facilitators from the primary school I observed; and learners and facilitators from the data sets I analysed.

I used purposive sampling to select the researchers to be interviewed (Henry, 1998). Table 4 below is an outline of the sample of researchers in my study indicating their expertise and the criteria for selection. All six researchers were from the University of KwaZulu-Natal. Their actual names have been omitted.

Table 4: Outline of the sample of Researchers in my Study.

Name	Expertise/Criteria for selection
Researcher 1	Project manager. Headed the project from the beginning to end. Had prior experience in working with vulnerable children in similar contexts. Was knowledgeable regarding participatory methodology.
Researcher 2	Master's student. Facilitated focus groups involving primary school children.
Researcher 3	Sign Language/Doctoral Student. Facilitated focus groups involving the Deaf Learners.
Researcher 4	Lecturer. Had prior experience in working with vulnerable children in similar contexts. Was knowledgeable regarding participatory methodology.
Researcher 5	Translator/School Teacher. Facilitated focus groups with primary school children in IsiZulu. Also translated data sets from IsiZulu to English.
Researcher 6	Lecturer Had prior experience in working with vulnerable children in similar contexts. Was knowledgeable regarding participatory methodology. Was involved in designing the focus group outline.

In my study the researchers are referred to as Researchers A – E at random order to protect the confidentiality rights of the participants. Reference is also made of facilitators in my study. The facilitators are the persons involved with the focus groups under reference from the data sets.

3.5. Methods of Data Collection

The qualitative research methods employed in the study were semi-structured interviews, field observation and document analysis.

3.5.1. Semi-structured Interviews

I used semi-structured interviews in my study because meanings, understandings, and interpretations cannot be standardised and, therefore, cannot be obtained with a formal, fixed choice questionnaire (Denzin, 1989). To guide me, I designed an interview schedule (Holstein & Gubrium, 1995). Firstly, I engaged in a focused literature study to determine the overall issues to be tackled in the interview. I listed a broad range of themes and designed questions within these themes. I arranged the questions from simple to complex and from broad to more specific, in order to allow the participants to gradually adjust to the pattern of the research schedule. Finally, I arranged the themes into the most appropriate sequence. The use of open-ended questions ensured a conversational dialogue, we were not restricted within any time frame, and the researchers in each interview were able to talk at length of their experiences and feelings on the issues at hand. This kind of interview is needed when in-depth information is required as in a qualitative study (Denzin, 1989). I recorded the interviews on audio tapes and transcribed each interview verbatim.

During the interview, I used prompts to clarify topics and questions whilst probes enabled me to ask respondents to extend, elaborate, add to, provide detail for clarity or to qualify their responses, thereby addressing richness, depth of response, comprehensiveness and honesty that are so often hall marks of successful interviewing.

3.5.2. Observation

According to Cohen and Manion (1994), observational data are attractive as they afford the researcher the opportunity to gather ‘live’ data from ‘live’ situations. I observed three focus group sessions conducted at a primary school as a non participant (Mouton, 2003). According to Bhana (1994) non-participant observation of a social interaction allows a researcher to gain insider’s knowledge. I recorded field notes on an observational

schedule. It was my intention to visit more focus group sessions but, unfortunately, the facilitator objected because of the confidentiality pledges. My visits, however, allowed me to capture the 'way of life' of the focus group sessions. My field notes contain information about the setting, the context, and reactions to the experiences by me, the children and the facilitator (Patton, 1990). This was of great help as I analysed the data sets.

3.5.3. Document Analysis

Henning (2004) states that any document, whether old or new, whether in printed format, handwritten or in electronic format and which relates to the research question may be of value. The selection of sampling is thus based on purposiveness and also on the notion of theoretical sampling, in which the theory and the emergent data indicate a stronger focus on something.

I analysed documents in the form of data sets involving the learners in the primary schools in the NRF project (2004, 2005). These data sets were important bases of information as they gave me further insight into understanding how notions of participatory research are embedded in the data collecting process. In analysing the semi-structured interviews and the content of the data sets, the purpose was to expand, refine, develop and illuminate a theoretical understanding of participatory methodologies used in the research project exploring HIV/AIDS as a barrier to learning (Marshall & Rossman, 1989). Analysis was also meant to transform the interview transcripts and the data obtained from the document analysis into an orderly, structured and manageable form with some meaning.

Thereafter, I scrutinized the research report on the findings of the NRF project (2004, 2005). I focused mainly on the findings related to the learners in the project. I also scrutinized the related journal articles based on the NRF project (2004, 2005) (see Table 5 below). Together these documents provided a wealth of knowledge for my investigation into the use of participatory methods in the NRF project.

The NRF Project literature review was also a valuable document to analyse, as it provided a perspective regarding participatory methodology when researching child participants.

Table 5: Related Journal Articles based on the NRF Project (2004, 2005)

- Francis, D., Muthukrishna, N. & Ramsuran, A. (2006). Deconstructing participatory research in an HIV/AIDS context. *Journal of Education, 38*, 140-163.

- Van der Riet, M., Hough, A. & Killian, B. (2005). Mapping HIV/AIDS as a barrier to education: a reflection on the methodological and ethical challenges to child participation. *Journal of Education, 35*, 75-98.

3.6. Ethical issues

In practical terms, it may be hard to make contact with children unless parents, schools or local authority departments authorize this (Borland et al, 1998). This results partly from a recognition of the legal status of children as dependants and partly from the concern about children's vulnerability. Permission was initially sought from the provincial Department of Education and the mayor of Richmond to conduct research in the community. An application for ethical clearance was made through the Research Office, University of Kwa-Zulu Natal. Approval for the NRF project was granted.

For my project I had to apply for ethical clearance through the Faculty of Education to conduct research. Thereafter, I had to seek permission from the Faculty to use the data from the NRF research project. I made contact with my sample group telephonically and sought permission to interview them. Appointments were scheduled. Before I interviewed them, I handed them a letter informing them of my research topic, my purpose for the research and why they were selected. I assured them of confidentiality and anonymity and their right to withdraw at any time they chose.

My sample group was all researchers who were well acquainted with the research process. They were also experts in their own fields and initially I felt quite nervous. As the interview proceeded I was quite impressed with the researchers' commitment, compassion, empathy, knowledge, experience and enjoyment in being part of this research project. Since the interviews were being taped and I wanted as much rich, in-depth data as possible, I assumed the role of passive observer and listener using minimal utterances such as 'umm', 'hmm' or 'yes'. The researchers I interviewed were 'experts' on different themes and we spent more time on each of these themes in the different interviews. This resulted in the capture of rich, in-depth data as opposed to repetition of the same type of data.

3.7. Data analyses

I transcribed the interviews verbatim and immediately after they were conducted since they were still fresh (Holstein & Gubrium, 1995). In keeping with the qualitative nature of the study, data was analysed thematically. I began by reading line-by-line and identified codes that I wrote at the end of the sentences wherever possible. Coding helped me identify underlying meanings in the text. I then identified salient themes, patterns and categories that emerged (Boyatzis, 1998). I grouped the topics that related to each other. I then found the most descriptive wording for the topics and turned them into themes or categories. Two types of catagories emerged; ones that I developed with understandings from literature and ones that developed naturally from the participant's responses. These gave rise to a thematic storyline which I present in the chapters to follow. My final step was to create links to established theory. I did this by examining the works of other researchers in the context of established knowledge to find literature to support my findings.

3.8. Summary

In this chapter, I outlined the research methodology used in my research study. My study was qualitative and it was framed by interpretive and critical theory as well as the new sociology of childhood. The participants of my study were six researchers who were experts in their field and involved in using participatory research methods in the NRF

project. The research methods I used were semi-structured interviews, observation and document analyses.

The next chapter presents the findings related to the procedures involved when using participatory methodologies with primary school children. I focus on issues related to gaining access to research participants and obtaining informed consent from the various stakeholders including children. Through my interviews with the researchers I focus on how the negotiations for access were undertaken. I examine the methods used for data collection questioning their effectiveness in produces in-depth qualitative data.

CHAPTER 4

PROCEDURAL CONSIDERATIONS WHEN USING PARTICIPATORY METHODS WITH PRIMARY SCHOOL CHILDREN

4.1. Introduction

Participatory methods are underpinned by principles of embracing complexity, recognition of multiple realities, prioritizing the realities of the poor and marginalized and grassroots' empowerment. In this chapter my aim is to answer the research question, " What are the procedural considerations when using participatory methodology with children in primary school within the context of HIV/AIDS?" Through the voices of researchers involved in the study, I present the findings related to the procedures involved when using participatory methodologies with primary school children in the NRF research project (2004, 2005). I focus on issues related to gaining access to child participants and obtaining informed consent from the various stakeholders including the children. As part of the process of gaining access to children's voices, I examine the methods used for data collection, and their effectiveness in producing in-depth qualitative data.

4.2. Gaining access for child participation

Due to the recognition of the legal status of children as dependants and partly from the concern about children's vulnerability, it may be hard to make contact with children unless parents, schools or local authority departments authorize this (Borland et al, 1998; Grieg & Taylor, 1999). Edmonds (2003) concurs that before embarking on interviews or on related research activities, the researcher has a responsibility to ensure that no harm will befall children as a result of their participation in the research process. One way of doing so is to solicit views and consent from adults concerned, i.e. parents, guardians or employers.

Researchers in the study gained access to child participation through community structures, school structures, by making contact with parents, and through gaining informed assent from the randomly selected children themselves. I present the procedure followed by the researchers to gain access through the aforementioned structures.

4.2.1. Access to community structures

Access to the community was negotiated via political and traditional leadership, parents and non-governmental organizations working in the area (Muthukrishna, 2006). Researchers explained the various community structures that were involved in the initial stage of gaining consent.

> *Researcher C: …there was a lot of buying in the idea. First stage in the process was meeting the mayor….. he totally supported the project. Then we had other forums like the stakeholder's forum, and then the head in each of the communities*

> *Researcher D: We met the chief. We explained the whole project to the chief. He met with his cabinet and they agreed. We met with the councillor ….and the whole community…*

In some South African communities the maxim 'It takes a village to raise a child' is still a strong unifying factor and therefore when we understand research with children we go first to the level that is responsible for children as people in a vulnerable context.

4.2.2. Access to school structures

The nucleus of the research site for learners was the schools. The South African School's Act (1996) has enforced the following structures at schools viz. the School Governing Body (an elected representation of the parents of the school), the Principal (including other management members) and the teachers. At school level researchers had meetings with key stakeholders.

> *Researcher C:... even in the schools we had meetings with principals first, and then teachers.*

> *Researcher D: We then met with the key stakeholders of the school, the principal, SMT and the grade educators….*

4.2.3. Making parental contact

The next tier of involvement was the parents. The Market Research Society (MRS, 2000) has recently reviewed its guidelines for research among children and young people. The MRS Guidelines (2000) says that children under 16 should not be approached without

their parents' consent and that information about the research should be prepared so that it could be comprehended by the parent and child.

In seeking to involve children in any participatory activity, O'Kane (2000) advises that it is important to gain active support from children's adult caretakers. For it is through this that the child or young person may be given more space and autonomy to make choices about when and how they participate in the research. This recognition was evident by a comment from one of the researchers.

> *Researcher F: Children's voice goes hand in hand with parents' voice. Children's voice does not exclude parents' voice. We had to have parent interviews.*

Before the researchers could meet the parents, the learners for the study had to be selected. The learners were selected randomly. The class registers were used. Every third or fourth learner on the class register was selected. In this way each learner in the grade had an equal opportunity of being selected. Gender distribution was even.

> *Researcher D: We asked the grade educators for the list for learners, the registers. We took the list and we did random sampling. We wanted five girls, we wanted five boys….*

Van der Riet et al (2005) noted that the selection criteria was misunderstood by the educators who at times tried to suggest children who were doing well, or children whom they perceived as being affected by HIV/AIDS.

Once the learners were selected, parent meetings were organised. Van der Riet et al (2005) explained that in the NRF project, the parents of the randomly selected learners were sent letters, written in their home language (isiZulu) inviting them to a meeting.

> *Researcher C: Letters were sent to each of the parents in Zulu requesting parents to allow the children to participate in the project.*
>
> *Researcher D: We wrote letters to the parents of these ten learners to invite them to a meeting.*

At the meetings, the nature and purpose of the research was explained.

> *Researcher C: And then there were meetings with the parents as well and they were told about the project.*
>
> *Researcher D: we informed them about the project, the nature of the project, the process the project is going to take and to ask them permission to work with their children. Two parents did not attend……. Later they eventually gave permission.……..*

Parents were given the opportunity to express concerns and ask questions before they were asked to sign consent forms. The major concerns raised by parents revolved around the need for confidentiality and issues related to the emotional state of the children (Van der Riet et al, 2006).

4.2.4. Access to the children through informed consent

According to Weithorn and Sherer (1994), children having the opportunity to give or deny informed consent is not only a right in relation to research which children share with adults, but it also contributes to their wellbeing, through giving respect for their sense of control. Alderson (1995) concurs that this is a crucial stage in the research process. It is important that children be told exactly what to expect and that they have the right to withdraw at any time during the research process. Being given the space to take part on their own terms, children get more involved and express a sense of ownership of the research process (O'Kane, 2000).

To protect the children's right to confidentiality, I had to seek permission from the Faculty of Education to use the data from the NRF research project for my study.

In the NRF project (2004, 2005) individual interviews were conducted in the participant's mother tongue language, isiZulu, by the focus group facilitators and researchers. Interviewing is the predominant mode of data and information collection in qualitative research (Seidman, 1998). It is during this stage of the research process that researchers learn as much as they can about the participants (Hall, Gillette & Tandon, 1982).

Firstly, children were informed about the project and their consent was obtained.

> *Researcher D: …… we met with the learners after their parents had given us consent to work with them. We explained to the learners in a friendly manner what the research is all about and the process of the research, the fact that. they will be taken out of the classroom one and a half hours.*

> *Researcher A: I explained to the learner what his position in this process will be. What was the purpose of the research? I did that individually at an interview with the learner.*

> *Researcher C: …they (the children) were initially told what its (the research project) about and what do we expect from them so their participation was voluntary. Nobody really decided they want to pull out although we selected them at random class registers they were given the opportunity to pull out once we've discussed the project with them and told them what we expect from them so their participation was voluntary.*

Secondly, basic biographical and contextual information was gathered such as financial status, number of people living at home, nature of dwelling and personal reasons for absence from, or late arrival at school (Van der Riet et al, 2006). A structured interview schedule was used for this purpose (Holstium & Gubrium, 1995). Later this information was useful in the triangulation process.

> *Researcher A: There were individual interviews just to ascertain the family dynamics…*

Thirdly, this interview built rapport between the researchers and the learners and provided the forum for accessing relatively sensitive information. In this regard the researcher had to convey trust and honesty, interest in the information, empathy and understanding, respect and courtesy, and that the information disclosed will be treated confidentially (Holstium & Gubrium, 1995).

> *Researcher D: The issue of confidentiality was explained to them (the children) and then their permission was asked whether they would like to participate in the project or not.*

4.3. Encouraging children's voice through a four stage focus group process

A four stage focus group process was used to access the voices of the learners in the NRF project (2004, 2005). Each focus group was designed to obtain data on key indicators related to barriers to learning. To increase the depth of information that could be acquired, a staged, participative process, beginning with general and less personal issues, and delaying the introduction of more sensitive topics to later in the process, was used (Van der Riet, 2005). It was hoped that over time the participants would feel increasing trust in the facilitators and each other, which would enable them to speak more easily about sensitive topics.

Stewart and Shamdasni (1998) agree that a focus group method values and prioritizes the perspectives, subjective accounts and experiences of the research participants. Kitzinger (1994) suggests that focus groups with children encourage and enable communication especially around difficult and sensitive issues, and allow for the exploration of differences, as well as similarities in experiences and thought.

I present a discussion on the different techniques and strategies, such as group norms, key indicators, a staged participative process, projective techniques, icebreakers and processes of closure, that were used in the data collection process during the focus group sessions in the NRF project.

4.3.1. Group Norms

The sensitive and emotional nature of the research topic created the need to provide a containing environment in which to share personal information (Van der Riet, 2005). Group norms were established by the participants guided by the facilitator at the first focus group session. At the beginning of each of the other focus group sessions children were asked to recall the previously established group norms/ group rules.

> *Researcher A: It is important to remember the group norms. Do you remember it?*
> *Participant A : Yes. We need to listen to each other and respect each other.*
> *Participant B. : Respect*

Participant C : Don't laugh at what someone else says..
Participant D : Everyone must have a turn to speak.
Participant E : One person speaks at a time..

Group norms also promote respect for participants and respect for each others views and opinions. This allows children to contribute to the discussion without the fear of being laughed at or embarrassed.

4.3.2. Key indicators

Each focus group was designed to obtain data on key indicators related to barriers to learning e.g. a key indicator was 'School'. Topics around this key indicator included motivation for going to school, likes or dislikes about school, level of participation in school, aspects that are challenging about school, absenteeism, homework and the support system. These indicators were relevant in allowing the researchers to produce data related to the research question regarding barriers experienced in learning. For example, a barrier to learning would potentially be revealed in patterns of school attendance, or the child's state of mental and physical health.

The following table, Table 6 illustrates the focus group topics and process (Van der Riet et al, 2006).

Table 6: An outline of the focus group topics and process (Van der Riet et al, 2006).

	FOCUS GROUP 1	FOCUS GROUP 2	FOCUS GROUP 3	FOCUS GROUP 4
Theme	School	Self	Sickness	Experience of HIV/Aids
Introductory tasks/ Icebreakers	Code names; Name & action game Establish group norms Confidentiality pledge	Greeting game Remember group norms Put on code-name tags	Finding animal pairs (cards) through noises Put on code-name tags	Circles cut into pieces find people in group Put on code-name tags
Activities in Focus group (FG)	TOPIC 1: Motivation for going to school Method: FG discussion	TOPIC 1: Telling life story Method: Timeline/Road of life drawing	TOPIC 1: What is sickness? Method: Drawing someone who is sick & FG discussion	TOPIC 1: Knowledge of HIV Method: FG discussion of statements
	TOPIC 2: What you like/dislike about school Method: FG discussion.	TOPIC 2: Self concept: what you like & dislike about yourself Method: FG discussion	TOPIC 2: Assessing knowledge and stigma re HIV/AIDS Method: FG discussion & 3rd person projection onto photo	TOPIC 2: Accessing support Method: 3rd person projection onto picture/photo
	TOPIC 3: Level of participation in class Method: Line ordering exercise & FG discussion.	TOPIC 3: Worries and strengths Method: Bean exercise & FG discussion	TOPIC 3: HIV/AIDS in your area Method: FG discussion	TOPIC 3: Feelings & experiences of HIV Method: Body Map Drawing
	TOPIC 4: Popularity and marginalisation Method: 3rd person projection onto pictures/photos	TOPIC 4: Resilience factors Method: Written sentence completion		TOPIC 4: Perceptions around relationship. (For grade 9's only) Method: FG discussion
	TOPIC 5: What is helpful & difficult at school? Method: FG discussion Ranking exercise and bean exercise			TOPIC 5: Reflection on group process Method: Group drawing and reflection/FG discussion
	TOPIC 6: Homework and support system Method: FG discussion			

4.3.3. Use of a Staged Participative Process

The focus groups were conducted in a series of four clearly defined, but inter-related, sessions. The sessions began with general and less personal issues, delaying the introduction of more sensitive topics to later in the process. The following extract from the Focus Group Schedule provides the broad themes for each focus group session.

> *Focus Group 1: School - focuses on external contexts and factors*
>
> *Focus Group 2: Self - focuses on personal and individual issues*
>
> *Focus Group 3: Sickness – focuses on somewhat sensitive issues regarding self and others*
>
> *Focus Group 4: Experiences of HIV/AIDS – focuses on highly sensitive issues regarding self and others*

This four-stage approach facilitated the development of rapport and trust within the group and between the facilitator and the participants.

> *Researcher E. In fact having the sessions whereby we would gradually develop a relationship by going stepwise into more and more sensitive issues was a very good strategy. In fact we had continuity and as the children developed a sense of trust so we were going into deeper more sensitive areas with them.*

4.3.4. Projective Techniques

MacNaughton et al (2001) state that persona dolls and puppets provide children with opportunities to "act out" their emotions and they also assist in building a "narrative or scenario about a more 'real' personality". They cite studies by Brown (1998) and Bosisto and Howard (1999) where dolls "Karabo" and "Mafuse" were used in a similar manner. In Focus Group 1, pictures of a boy, Sipho, and a girl, Thandi, were included to ascertain if there were gendered differences in reasons given for absenteeism/lack of progress. The following are the responses from a group of boys followed by responses from a group of girls.

> *I: This is Sipho. He did not come to school today. Why do you think he is absent?*
> *P1: Maybe he was late, so he was afraid to come to school.*
> *P2: Maybe he is going to the shop and hanging around with other bad boys and smoking and taking drugs.*

P3: He is a gangster and doesn't like schoolwork and writing.
P4: He was sick, coughing, and then he was sleeping at home.
P2: Maybe he is poor. So he was working.
I: What work was he doing?
P1: Cutting wood.
P2: Planting.
P3: Maybe he was helping somebody repair a car.

I: This is Thandi. She also did not go to school. Why do you think she was absent?
P1: Maybe she was pregnant. That's why she was absent.
P2: Maybe Thandi was raped and her mother told her to stay at home.
P3: Maybe she was afraid to come to school because the boy or man wanted to rape her.
P4: Maybe other children were laughing at her and gossiping about her so she was absent.
P5: She was absent because she had no money to come to school.
P6: Maybe her mother wanted her to have an abortion so she had to stay at home.
I: What will Thandi do when she stays at home?
P1: She cleans the house and washes the clothes all day.

The same technique was used in Focus Group 4 to implicitly encourage the development of resilience through exploring the types of support children could access and their knowledge of support systems.

F: Do you remember this girl?
P: Hlengiwe.
F: Hlengiwe's mother is very sick of HIV. Where does Hlengiwe get help?
P1:Clinics, Social Welfare provides her with counseling.
P2: family members.
P3: From church, community and neighbours.
F: Remember Hlengiwe has rights .. the right to learn, the right to protection. How can learners and teachers help her?
F: Let's say her mother dies. Where can Hlengiwe get assistance?
P1: From relatives.
P2: From social workers ……. Can get grant…..

O'Kane (2000) favours the use of concrete situations to help facilitate younger children's participation and ability to enter the discussion. He claims that enabling children to project onto a picture or an 'other' circumvents them from having to talk directly about potentially anxiety and stigma provoking personal issues. The respondent's real feelings are then inferred from what he or she says about others.

However, there were instances when children spoke and did not need something to focus on as illustrated in the following excerpt:

> *Researcher F: We shouldn't always make the assumption that children need to focus on something concrete to speak. Some of them are quite confident and they could talk about their experiences and what they want to say to us.*

Furthermore, a study by Aboud (1988) suggests that persona dolls demonstrate children's feelings towards the dolls rather than people. In the NRF project, researchers expressed their own conflicting views in using projected techniques as indicated in the following excerpt.

> *Researcher C: How were we exploiting the children by using hypothetical characters? One pupil said at the end it was good to take part in this research. It was good to tell people about our lives. Some people won't understand; they will think we are talking about our story. What did he mean by this?*

> *Researcher C: We used hypothetical characters. We assume that children are projecting their stories through these characters. But how do we know for sure? I think ethically we thought it will be wrong to ask them directly. Now there seems to be a tension between the two.*

> *Interviewer: As researchers and facilitators we went in to try to get information from the children. Would you say that some of the methods that we used could have been manipulative?*
> *Researcher E: No. It is well documented that children find it easier not to talk about their own experience but to talk about a third person. So it is easier for them to talk about little Thandi who has a problem rather than I have a problem. So if we're talking about another child it is easier for them. Let them feel free to express it. Instead of saying I had somebody in my family that died, Thandi has somebody in their family that died and so it enables us to break through the barriers of defensiveness.*

A further argument by a researcher in the NRF project concerning projective techniques indicates that it is not about the children's views or experiences but it is about their knowledge.

> *Researcher F: There are some theorists that are now arguing that it's not about just their (children's) views and experiences, it is their knowledge. So if we interrogate children's knowledge then I think we will see a lot more of a person getting to know the world. And the way they get to know the world it is not*

inferior by an adult standard because you measure it by an adult standard and say inferior. If you look at where the child is in his present stage then his experience is valid and his knowledge is valid, so the data is extremely valid I think.

4.3.5. Use of Icebreakers as warm ups

Icebreakers, used at the commencement of each focus group, created an environment conducive to the formation of group cohesion, promoting participation and helping participants to relax e.g. a game relating actions to each child's code name helped familiarize facilitators and participants with each others names, provided an opportunity to laugh and develop group identity.(Van der Riet, 2005). McMahon (1992) argues that play is often used when working with children as it is believed to be children's natural means of expression.

Interviewer : Okay, what are some of the methods you have used?
Researcher D: mmm the first one that I used was, I do not know whether you will call it a method or what because it kind of opened the discussion, the first one was a game. We passed the ball and each one had to say his pseudo name. To start with the game for me was important because it allowed them to relax and to allow them to feel at home and to see that this was not a class situation but it is different because they will be allowed to play.

4.3.6. Processes of Closure

Processes of closure were used at the end of each focus group session and at the end of the four sessions in order to express something affirming about themselves.

Facilitator: Now close your eyes and think about what you enjoyed about today's proceedings. We will start in 2 minutes. Okay tell us about one thing you enjoyed today.
P1: Talking about myself.
Researcher: Next.
P2: To be able to say what I want to say.
P3: We talk freely in the group.
P4: To talk about things we don't like in our families.
P5: I liked talking about things I like.
P6: We were able to talk about our individual problems and those we encounter at school.

Facilitator: Thank you, now what do you want to be when you are old?

P1: Businessesman.
Researcher: What type of business do you like?
P1: Selling bread and other basic essentials, general dealer.
P2: I want to be a manager at Eskom or an engineer.
P3 : I want to be a police.
P4 : I want to be a doctor. If that plan fails I will be a presenter.
P5: I also want to be a doctor.
P6: I want to be an Accountant.
P7: I want to be a soldier.
P8: I want to be a lawyer

The risk and resilience literature argues that part of being able to build resilience is the ability to articulate positive things that one is, one has or one can do (Grotberg, 1995). These closing activities also served as a reminder to keep information confidential and to distinguish the focus group activities from other school based activities (Van der Riet, 2005).

4.4. Data Collection Techniques used to access children's voices

The research team in the NRF project (2004, 2005) used participatory techniques to seek rich descriptions of local knowledge and lived experience (Kelly & Van der Riet, 2001; Van Vlaenderen & Neves, 2004). The active involvement of learners in expressing their own perspectives on the topics under discussion was recognised as being critical to the research issues. Therefore, there was a need for participatory techniques that valued the child and young person and acknowledged their vulnerability in terms of issues of power, control and authority (Christensen & James, 1999). A discussion of some of the techniques used in the NRF project to access children's voices follows.

4.4.1. Use of Drawings to access children's voices

Drawings were used several times in the focus group processes, with the main aim of facilitating and enabling expression. Drawings can provide quality information in a fun and creative manner (Deacon, 2000). Oaklander (1988) argues that pictures can be used in endless ways, for a variety of purposes and at different levels. The very act of drawing, with no therapist intervention whatsoever, is a powerful expression of self….. and

provides a way of expressing feelings. I present some of the researchers' experiences with the use of drawings in the NRF project.

The children's drawings provided useful information on relationships.

> *Researcher F: We gave them drawings on how they view their environment…. we picked up lots of stories of relationships and lots of information regarding presence and absence in their lives….. it just wasn't depicted like an adult drawing….. little squiggles ….and that is how the children were able to tell us something.*

The children interpreted their drawings and related stories around them. Each child's drawing was valued and affirmed.

> *Interviewer : So the interpretation of drawings were done by the children.*
> *Researcher F : By the children. When they drew, they were left with their crayons and quite comfortable around the table.. Then we had a talk session and then to affirm them, they pasted it on the wall. Every child's work was valued.*

The drawings indicated the presence of death in their lives.

> *Researcher B: They drew coffins all the time. And most of the time in the coffins were mothers. This indicated to me that they experience death often.*

The child's scribbling backed by the story provided valuable information on relationships.

> *Researcher F: In the children's drawings we valued scribbling. But you would say this is not on. But when the children started talking, there were stories behind those marks.*

4.4.2. The use of the Road of Life Activity to access children's voices

In Focus group 2 children drew 'A road of life' to share their life stories through the metaphor of their life as a journey or road, and to express significant life events, including whether the children experienced loss and/or illness of others during their lives.

Health Link Worldwide (2005) in using this technique, learnt about issues related to support provided by the children's environment, positive self-image and children's resilience capacity.

In the NRF project, in some instances the activity had to be abandoned because the concept was too abstract for children. The following extracts from interviews with researchers, illustrates the problem further.

Some learners found this activity too abstract and could not link the drawings and their interpretations.

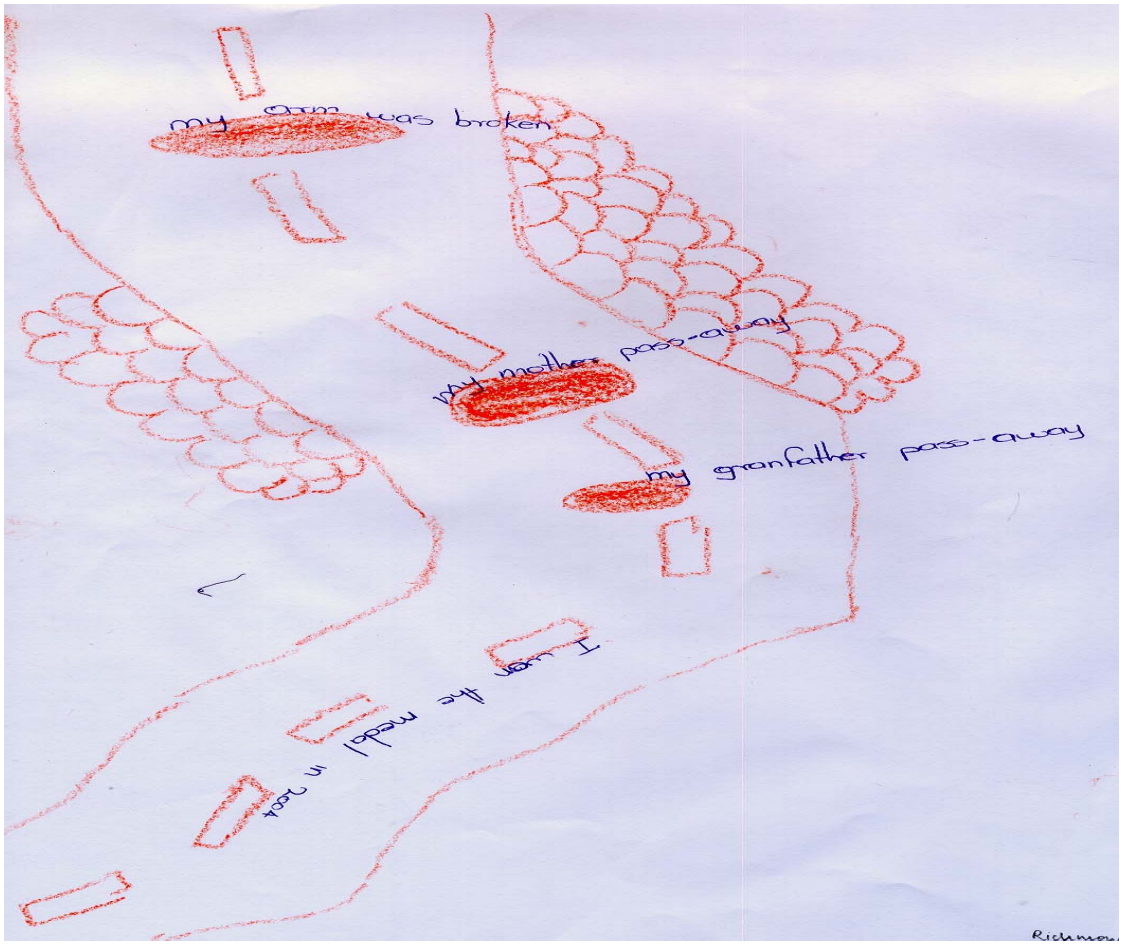
> *Researcher B: It was too abstract for them. We didn't use it for the little ones. We used it for the 9-11s. I just asked them to draw things that had happened to them – good or bad. I got more joy saying that than saying the road of life.*
>
> *Researcher D: They were very, very good at drawing the road and putting the symbols and everything but when it came to asking them what this thing symbolises in your life, it was difficult for them. They were coming up with different stories of their lives not the story you would think will emanate from their drawing.*

The deaf learners had problems interpreting the metaphoric symbolism. They require everything to be concrete, touchable and visible.

> *Researcher A: With deaf people everything has to be very concrete, touchable, visible. It was very difficult for them to comprehend the idea of a road imitating life or being a metaphorical representation of life. Or seeing a rock as an obstacle or seeing a boulder as a barrier, or having to cross a river as another obstacle in life.*

However, a few groups did experience success with the activity as illustrated in the drawing (Illustration 1), below, showing the times of various family members' deaths.

Illustration 1: The Road of Life

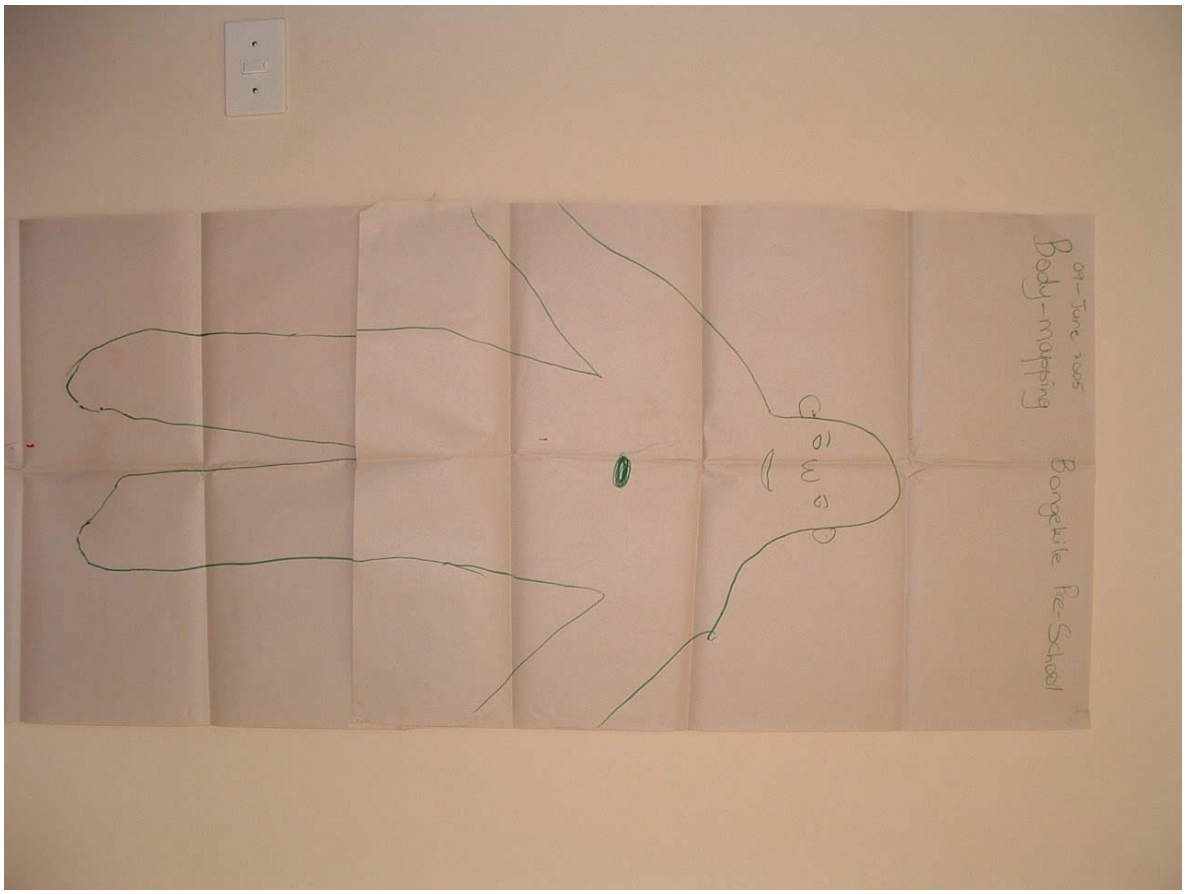


P1: In 2001 it was hard when my uncle died and I stayed at home a whole week without going to school… but I did come back to school… A few weeks after my uncle died, my father was sick and I had to stay at home…

4.4.3. The use of Body Mapping to access children's voices

Body mapping was used as a story starter. The aim was to facilitate children talking about their perceptions of illness and support during illness (Van der Riet et al, 2006). After the children completed the mapping exercise, the facilitator told a story about a child who is ill and experiencing physical pain. She then got the children to respond to the question: Where is the pain? Children then drew their perceptions about the location of the pain on the body map. The facilitator probed further: Why is the child having pain? Where would the child go for help?

Illustration 2: Body Mapping



4.5. Summary

The findings in this chapter suggest that when using participatory methods in primary schools in vulnerable contexts in South Africa, gaining access to child participants requires negotiations with their gatekeepers i.e. the community, the school and parents since the maxim 'It takes a village to raise a child' is still a strong unifying factor. Children's informed consent had to also be negotiated as parent's consent does not automatically approve participation. A discussion of the design of the data collection technique viz. a four-stage focus group process to access the voices of the learners, followed. An interesting debate on the use of projective techniques emerged. The use of participatory techniques viz. drawings, the Road of Life activity and Body Mapping, enabled stories of the research context to emerge via the participation of the children.

In the next chapter through the voices of the researchers in the project and the analyses of the data sets, I seek to identify the strengths of participatory research methodologies with primary school children.

CHAPTER 5

STRENGTHS OF PARTICIPATORY METHODOLOGY

5.1. Introduction

In this chapter through the voices of the researchers in the project and the analyses of the data sets, I aimed to identify the strengths of participatory research methodologies with primary school children. It was my intention to ascertain whether the methods do afford children their participation rights and whether they allow for the production of in-depth qualitative data. I also focused on the researchers' facilitation skills in giving space to children for maximum participation.

5.2. Raising the voices of children

The focus group method valued and prioritized the perspectives, subjective accounts and experiences of the research participants (Stewart & Shamdasani, 1998).

5.2.1. Children were given space to talk about how people respond to someone who is HIV positive.

In focus group three and four the participants were able to discuss sensitive information related to someone who is HIV positive. This was possible because the use of the staged participative process (see 4.3.3.) enabled the group to build sufficient trust with the facilitator and each other. The extract below shows children are knowledgeable of their life world and function as members of society.

> *Interviewer: If I am HIV positive what will people say about me.*
> *P1: They will talk about what you did before. That your behaviour was bad and that's why you have AIDS.*
> *P2: Some people will say ' sorry and shame' and they will try to help you.*
> *I: What else will the people say?*
> *P3: They will tell you you were a bad person. And that you were smoking, and drinking and taking drugs and maybe you have TB.*
> *P4. They will tell you must stop going everywhere and having so many boyfriends and changing boyfriends all the time. You must not be stupid. You must be smart.*

5.2.2. Communication around difficult and sensitive issues came to the fore

Kitzinger (1994) suggests that focus groups with children encourage and enable communication especially around difficult and sensitive issues, and allow for the exploration of differences as well as similarities in experiences and thought. In the NRF project (2004, 2005) drawings in the form of the body map exercise in focus group 3 where pupils had to express their feelings and experiences of HIV allowed this strength of participatory methods to come to the fore.

> *I: Now let's talk about your drawing. What is this here on the face?*
> *P1: The man goes everywhere. Smokes dagga. Have sores on mouth and nose.*
> *I: And here on the neck?*
> *P1: Has sores on the neck and scratches a lot.*
> *I: And here. (Points to the groin area).*
> *P1: There are bad bleeding sores.*
> *I: How does that happen?*
> *P!: The man exchanges underwear with other people. You must not do that – must only wear your own.*
> *I: There in the hostel does that happen? The boys exchange underwear?*
> *P1: Yes the other boys do that but not me. I don't want to get bad sores.*
> *I: Did you have these sores at any time before?*
> *P1: Yes before. A long time ago. But now it is better now.*

5.2.3. Stories enabled narratives about lived experiences

Story telling was a spontaneous way through which researchers elicited data regarding knowledge and stigma related to HIV/AIDS in Focus group 2.

> *Facilitator: Now I am going to tell you a story about Sipho (Holds up picture of Sipho). In Sipho's family there is a person that's sick. The person has HIV/AIDS. Do you think Sipho will have problems in school?*
> *All: Yes*
> *Facilitator: Now tell me what kinds of problems Sipho will have?*
> *P1: Maybe he cannot do his homework. The person is coughing and disturbing him.*
> *P2: He will be thinking about the sick person all the time. He cannot concentrate and his learning will be slow.*
> *P3: Because there is a sick person at home, Sipho will have to help the person all the time. Then maybe he will be absent from school and he will miss a lot of schoolwork.*

P4: Maybe, sometimes Sipho has to take the sick person to the doctor or the hospital. Then he will not have enough time for school work. He will also be absent.

5.2.4. Promoted interaction between Participants

Kitzinger (1994, 1995) argues that interaction is the crucial feature of focus groups. The interaction between participants highlights their view of the world, the language they use about an issue and their values and beliefs about a situation. Interaction also enables participants to ask questions of each other, as well as to re-evaluate and reconsider their own understandings of their specific experiences.

The following excerpt is an example of organized discussion (Kitzinger, 1994); collective activity (Powell, 1996) and projective techniques used in focus group 3.

F: This is Hlengiwe. Please let us look at Hlengiwe. (laughing) Okay if we made a story why would you say Hlengiwe did not come to school?
P.: Hlengiwe washed and dressed for school then she had an argument with a child at school and she is afraid to face the child.
F: Okay thank you. Somebody else.
P: Maybe she has got ready for school. Here is uncle and mum. Uncle lives with mum. Mum and uncle go to work. Maybe uncle wants to have sex with him before you go to school.
P: Yes, maybe she is even stressed.
P: Maybe your boyfriend is waiting for you during break at the gate after school. He wants you to go with him.
P.Maybe Hlengiwe had arranged with her boyfriend that she would not be at school while her parents think she is at school.

5.3. Listening to the Voices of Children

Christiansen and James (2000) explain that research has moved away from seeing children as passive recipients of socialization to recognizing them as active participants in the research process. Hill (1997) confers that earlier research tended to be on children, regarding children as subjects of the research. Increasingly, research is conducted with children, who are being involved as active participants. In socially disadvantaged settings

where children's voices have been neglected, researchers are challenged to create space and techniques that enable children to be heard (OKane, 2000).

The four focus groups gave the learners the opportunity to verbalise their experiences. Their responses to this experience (predominantly that it was too short and they wished it could continue) highlighted the need for this type of activity within the school context. The focus group discussion process seemed to fill an important gap in the learners' lives in terms of a context to talk in, and to be heard. For example, many of the learners either directly reported or seemed to be speaking about their experience of death in their families for the first time. A regular forum in which grief and mourning processes could be facilitated would go a long way to mediating the impact of HIV/AIDS, and the learners' experiences of poverty and hardship in this context (Muthukrishna, 2006).

The following excerpts highlight issues related to children's voices being heard in the research process. The children repeated frequently that someone listened and paid attention to them; and that the focus group sessions provided a platform where children could speak and be heard.

> *Researcher E. The children frequently repeated that they found it useful that somebody can listen, that someone had paid attention to them, that they had been given voice.*
>
> *Researcher B: And then also the listening. The adults I don't think they have enough time to listen to them, all their concerns and this was a platform where they were allowed to just talk,…. knowing that it was confidential.*

There was also evidence that the focus group sessions promoted children's listening skills. This was evident in the last session as the following excerpt indicates.

> *Researcher E: When we did the evaluation of the process, the children had a very clear recall of the different exercises we had done with them. . They remembered it and then were able to recall it. So in terms of our interaction with the children I think we achieved those important objectives. We wanted children to feel they had a voice, that they were important that each had a unique perspective.*

Everyone was given an opportunity to speak and be heard.

> *Researcher C: Focus group techniques allowed all participants opportunities to participate, discuss, share, talk about experiences.*

Silences and body language were also acknowledged. Voice can be more than the traditional audio voice. Giving voice to children could include talking through silence, through body language, through non participation. Especially with little children we need to read all aspects of the child's communication processes.

> *Researcher F: Is voice only what you hear? What about silences? With children silence is a way of knowing. What about body language? Their body language tells you a lot. You were able to read – just leave me alone with that. What is the child 'saying' via these ways of expression?*
>
> *Researcher C: The researcher made sure every learner spoke. She affirmed learners' participation and silences, giving each learner a voice.*
>
> *Researcher F: Eventually they could tell us their own stories. When I say stories we are not talking about a story structure with a beginning, middle and end. I am talking about two or three words, with body language where you are able to pick up the message that is being conveyed.*

5.4. Children benefited from participation.

In terms of benefit to the child there is much international and local experience that suggests that children benefit from participatory processes. Evidence suggests that children participating in a process such as this one contributes to building children's self-esteem, encourages self-reflection and that talking about a problem allows children to organize their perceptions about how to solve it.

Informal discussions with children who took part in this research suggest that they felt valued because they were being asked their opinions. In addition, the transcripts of discussion in the focus groups show evidence of an improvement in reflection and problem-solving skills on the part of the learners. The following excerpts are researchers' comments regarding benefit to the participating children.

Children were able to engage in personal issues and this was therapeutic

Researcher D: I felt …the focus group … was a good exercise for learners to actually engage themselves with personal issues that the school and the family has not given that kind of an opportunity.
Interviewer: In a sense you were saying that the sessions were therapeutic for the children?
Researcher D: Ja. They were given an opportunity to engage with their personal lives.

The children felt important and recognized.

Researcher A: They felt so important. They felt so wanted. They felt a sense of belonging to the process. They felt a sense of responsibility. . For once they were getting some recognition, and they felt so important in this process. I think they quite enjoyed the interactive nature of the process.

It was fun and they enjoyed it.

Researcher B: The best part of it was that the children enjoyed it very much. When we gave the children the crayons, they were thrilled at having this individual box of crayons, and this paper, and they could just draw at leisure. I don't think they had enough of that at school. Immediately you had their total support and response. This was because it's something that they enjoyed doing.

Researcher A: I think they quite enjoyed the interactive nature of the process. The response was very positive and when a session was over or an activity was completed, they were very enthusiastic to begin the next activity.

5.5. Enabled Triangulation

According to Neuman (2000) triangulation in social sciences involves looking at data from multiple angles and viewpoints and it is beneficial in qualitative studies. Lincoln and Guba (1985) and Patton (1990) concur that by using multiple data collection methods researchers triangulate their data, allowing them to analyse a question or topic from multiple angles, sources and varieties of expression. The following excerpts are examples of sources for triangulation within the NRF project:

There was a link between the parents' interviews and children's drawings.

> *Researcher F: We started with the adults first (parent interviews). We got the key issues out. We had this trend coming from there e.g. the issue of biological parents and the issue of the extended family. There were only two biological mothers that attended and the rest were grandmothers. So that straight away said something about the presence of the granny in the life of the child and when we did our drawings with the children that came out also very strongly. So there is like a triangulation of data in terms of grannies and in terms of the biological mother. So when you look at the children per say in isolation, you say not rich data, about two or three words. Some meaning could be made when you triangulate it with what the parents have said.*

There was a link between the learner groups and teacher groups. This enabled researchers to verify data received from one group (learners) about another group (teachers).

> *Researcher E: I also really think that there was lots of informal information gained from the learners in terms of teachers who didn't really know very much about the children in their classes. The teachers were highly demotivated. They don't have a work focus particularly in the outlying rural areas. Those teachers don't feel as though they are very involved with their learners and they don't take ownership of the children in their care.It would be so nice if those educators could feel that these are our children. There's no sense of belonging. It's just a job they do.*

A case study approach enabled the triangulation of data from the various participants, contexts and data collection techniques (Muthukrishna, 2006).

> *Researcher F: There was a whole community that spoke to the outcomes of this project, parents, teachers, community leaders, pupils, and I think that that is extremely valuable for us to note.*

5.6. Committed, compassionate focus group facilitators

The focus group facilitators were mainly students enrolled at the University of KwaZulu Natal in the Education or Psychology Departments. Some facilitators were more able to deal with the sensitiveness of the research topic while others were familiar with classroom routines and discipline procedures. The facilitators had to definitely draw on skills beyond those of mere researchers. In addition to performing the task of data collection, they had to develop rapport and trust with the children, manage the emotions

of the children and their own responses, and find a way to process their response to the poverty-stricken circumstances of many of the participants (Muthukrishna, 2006).

The following excerpts from the interviews with the researchers confirm the commitment of the facilitators regarding multiple role and compassion.

Multiple roles were performed by the facilitators.

> *Researcher F: She at times sat as a teacher of a class. She introduced the activities. At times she was a mother, carer because there were sick children. She had to watch snack time, toilet times, watch the running noses, look for signs of discomfort, comfort when there was discomfort.*

The facilitators displayed compassion.

> *Researcher F: Your humanitarian side comes through. So you become socially responsive. You start by collecting data but you do all sorts of other things…..*
> *Personally that touched me. It really touched me. When I went home that day I couldn't just sit around. I went running around collecting old clothes and so forth to get it across just to say that we do care. We want to listen to what you have to say because we have a purpose but we do have a caring nature of doing something of a personal nature.*
>
> *Researcher F: I think that made me introspect. And look a little bit at who we are and what we do and what others don't have in relation to us.*
>
> *Researcher F: Like the child that has AIDS. You think I am going to be here for a couple of weeks, will I see this child again? It touches you. You feel com passion and empathy. There is a connection. Also being female and you know thinking of your little one at home. That really does touch you.*

Participatory research results in new learning and capacity building of not only the participants but also the facilitators.

> *Researcher E. I've enjoyed working with facilitators who could then get into a path of empowerment, sort of personal capacity building. We hadn't really anticipated that, but that's been useful to see the increasing skills of the facilitators and some of the cognitive shifts they've made. .*
>
> *Researcher F: You go in with certain assumptions. We all go in with fixed notions. You go in thinking you will find what you want. But you come out with a*

new thinking. So it depends how open you are to the environment. How you let it speak to you and what you make of it.

5.7. Results create greater awareness and benefit participants

The results obtained from this research process enabled researchers to intervene and address the problems identified. In this way children gained access to the channels of communication from which they were excluded.

Researcher F: ….. we worked ….through referrals. Like there was one mother who said that she was waiting for ages for her grant. We took down all her details and followed it up with the Department of Social Welfare.

Researcher F: The other thing was that the one child, a very tiny looking child ……. upon our investigations this child was HIV positive. So we wanted to make sure she gets the benefits of the Drop in Centre. She was not receiving food parcels on a regular basis. Contacts were made regarding that.

5.8. Summary

This chapter examined the strengths of participatory methodologies with children. The findings confirm that these methodologies give space to children as competent knowers of childhood. They take an active stance in engaging with the issues that concerns them in their lived realities. Furthermore, the skill of the researcher is developed through interactions with the children. Knowledge is produced by including those children who have previously been absent from research involving the sensitive issues around HIV/AIDS that affect them personally. The potential of working in participatory ways helps to raise awareness of the plight of children in the vulnerable context. The next chapter will focus on the challenges in the use of participatory research methods.

CHAPTER 6

CHALLENGES OF PARTICIPATORY METHODOLOGIES

6.1. Introduction

O'Kane (2000) agrees that the use of participatory techniques with child participants do have their challenges and limitations. In her study on children and decision-making, she found that some techniques clearly still require a certain level of conceptual or physical ability. Van der Riet et al (2005) concur that embedded in the participatory research process with child participants is a tension between the useful, child-friendly and inclusive participatory techniques and the difficulties that arise in managing the data that is fascinating, but pose additional challenges in recording, analyzing and interpretation.

In this chapter I focused on the challenges of participatory research methodologies experienced by the researchers I interviewed from the NRF project (2004, 2005). I focused on the power dynamics and how it impacted on the data collection process. I identified the challenges regarding facilitation issues faced by researchers in this study with regard to their skill, expertise and training. Furthermore, I focused on the language issues and the issues regarding the large data base that emanated.

6.2. Power Imbalances

Challenges of power imbalances were evident in issues such as differing world views between adults and children, researchers seen as experts by children, race of researchers, children's wishes to please adults and the dynamics of power relations within the research team.

6.2.1. Differing worldviews

The imbalance of power was evident through the challenges in differing world views with regard to adult/child relationships regarding discipline, learning and teaching in the different contexts and different school 'cultures.' In one school context there seemed to be very little respect for adults by learners. A few educators of this school were seen with sjamboks and threatened to use them on the learners. The learners, in the focus groups refused to cooperate with the researchers unless they too had a sjambok.

Interviewer: Did you encounter any problems with power relationships between the children and the facilitators?
Researcher E: At the one school yes. I think that's what threw the facilitators. They were expecting a relationship based on respect and authority. Some of the children would say, we will not come listen to you unless you've got a shambock. That really startled all of us I think.

Another school context was permeated by a norm of disciplined, respectful learner body who listened to educators and other adults.

Researcher E: But there was also that feeling of - particularly when one dealt with the quieter well behaved children in some of the rural areas – that it's very difficult to break through that power the way the adults view the children.

6.2.2. Researchers as experts

Researchers are often viewed by the participants as the expert (Harding, 1991) imposing their ideas consciously or unconsciously as seen in the following excerpt.

Researcher A: I think initially there was power dynamics with me. Firstly when I introduced myself coming from my school. My school is seen as elitist. I also told them my background, that I am the Deputy Principal of the school. I think that put me above them. Thirdly, I think being of a different race also caused a certain amount of dynamics but as soon as they got familiar with me, it balanced out. But then I interacted so fluently with them in sign language that we eventually integrated.

6.2.3. Racial power

Prior to 1994, the Group Areas Act isolated people living in South Africa according to race. When the act was abolished people were free to live where they pleased. However, the migration is always from historical black areas to white but not the other way around. Due to the past laws of apartheid and discrimination, in the historical black areas (such as Richmond), white people are viewed as powerful people in the post apartheid South Africa. In the NRF project the following excerpt indicates how race of the researcher affects the forging of good relationships.

Researcher E: With the rural children they're not used to White people. It was going to be too difficult.
Interviewer: Was that a problem? Were the children intimidated with people of different colour or of a different status?
Researcher E: I've certainly found that in my research before. Who's this Molongo who comes along? She's got a car and seems to be in charge. She seems to be the one everyone listens to and so on. And in some ways that perpetuates the idea that it is the White people who hold the power, the knowledge and so on. You know we don't want to be doing that in terms of what is ethical in society and for transformation.

6.2.4. Children's desire to please adults

A further aspect to consider regarding children's response in research is whether children respond to adults because that's what they know is expected of them.

Researcher F: Our focus was on accessing children's voices. Giving voice to children, to what extent is the child responding to you because you are an adult and children are supposed to answer to adults

Researcher F: …..there are power relations embedded within relationships with adults and children. To what extent is the child responding to you because you are an adult and children are supposed to answer to adults

6.2.5. Dynamics of power within the research team

Van der Riet et al (2005) note that the lack of probing during facilitation could have been because the inexperienced students as facilitators are unlikely to challenge more experienced staff who were responsible for designing the focus group schedules.

Researcher E: It was almost as if part of what happened is that the facilitators understood completely that we (designers of the focus group schedule) wanted to know the opinion of every child that had been selected but it meant that at times that cost some of the probing.

On the other hand, a senior lecturer imposed her 'expert knowledge' at a focus group session to promote probing.

Researcher C: …. with the learner group…at times I kind of intervened you know I remember , one of the activities is they have to put uh these little beans.. It was a hierarchy activity. She had to ask them why did you put more beans on this

issue. I could see what was going on and she hadn't done that. She hadn't done it well enough because she missed a couple of kids out. And I went to kind of intervene you know and tell her.

6.3. Facilitation issues

The facilitators were relatively inexperienced in research and facilitation, and generally lacked counseling skills (Van der Riet et al, 2005). I present the responses of the researchers I interviewed who noted that the lack of comprehensive training impacted on the facilitators' ability to probe, to deal with sensitive issues, and to cope with the particularities of learners from rural and urban areas.

6.3.1. The lack of comprehensive training

In the NRF project, the data collection process was facilitated by isiZulu-speaking masters students as research assistants who were simultaneously collecting data for their own theses as well as for the research project as a whole (Van der Riet et al, 2005). As masters students they were developing an understanding of how research and reflective practice work.

Researcher C: One of them (facilitators) said I'm so ashamed. I so wish I could have done better. So it had to do with the fact that they were also nervous. They needed more training. They needed to have done more reading. Although they did have a workshop, on participatory methodologies the whole research team, but that wasn't adequate…

6.3.2. Probing skills

O'Kane (2000) argues that while the participatory techniques are useful, the dialogue around activities is what provides the richest source of interpretation and meaning. The facilitators in this project, tended to adhere to the structured set of questions for the focus group, rather than adapt this structure at appropriate times to incorporate and explore the responses of the participants (Van der Riet et al, 2005).

Researcher C: There wasn't enough probing. Part of the issues raised were not probed…… children were not given the opportunity to expand on issues they raised. For example when asked what they would like to do when they grow up,

most of the children said they want to be nurses and doctors. One of the kids said I want to be white when I grow up. And that wasn't probed.

6.3.3. Dealing with sensitive issues.

Working with vulnerable groups, and young children, require researchers to be sensitive to the inherent tension between data collection and paying a facilitative and, at times, a therapeutic role. Van der Riet et al (2005) noted that the competence of the facilitators in the NRF project becomes an ethical issue, and that this demand goes beyond the role and skill expected of a research assistant.

Researcher E: I think it would have been better if we had a bit more scaffolding with the facilitators. I think they would have felt safer in terms of focus groups if they'd had somebody tending to the emotional material right there. That's almost impossible with our work load but it also would have been useful. E.g. if we could have gone out in pairs. One could have handled the language part and one could manage the emotional issues or the teaching and probing.

Researcher E: Whereas we were focusing on research work with children but because it was emotionally laden, we underestimated the ability of the facilitators to carry it therapeutically because we would have expected our students to be more readily able to do that. That was part of the cost I suppose.

6.3.4. Coping with peculiarities of children from rural and urban areas

Globalisation of the world has made visible the diversity of variable circumstances in which children grow up (Prout, 2005). Childhoods are linked to variables such as culture, race, social class, gender and time (James & Prout, 1997; Mills, 2000). Van der Riet et al (2005) found that working across different contexts and different school 'cultures,' meant that the facilitators had to adapt their expectations and their facilitation skills. Due to insufficient training and lack of experience this was not easy for novice facilitators.

Researcher E: There were lots of differences. The children in the rural areas were unsophisticated, quieter, obedient, very subdued. The next group in the urban area was boisterous, outgoing, untainted, very spontaneous, and difficult to manage. The facilitators had two entirely different experiences. With the first group they went to they thought okay now we can manage the rest. They went to the next group and it was an entirely different setup. If you don't have a lot of

experience and the skill or immediate backup, then it can be very frightening for the novice researcher.

6.4. Language Issues

One of the key features of participatory methodologies is about being an insider and being in the situation of participation. Muthukrishna (2006) explains that because of language, in most instances, the research team was very much like outsiders to this process.

6.4.1. Use of isiZulu researchers (mother tongue of participants)

The excerpt below illustrates the challenges related to the language issue. Most researchers could not speak isiZulu i.e. the mother tongue of the learners.

Researcher C: … in this project we actually used almost second level researchers because of the issue of language.

Researcher F: In planning we were very sensitive to the language issue and therefore got someone who was fully conversant in isiZulu.

There were also tensions with translations. Most of the participants were isiZulu speaking and this meant that the data had to be translated and transcribed. This raised issues about lack of equivalence of concepts across English and isiZulu, and practical difficulties in having to train translators to engage in translation of the transcriptions.

Researcher E: Well language made us reliant on the translators and on the translators giving us accurate translations.

Researcher B: I was involved with some of the translations … Sometimes when they use the word in their particular language, now if you translate that word to English it doesn't have the same effect. So normally then you put the Zulu word , then the English explanation in brackets, so that you retain the whole sense of the way it was said. But because it is a verbatim translation, word for word, you are capturing as much of it as possible. I am not saying that it is one hundred percent because you know translating from one language to another is not always the same.

6.5. Large Data Base

The limitation in using the focus group process was that it was extremely intensive, and it generated enormous volumes of data. Van der Riet et al (2006) explains that the size of the project, the sheer effort to practically manage conducting four focus groups in five schools, to technically record and translate everything, and to remain consistent across all the groups, sites, grades, and across the various researchers involved (seven different facilitators with various degrees of experience) resulted in poor quality data in some cases and in other cases some data being lost.

6.6. Time Consuming

A further constraint was the amount of time involved in operationalising the research question into research instruments; negotiation of access to the sites, obtaining consent from parents/care givers and learners and conducting workshops to train in facilitation skills.

> *Researcher E: I've never been involved in such a time consuming and huge research project before.*
>
> *Researcher F : I think time is always a problem.*
>
> *Researcher E: We didn't have time to do a pilot study. Instead we had a time for reflection- also important since the experience was emotional for facilitators .*

6.7. Summary

Through the voices of the researchers I interviewed and the analyses of the data sets the findings of this chapter suggest that the challenges are areas that require researchers to adopt a reflexive approach to research. They need to be aware that who they are and the skills they bring to the research process impacts on the studies they conduct in a vulnerable context. In the next chapter I will focus on the ethical issues that had to be considered.

CHAPTER 7

ETHICAL ISSUES

7.1. Introduction

In this chapter I will focus on the ethical issues that had to be considered. Whilst ethical clearance is obtained from academic bodies before a study it is important to explain how ethical issues are handled in practice. Through the voices of the researchers and the data sets I focus on issues related to informed consent, protection of identity, selection of research participants and minimising harm.

7.2. Informed Consent

When researchers seek consent from parents for children, this is not the end of seeking permission for participation. Cohen and Manion (1994) point out that consent involves not only giving children a 'credible and meaningful explanation of the research intentions', but also a 'real and legitimate opportunity to say that they do not want to take part.'

> *Researcher D: The fact that their parent gave consent was not binding. It was important for us to get minors' consent to say we would love to participate or no we would not like to participate. Once we had done that it was explained that maybe you say you want to participate, if you feel that during participation you do not want to continue you have a right to do that. Nobody will question why you are dropping out of the discussions.*

7.3. Protection of identity

Compared with quantitative research where individuals become 'lost' within statistics, in qualitative research illustrative narratives, examples and quotes are often integral to the presentation of data. In the NRF project, the participants' identities were protected through careful selection of learners, through the use of pseudonyms in the form of code names, by confidentiality pledges that were designed and operationalised, and by ensuring a secure and emotionally containing context. This is important since some researchers feel that children may grow up and regret their articulation during childhood and therefore, it is good to protect their identities.

7.3.1. Careful selection of learners

Working with disempowered participants, on highly sensitive and potentially stigmatising issues, required careful ethical consideration. It was essential to afford the participants' anonymity and to ensure that the other learners, and indeed other people within the schools and communities, understood the reasons why certain children had been identified to participate in this study in an attempt to minimise the potential perception that the participants had been selected due to their personal experience or knowledge of HIV/AIDS. This was explained at community meetings, and at meetings with the school staff, the parent body, the learners, and with the selected participants (Muthukrishna, 2006).

7.3.2. Pseudonyms were used in the form of code names

The National Children's Bureau (1993) confers that assurances be given about the anonymity of the data, with the removal of names and any identifying information. It should also be made clear who will have access to the data and what will happen to the data when the research is complete.

In the NRF project, codenames were chosen by all learners to ensure anonymity and to protect their identities. The name could perhaps represent any action or sound. With the deaf learners they chose characters or actors from a TV programme. Their 'new' names were written on name tags and pinned on their chest.

> *Researcher C: They gave themselves pseudonyms. They were called those names and they wrote those names on the drawings. The facilitators had a record of the real names.*

To allow pupils get used to their new identities an Ice Breaker involving a Ball Game was played by the group.

> *Facilitator: Now we are going to play a game with this ball. Throw the ball to him and say his name. Next you throw the ball to her and say her name. And then continue…..*

7.3.3. Confidential pledges were designed and operationalised

Learners signed confidentiality pledges to affirm their commitment not to repeat anything said or done in the group to people outside the group in a way that individuals will be identified. Van der Riet et al (2005) explained that by getting the participants to sign confidentiality pledges, the concept of confidentiality was concretely demonstrated to them.

> *Researcher C: In the focus groups pupils signed a contract in the presence of each other that whatever is spoken in the sessions will not be repeated anywhere else in the school or home.*

> *Facilitator: Everything we discuss will remain in this room. We take nothing of our discussion outside this room. Even with me if I write something about our discussion I will use a code name to protect you and your name. Do you understand?*
> *Learners: (in unison) Yes.*
> *Facilitator: We will now sign letters called confidential pledges. What are you saying by signing this letter?*
> *Learner: Do not say it outside this room.*

> *Facilitator: We signed a letter. Do you remember the confidentiality pledge?*
> *Participant: It was an agreement letter which says everything we are going to talk in this room must remain here and must be confidential.*

7.3.4. Ensuring a secure and emotionally containing context

According to O'Kane (2000) the setting has a significant effect on the way techniques can be used. In the NRF project this was a difficult task in resource-constrained environments with limited physical spaces.

> *Researcher E: It was very difficult at times to ensure the ethics like going into the classroom, and then a teacher would walk in and listen in to the group, a stranger would come in and suddenly the children didn't feel contained within a confidential space. But at the same time you know that was one of the huge frustrations about working in this particular field.*

However, according to Van der Riet et al (2005) in one focus group, the researchers tried to establish a confidential space through asking participants to sit on a blanket in a circle to give credence to the idea of equal rights of participation and containment.

7.4. Viewing ethics as situated practice

When doing research on HIV/AIDS issues the relationship between the researcher and the researched is complex. The researcher has to think on her feet to be sensitive and responsive. The situated ethics approach developed by Simon and Usher (2000), promote the notion that all ethical acts are constructed and practiced in particular contexts where researchers make *in situ* decisions. In order to embrace situated ethics as a flexible and reflexive approach researchers in the study used a variety of techniques to support children not only from the perspective of research but also from an adult caring for children in vulnerable circumstances.

There was evidence of skilled management of the research process.

> *Researcher F: We had a very good facilitator. She read the outcome of an activity. She was able to probe, she was able to redirect, she was able to refocus and she was able to stop at a time when they needed that break or when they needed just to be left on their own.*

Researchers were also able to offer comfort in emotional situations.

> *Researcher D: There were incidents that showed that learners were touched by what we were discussing and one boy even went to the extent of crying when we were talking about the "Road of Life" …..… What I did when he was crying I stopped the discussion and I went to him and patted him on his back and I said to him it is okay to cry,…Once the whole thing has subsided I assumed that it is okay..... I just automatically assumed the discussions.*
> *Interviewer: Can you remember what set that off, what exactly?*
> *Researcher D: ….. he was telling us that his father was in jail and he has never seen his father since he was very young…. and he was like missing him.*

They were also sensitive to the plight of children.

> *Researcher F : I think the stories that were narrated and the facilitator was quite sensitive in the way she handled the issues and the probing that was done was done very carefully. If it was infringing on the personal, we wanted to know more, this was the intention we wanted to know more but if there's tears running down someone's eyes you can't, it's a tension, it's which part of you comes to the fore. It's not the researcher. It's the humanitarian aspect that comes to the fore. So those were some moments where we were challenged in terms of what we had to do.*

Researcher C: In focus group 3 or 4, we were speaking about HIV/AIDS. One girl cried, she was smiling also. You could see tears rolling down. It was difficult. I thought how are we being insensitive…she may have lost somebody close to her. I thought we didn't deal with that properly.

Researchers spoke about knowing when to stop.

Researcher F : And where there was a reluctance when we probed, we left it at that, because sometimes you would do that with an adult participant if they are uncomfortable. The whole issue when you are doing research is doing no harm. And if somebody is showing discomfort over something then you respect that and move on.

The help of school psychological services was enlisted to deal with learners who experienced trauma or distress during the research process (National Children's Bureau, 1993). This was important because in doing this, the researchers recognized the limitations of their own expertise and resisted giving advice and support beyond their area of competence.

Researcher D: One is researching a very sensitive issue of HIV and one of the issues that may come up is emotional disturbance to learners …., the whole project has made contact with PGSES in the area.

Interviewer: That is psychological services?

Researcher D: Yes and the big project have also made contact with the NGOs that were dealing with those specific issues…. if it was beyond what you could handle then you can refer that to supervisors.. they will … contact the PGSE or contact the NGOs that will handle that issue.

7.5. Dilemmas related to funded projects

In the current study, it is clear that the research community was excluded from the planning phase where the agenda for the project was set. Since this project was funded by the National Research Funding, the agenda was set before the community was involved in the project.

Researcher C: When we started the project, right we made the decision that it would be participatory methodology.…I knew one of the principles of participatory methodology is who sets the agenda, and definitely we set the

agenda because of the uh…of the NRF grant…. We set the agenda not the participants in that community.

Alderson (1995) notes the constraints under which research operates. Professional researchers often have little choice over the nature of funding.

Researcher C: Research using participatory methodologies has been undertaken within Agriculture, the community development projects. And even there uhh…..you come with an agenda because you are funded. For those research projects you are bound, you are constrained by that factor.

Researcher C: Funded research projects come with agendas. You don't just go into communities and say ok what do you want to change. Because for example, that community probably would have said to us poverty.

A recent study of 230 rural development institutions found that people participated in very different ways (Guijt, 1991). Participation could simply provide information to external agencies. However, Rahnema (1992) cautions that more often than not, people are asked or dragged into participation in operations that are of no interest to them, in the very name of participation.

7.6. Research and intervention

Tensions between research methodology and outcomes presented ethical dilemmas. The funded project was not a participatory action research project and therefore, there was to be no intervention that would lead to immediate social change. Some researchers in this study saw this as exploitative to the particular marginalized, rural community as indicated in the following excerpts.

Researcher F: Everyone that is possibly involved here were informed and it was very clear from the beginning that this project is not like your social development project. It is a research project. Which is a very painful thing to do, I think, in this community because they want to see concrete results.

Researcher F: How we worked around the issue of gain was through referrals. There was one mother who said that she was waiting for ages for her grant. Her details were noted and the issue was referred to the Department of Social Welfare.

Researcher F: The other thing was that the one child was HIV positive. We wanted to make sure she gets the benefits of the Drop in Centre. She was not receiving food parcels on a regular basis. Contacts were made regarding that.

Researcher F: The teachers wanted to know how they could improve their qualifications. We took the time to explain.

Researcher F: In these ways we were being ethical and we were making sure that they were benefiting in some way from our presence there.

7.7. Summary

In this chapter I focused on the ethical issues that had to be considered. The findings of this chapter show that one cannot just think about ethical issues before the research commences. Researchers have to think of ethics as a practice shaped in a particular context. This broadens the space for researchers being reflexive in the methods they use with children in the context of their lives.

In the study, researchers offered comfort in emotional responses they were sensitive to the plight of children and knew when to stop even though the purpose was to probe for in-depth data. Dilemmas related to funded projects excluded the research community from the planning phase where the agenda for the project was set. Tensions between research methodology and outcomes presented ethical dilemmas. Furthermore, the funded project was not a participatory action research project and therefore, there was no intervention that would lead to immediate social change. Some researchers in this study saw this as exploitative to the particular marginalized, rural community.

In the next chapter I provide a conclusion of this thesis by presenting a summary of the chapters. I use this data to present some implications for methodological considerations for research with children in the context of HIV/AIDS.

CHAPTER 8

CONCLUSION

8.1. Introduction

In this final chapter I bring my thesis to a close by looking at my research questions and the findings. I look at each sub-question and the findings in order to respond to my main question. This is followed by the implications of participatory methodology and its use with children. I end this chapter by reflecting on my study.

8.2. Findings

In this study I investigated the use of participatory methodology. I looked at how it was used by researchers with primary school children in mapping HIV/AIDS as a barrier to learning in KwaZulu-Natal. Upon conducting semi-structured interviews with researchers involved in a large NRF project, doing observations and document analysis, I was able to explore the methodological and ethical considerations when using participatory methodologies with primary school children in a vulnerable context. In exploring procedures by researchers and facilitators, strengths, challenges and ethical issues in participatory research with children, it was possible to make meaning of the research process.

The findings related to the procedures when using participatory methods with children in primary school, suggests that researchers must pay attention to the local practices that shape children's lives. Additionally, it is important to look at the particularities of children to be sensitive to their views on issues affecting their lives. The strengths of participatory methodology, confirmed the importance of giving children space to take an active stance as competent knowers of their childhoods. Researcher skill is required in order to appreciate the views of children. The challenges of participatory methodologies suggest the importance of researchers adopting a reflexive stance to their work. The power imbalances need to be addressed especially when working with children in a vulnerable context. Coupled with high researcher reflexivity, is the need to think of ethics

as situated practice. Ethics is not just thought of as a one off act that happens before the research begins. It is ongoing as shown in this study.

This study draws attention to the importance of seeking children's voice in the context of HIV/AIDS as a barrier to learning. Methodologically there has to be a great amount of thinking around how to enable participation of children to listen to their voices as the pandemic is experienced in their context. It is important to pay attention to key adults and the systems they operate in, in order to help children as participants in research. High reflexivity of researchers has the potential to help researchers become sensitive and responsive to how people operate within a vulnerable context.

8.3. Implications

The findings draw attention to the need for research methodology courses to be broadened to include content on researching the vulnerable with special reference to children in poor socio-economic conditions. This base makes it possible to look at child participation, participatory tools and the role of adults within the research process in vulnerable circumstances.

It was evident that the skill of the researcher and facilitator is very important in the context of child participation and vulnerability. Researchers must first undergo self reflection in order to examine their assumptions about children as a vulnerable group and childhood as a period of socialisation. Such exercises have the potential of making researchers more aware of how they are influencing the research process as enablers of child participation.

The study also highlights the importance of qualitative studies to inform policy on HIV/AIDS as a barrier to learning. The use of participatory techniques to enable the voices of children shows the value of recognising the competence of children to make meaning of their lived realities. Children do not only have to be acted upon. They can be respected as social actors who contribute to solutions in their lives.

8.4. Reflections

In the struggle for the recognition of human rights, Albert Luthuli was seen as the spokesman for millions of voiceless Africans. The essence of Luthuli's message was that the dignity of the individual should be respected at all times. Luthuli pleaded for a multiracial democracy in which all should enjoy equal rights.

At the opening of his defence case in the Rivonia Trial in Pretoria Supreme Court on 20 April 1964, Nelson Mandela's statement from the dock was: I have fought against white domination, and I have fought against black domination. I have cherished the ideal of a democratic and free society in which all persons live together in harmony and with equal opportunities. It is an ideal which I hope to live for and to achieve. But if needs be, it is an ideal for which I am prepared to die.

Muthukrishna (2006) in her report on the findings in the NRF project at Richmond made the following comment: Over the past decade of democracy in South Africa, concepts of human rights and political freedom have been the prevailing rhetoric. Yet the data reveals that people in Richmond live in a context of extreme deprivation, destitution and persistent poverty. There is stark evidence of unfulfilled basic needs, widespread hunger amongst school children and their families, and extreme neglect of the wellbeing of children.

It was an honour and privilege for me to have been part of this research project in Richmond. I salute the project team for their dedication, commitment and precious time invested in this study. As I have reached the end of the study, I feel a sense of sadness. The leaders of the past and present have sacrificed their lives, families, livelihoods and some even a chance to come back to live in the country they fought for. I cannot help but ask the questions: Where have we gone wrong? Will we ever get it right? Can we ever get it right?

As researchers, I say yes. We can get it right. In our research endeavours we need to remember South Africa needs knowledge production from local perspectives and the

voices of children in the fight against HIV/AIDS must never be underestimated. Our commitment to give voice to the voiceless, to expose injustices, neglect, abuse and total mismanagement will include the excluded and guarantee all children their fundamental rights as listed in the South African Bill of Rights. Child participation through the use of participatory methodologies has the potential to open many windows to children's meaning making in vulnerable circumstances.

REFERENCES

Aitchison, J. (2003). KwaZulu-Natal: The pre-election wars of the 1990s. In N. Muthukrishna, (Ed.), (2006). *Mapping barriers to basic education in the context of HIV/AIDS.* (p. 7). Pietermatitzburg: School of Education and Development.

Alderson, P. (1993). *Children's consent to surgery*. Open University Press: Buckingham.

Alderson, P. (1995). *Listening to children: Children, ethics and social research.* Barkingside: Barnardo's.

Anderson, P. (2004). Ethics. In S. Fraser, V. Lewis, S. Ding, M. Kellett, & C. Robinson (Eds.), *Doing research with children and young people* (pp. 97-112). London: Sage.

Antrobus, P. (1989). *The empowerment of women. The women and international development annua1*, pp. 126 - 140. Boulder: Westview Press.

Babbie, E. (2002). *Social research*. Belmont: Wadsworth Group.

Baxen, J. & Breidlid, A. (2004a). *HIV/Aids and educational contexts: Beyond the content to understanding the context.* Paper presented at the 12th World Congress on Comparative Education Societies, Havana, Cuba, 25-29 October.

Bell, B., Gaventer, J., & Peters, J. (1990). *We make the road by walking: Conversations on education and social change.* Philadelphia: Temple University Press.

Birch,M., Miller,T., Mauthner,M & Jessop,J. (2002). Introduction. In M. Mauthner, M.Birch, J.Jessop & T.Miller (Eds.) *Ethics in qualitative research* (pp. 1-13) London: Sage.

Boettiger, M. (2004). *A critical reflection on the use of participatory techniques, a Honours Research Project.* UKZN: Pietermaritzburg.

Borland, K. (1998). That's not what I said: Interpretative conflict in oral narrative research. In R. Perks, & A.Thomson (eds). *The oral history reader* (pp. 320-332). New York: Routledge

Borland, M., Laybourn, A., Hill, M., & Brown, J. (1998). *Middle childhood.* London: Jessica Kingsley.

Boyatzis, R. (1998). *Transforming qualitative information: Thematic analysis and code development.* Thousand Oake, California: Sage.

Brown, L.D. (1985). People-centred development and participatory research. *Harvard Educational Review, 55*(1), 69-75.

Brown, L.D. & Tandon, R. (1978). Interviews as catalysts in a community setting. *Journal of Applied Psychology, 63*, 197-205.

Butler, I. & Shaw, I. (Eds.). (1996). *A case of neglect? Children's experiences and the sociology of childhood*. Aldershot: Avebury.

Cantlay, L. (1996) *Detecting child abuse: Recognising children at risk througth drawings.* Santa Barbara: Holly Press.

Carr-Hill, R. (1984). Radicalizing survey methodology. *Quality and Quantity, 18*, 275-293.

Chambers, R. (1997). *Whose reality county: Putting the first last.* London: Intermediate Technology Publications.

Chawla, L. & Kjorholt, A.T. (1996). *Children as special citizens.* PLA Notes 25, London: IIED.

Checkoway, B. & Finn, J. (1992). *Young people building community.* Ann Arbor: Center for the Study of youth policy.

Children's Institute. (2003). *Health and social services to address the needs of orphans and other vulnerable children in the context of HIV/Aids.* Research report and recommendations. Cape Town: Children's Institute.

Christensen, P & James, P. (Eds.). (2000). In C. Edmonds. *Ethical Considerations when conducting research on children in the worst forms of Child Labour in Nepal.* (2003) ILO. Geneva: October 2003.

Christensen, P. & Prout, A. (2002). Working with the ethical symmetry in social research with children. *Childhood, 9* (4), 477- 497.

Cloke, C. (1995). Forging the circle: the relationships between children, policy, research and practice in children's rights. In C. Cloke & M. Davis (Eds), *Participation and empowerment in child protection.* London: Pitman.

Cohen, L., & Manion, L. (Eds).(1994). Research methods in education. In J. Watt. *Ethical issues for teacher researchers.* Retrieved 12 August, 2005, from http://www.scre.ac.uk/spotlight/49.html

Coombe, C. (2001). *HIV/AIDS and trauma among learners: Sexual Violence and deprivation in South Africa*. University of Pretoria: Faculty of Education.

Coombe, C. (2002). HIV/AIDS and education. *Perspectives in Education, 20* (2):vii-x.

Conchelos, G. (1985, July). *Participatory oral history research in native communities: some problems and emerging guidelines for doing it.* Paper presented for the conference on Participatory Research for Community Action, University of Massachusetts, Amherst.

Conti, G., Counter, J., & Paul, L. (1991). Transforming a community through research. *Convergence, XXIV* (3), 3140.

Cree, V.E., Kay, H., & Tisdall, K. (2002). Research with children: Sharing the dilemmas. *Child and Family Social Work, 7,* 47-56.

Deacon, S.A. (2000). *Creativity within quality research on families: New ideas for old methods, Retrieved* 4 January 2005, from http://www.nova.edu/ssss/QR/QR4-3/deacon.html

Denzin, N.K. (1989). *Interpretative interactionism.* Newbury Park: Sage Publications.

Di Leo, J.H. (1973). *Children's drawings as diagnostic aids*. New York: Bruner/Mazel.

Di Leo, J.H. (1996). Young children and their drawings. *Journal of marital and family therapy, 7,* 361-373.

Duhl, F.J. (1981). The use of the chronological chart in general systems family therapy. In D. Bloch (Ed.), *Techniques of family psychotherapy: A primer. 7,* 361 – 373. New York: Grune & Stratton.

Ebersohn, L. & Eloff, I. (2002). The black, white and grey of rainbow children coping with HIV/AIDS. *Perspectives in Education, 20*(2), 77 –85.

Ebrahim, H.B. (in press). Situated ethics: possibilities for young children as research participants in the South African context. *Early Child Development and Care.*

Ebrahim, H. B. & Muthukrishna, N. (2005). Research with under fours: Some sense making moves. *Journal of Education, 37,* 79-102.

Ennew, J. & Boyden, J. (1997). *Children in focus: Study manual for participatory action research with children.* Stockholm: Swedish Save the Children.

Edmonds, C.N. (2003). *Ethical considerations when conducting research on children in the worst forms of labour in Nepal.* ILO: Geneva.

Emmanual, J., Wendler, D. & Grady, C. (2000). *What makes clinical research ethical*? JAMA.

Farmer, E. & Owen, M. (1995). *Child protection practice: Private risks and public remedies.* London: HMSO.

Fine G.R. & Sandstrom, K.L. (1988). *Knowing children*. Newbury Park, CA: Sage.

Finn, J. (1994). The promise of participatory research. *Journal of progressive human services, 5* (2), 25-42.

Flewitt, R. (2005). Conducting research with young children: some ethical considerations. *Early Child Development and Care, 175*(6), 553-565.

Foucault, M. (1973). *The order of things: an archaeology of the human sciences.* New York: Vintage Books.

Francis, D. Muthukrishna, N & Ramsuran, A. (2006). Deconstructing participatory research in an HIV/AIDS context. *Journal of Education, 38,* 140-163.

Fratter, J. (1996). *Adoption with contact*. London: BAAF.

Freire, P. (1970). *Pedagogy of the oppressed*. New York: Seabury Press.

Freire, P. (1972). *Pedagogy of the oppressed.* Harmondsworth: Penguin.

Freire, P. (1974*). Education for critical consciousness.* New York: Seabury Press.

Gibbs, A. (1997). *A review of focus group methodology*. Bristol University: Department of Social Medicine.

Goss, J.D. & Leinbach, T.R. (1996). Focus groups as alternative research practice. *Area, 28* (2), 115-123.

Govender, K. (2007). *Children's voices: An investigative study of grade 3 learners knowledge and experience of HIV/AIDS and its impact on schooling, a dissertation submitted for Master of Education.* University of KwaZulu-Natal, Pietermaritzburg.

Gray, J.N., Lyons, P.M. & Melton, G.B. (1995). *Ethical and legal issues in AIDS research*. Baltimore: The Johns Hopkins University Press.

Greene, S. (2005). *Researching children's experience*. London: Sage.

Grieg, A. & Taylor, J (1999). *Doing research with children*. (p. 148). Sage Publications.

Grotberg, E. (1995). *A guide to promoting resilience in children: Strengthening the human spirit. The International Resilience Project.* The Hague, Barnard van Leer Foundation.

Guba, E.G. (1981). Criteria for assessing the trustworthiness of naturalistic inquiries. *Educational Communication Technology Journal, 29*, 75-92.

Guijt, I (1991). *Perspectives on participation: An inventory of institutions in Africa*. London: IIED.

Hall, B. Gillette, A., & Tandon, R. (1982). *Creating knowledge: A monopoly*. New Delhi: Society fo Participatory Research.

Harding, S. (1991). *Whose science? Whose Knowledge?: Thinking from women's lives.* New York: Cornell University Press.

Hart, R. (1992). *Children's participation: from Tokenism to Citizenship. Innocenti Essays. No. 4.* New York: UNICEF.

Harker, R. (2002). *Including children in social research: practical, methodological and ethical considerations.* London: National Children's Bureau.

Healthlink Worldwide. (2005). *Overview: Child-Centred Approaches to HIV/AIDS*. Retrieved 4 July 2005, from http://www.healthlink.org.uk/world/ewa-ccath01.htm

Henning E. (2004). *Finding your way in qualitative research*. Pretoria: Van Schaik Publishers.

Henry, G. (1998). Practical sampling. In L. Bickman & D. Rog (Eds.), *Handbook of applied social science methods (pp 101-126).* Thousand Oaks, CA: Sage Publications.

Hill, M. (1995). Young people's views of social work and care services. *Child care in practice, 2*(1), 49-59.

Hill, M (1997). Participatory research with children. *Child and Family Social Work*. (pp. 171-183). Blackwell.

Hill, M., Laybourn, A. & Borland, M. (1996). Engaging with primary-aged children about their emotions and well-being. *Children and society, 10*(2), 129-44.

Holstein, J. & Gubrium, J. (1995). *The active interview*. Thousand Oaks: Sage.

Homan, R. (1991). *Ethics in Social Research*. Harlow: Longman.

Horan, (1987). In Fine G.R. & Sandstrom, K.L. *Knowing children.* Newbury Park, CA: Sage.

Horton, M. (1990). *The long haul: an autobiography*. New York: Doubleday.

Huber, U. & Gould, W. (2003a). *The Effect of Orphanhood on Primary School Attendance Reconsidered: the power of female-headed households in Tanzania. HIV/AIDS: Impact on Education. Clearinghouse.* Retrieved 3 April 2003, from http//iiep.tomoye.com/ev.php

Huber, U. & Gould, W. (2003b). *Reasons for Non attendance of Orphans, Children from Disjointed Families who Live with both Parents: Evidence from questionnaires and Children's Drawings.* Tanzania, HIV/AIDS Impact on Education Clearinghouse. Retrieved 3 April 2003, from http://iiep.tomoye.com/ev.php

James, A. (1995, July). *Methodologies of competence for a competent methodology*. Paper presented at Conference on Children and Social Competence. Guilford: University of Surrey.

James, A. & Prout, A. (Eds.). (1990). In C. Edmonds. *Ethical Considerations when conducting research on children in the worst forms of Child Labour in Nepal.* Geneva: ILO.

James, A. & Prout, A. (1997). A New Paradigm for the Sociology of Childhood? Provenance, Promise and Problems. In James A. & Prout, A. (Eds.) *Constructing and Reconstructing Childhood: Contemporary Issues in the Sociological Study of Childhood*. (pp. 7-34). Philadelphia: Falmer Press.

Jones, A. (2004). Involving children and young people as researchers. In S. Fraser, V. Lewis, S. Ding, M. Kellett, & C. Robinson. (Eds). *Doing research with children and young people*. (pp. 113-130). London: Sage.

Johnson, V. (1996). Introduction: starting a dialogue on children's participation. *Children's Participation, PLA Notes* 25. London : IIED.

Kefyalew, F. (1996). The reality of child participation in research: experience from a capacity building programme. *Childhood 3*(2), 203-14.

Kelly, K.& Van der Riet, M. (2001). Participatory research in community settings: processes, methods and challenges. In M.Seedat, N.Duncan & S. Lazarus. *Community psychology: Theory method and practice, South African and other perspectives.* (pp.159-188). Cape Town: Oxford University Press.

Kitzinger, J. (1994). Methodology of focus groups: the importance of interaction between research participants. *Sociology of health, 16* (1), 103-21.

Kitzinger, J. (1995). Introducing focus groups. *British Medical Journal, 3(*11*),* 299-302.

KwaZulu-Natal Municipal Portfolio. (2005). *Historical overview: Richmond Municipality*. Retrieved 20 June 2005, from http://www.kzntopbusiness.co.za (2005KZN-municipalities

Lansdown, G. (2004). Young children's participation:Rhetoric or growing reality? In *Early Childhood Matters*. Netherlands: Bernard van Leer Foundation.

Lather,P. (1986). Research as praxis. *Harvard Educational Review*, *56* (3): 257-277.

Laybourn, A. & Borland, M. (1996). Engaging with primary-aged children about their emotions and well-being. *Children and society*, *10*(2), 129-44.

Lee, N. (2000). *Childhood and society: growing up in an age of uncertainty*. Buckingham: Open University Press.

Lincoln, Y.S., & Guba, E. (1985). *Naturalistic inquiry*. Newbury Park, CA: Sage.

Lincoln, Y. S. (1990). The making of a constructivist: A remembrance of transformations past. In J. Pretty & D. Vodouhe. *Using rapid or participatory rural appraisal.*(Retrieved 12 August 2005, from http://www.fao.org/docrep/W5830E/w5830e08.htm

MacNaughton, G. (2001). *Doing Early Childhood Research: International Perspectives on Theory and Practice.* Buckingham: Open University Press.

McMahon, L. (1992). *The handbook of play therapy*. London: Routledge.

Maguire, P. (1987). *Doing participatory research: A feminal approach.* Amherst, MA: University of Massachusettes.

Mahiri, I (1998). *PLA Notes CD-ROM 1988-2001*, *31*, pp.4-8. IIED: London.

Mandell, N. 1991. The least adult role in studying children. In F. Waksler (Ed.). *Studying the social worlds of children*. (pp. 38-44). London: Falmer Press.

Mapping HIV/AIDS as a barrier to education, PR data collection workshop (2004). Unpublished Workshop Presentation. UKZN, Pietermaritzburg.

Market Research Society. (2000). *Guidelines for research among children and young people.*

Marshal, C. & Rossman, G. B. (1989). *Designing qualitative research.* Newbury Park: Sage Publications.

Martin, M. (1997). Critical Education for Participatory Research. *Sociological Research Online, 2,* (2*).* Retrieved 12 March 2006, from *http://www.socresonline.org.uk/socresonline/2/2/8.html*
Mason, J. (2004). The legal context. In S. Fraser, V. Lewis, S. Ding, , M. Kellett & C. Robinson (Eds). *Doing research with children and young people.* (pp. 43 – 58). London: Sage.

Mayall, B. (1994). *Children's Childhoods: Observed and Experienced*. London: Falmer Press.

Mayall, B. (Eds). (2000). *Conceptualising child-adult relations*. London: Routledge/Falmer.

Mills, R. (2000). Perspectives of Childhood. In K. Govender. *Children's voices: An investigative study of grade 3 learners knowledge and experience of HIV/AIDS and its impact on schooling.* (pp. 35-42). M.Ed. dissertation. University of KwaZulu-Natal, Pietermaritzburg.

Mitchell, C. & Reid-Walsh, J. (2002). *Researching Children's Popular Culture: The cultural spaces of children.* London and New York: Routledge.

Moelino, L. Anggal, W., Piercy, F. (in press). HIV/AIDS – risk for underserved Indonesian youth: A multi-phase participatory action-reflection-action study. *Journal of HIV/AIDS Prevention & Education for Adolescents & Children.*

Moletsane, R. (2003). Another lost generation? The impact of HIV/AIDS on schooling in South Africa. *The International Journal on School Disaffection, 1*(2), 7-13.

Morgan D.L. (1997*). Focus groups as qualitative research (2nd edition)*. London : Sage.

Morrow, V. & Richards, M. (1996). The ethics of social research with children: an overview. *Children and Society 10*(2), 90-105.

Mouton, J. (2003). *How to succeed in your Master's and Doctoral Studies: A South African guide and Resource Book.* Pretoria : Van Schaik.

Muthukrishna, N. (Ed.) (2006). *Mapping barriers to basic education in the context of HIV/AIDS.* Pietermatitzburg: School of Education and Development.

Muthukrishna, A.& Ramsuran, A.(2005). *Layers of oppression in the context of HIV/AIDS: A case study in the Richmond district, KwaZulu-Natal.* Pietermaritzburg: University of KwaZulu-Natal.

Naicker, S. (2006). *HIV/AIDS as a barrier to education: exploring the lives of affected children in the Richmond District.* M.Ed. dissertation. University of KwaZulu-Natal, Pietermaritzburg.

National Children's Bureau, (1993). *Guidelines for research*. London: NCB.

National Department of Health. (2004). *National HIV and syphilis antenatal sero-prevalence survey in South Africa.* Pretoria.

Nelson Mandela Foundation, HSRC & EPC. (2005). *Emerging voices: a report on education in South African rural communities.* Cape Town, Houghton: HSRC Press.

Neuman, W. (2000). *Social research methods 4th Ed*. Boston : Allyn and Bacon.

Nieuwenhuys, O. (1996). Action research with street children: a role for street educators. *Special issue on Children's Participation, PLA Notes 25.* London : HED.

Oaklander, V. (1988). *Windows on our children.* New York: The Gestalt Journal Press.

Oakley, A. (1994). Parallels and differences between Children's and Women's studies. In Mayall, B. *Children's childhoods: observed and experienced.* London: Palmer Press.

O'Kane, C. (2000). The development of participatory techniques facilitating children's views about decisions that affect them. In P. Christensen, & P. James (Eds.). *Research with children: Perspectives in Practices.* (pp. 136 – 159). London : Falmer Press.

Park, P. (1993). What is participatory research? A theoretical and methodological perspective. In P.Park, M. Brydon, H. Hall, & T. Jackson (Eds.). *Voices of change.* (pp. 1-19). Westport. Conn: Bergin & Garvey.

Patton, M. Q. (2001). *Qualitative evaluation and research methods*. Thousand Oaks, C.A.: Sage.

Powell, R.A. & Single, H.M. (1996). Focus groups. *International Journal of quality in Health Care, 8* (5): 499-504.

Pretty, J.N., Guijt, I., Thompson, J. & Scoones, I. (1995). *A trainer's guide to participatory learning and action. IIED Training Materials Series No. 1*. London: IIED.

Primary School Performance Monitoring Project. (2002, January). *Bangladesh: Assessment of the Primary Education Development Programme.* Education for Change/ Department of Primary and Mass Education. Dhaka.

Prout, A. (2005). The Future of Childhood. London and New York: Routledge Falmer.

Qvortrup, J., Bardy, M., Sgritta, S. & Wintersberger, H. (Eds). (1987). Childhood matters: social theory, practice and politics. In G. Lansdown, *Young children's participation:Rhetoric or growing reality?* (pp.4-14). Netherlands: Bernard van Leer Foundation.

Race, K.E. (1994). Rehabilitation programme evaluation: use of focus groups to empower clients. *Evaluation Review 18* (6): 730-740.
Rahnema,M. (1992). Participation. In D. Amudavi. *Enhancing community-based research: The case of a participatory action research experience in a rural community in Kenya.* Retrieved 3 June 2007, from http://www.education.up.ac.za/alarpm/PRP.

Randall, R., & Southgate, J. (1981). Doing dialogical research. In P. Reason & J.wan (Eds). *Human inquiry: A source book of new paradigm research*. (pp. 349 – 362). New York: John Wiley & Sons.

Robinson-Pat, A. (1996). Using PRA in Academic Research: Reflections after fieldwork in Nepal. In *IDS PRA Topic Pack on Participatory Research.* Brighton: Institute of Development Studies.

Sapkota, P. & Sharma, J. (1996). Participatory interactions with street children in Nepal. *Special issue on Children's Participation, PLA Notes 25*, London: IIED.

Sarri, R & Sarri, C. (1992). Participatory action research in two communities in Bolivia and the United States. *International Sovial Work, 35*, 267-280.

School of education and Development. (2004). *NRF project proposal: mapping HIV/AIDS as a barrier to learning and participation in basic education: a case study of the experience of adult and child learners in the Richmond area of KwaZulu-Natal.* Pietermaritzburg: School of Education and Development, University of KwaZulu-Natal.

School of Education and Development, (2005). *NRF Project. Literature Review.* Pietermaritzburg: School of Education and Development, University of KwaZulu-Natal.

Seidman, I.E. (1991). *Interviewing as qualitative research*. New York: Teachers College Press.

Simons,H. & Usher,R. (2000) Introduction: Ethics in practice of research. In H. Simons & R. Usher (Eds). *Situated ethics in educational research.* (pp. 1-11). London: Routledge.

Sohng, S. L. (1995). *Participatory research and community organizing.* Seattle: University of Washington School of Social Work. Retrieved 4 January 2005, from http//www.cdra.org.za

South African Schools Act of 1996.

Stewart, D.W & Shamdasani, P.N. (1998). Focus Group research: Exploration and discovery. In L.B. Bickman & D.J. Rog (Eds.), *Handbook of Applied Social Research Methods*, (pp.473 - 502). Thousand Oaks: Ca., Sage Publications.

Tandon, R. (1996). The Historical Roots and Contemporary Tendencies in Participatory Research: Implications for Health Care in Korrie de Koning & Marion Martin (Eds.). *Participatory Research in Health: Issues and experiences*. London: Zed Books.

Taylor, R. (2002). Justice denied: Political Violence in KwaZulu-Natal after 1994. *Violence in Transition Series*, 6.

Theis, J. (1996). *Children and participatory appraisals: experiences from Vietnam, special issue on Children's Participation. PLA Notes 25*, London: IIED.

Theis, J. & Grady, H.M. (1991). *Participatory rapid appraisal for community development: A training manual based on experiences in the Middle East and North Africa.* London: Save the Children Federation and IIED.

UNICEF (1989) *Convention on the Rights of the Child*. Geneva. Retrieved 25 January 2005, from http://www.unicef.org/crc/crc/htlm

UNICEF. (1998). Child Participation – *Towards a conceptual Framework.* (Unpublished mimo). New York : UNICEF.

UNICEF. (2002). *Children participating in research, monitoring and evaluation – ethics and your responsibilities as a manager.* UNICEF Evaluation Office No.1 (April,2002).

UNICEF, UNAIDS & WHO. (2003). Retrieved on 4 July 2003, from *http:/www.unaids.org/youngpeople*/index.html.

Usher, P. 2000. Feminist approaches to situated ethics. In H.Simons & R. Usher. *Situated ethics in educational research*. London: Routledge Falmer,

Van der Riet, M., Hough, A. & Killian, B. (2005). Mapping HIV/Aids as a barrier to education: A reflection on the methodological and ethical challenges to child participation. *Journal of Education, 35,* 75-98.

Van Vlaenderen, H. & Neves, D. (2004). Participatory action research and local knowledge in community contexts. In. D. Hook, N. J. Mkhize, P. Kiguwa, and A. Collins. *Critical Psychology*. (pp.445-464). Cape Town: UCT Press.

Vygotsky L. S. (1978). *Mind in Society*: *The development of higher psychological processes*. London: Harvard University Press.

Wang, C. & Burris, M. (1994). Empowerment through photo novella: Portraits of participation. *Health Education Quarterly, 21* (2); 171-186.
Weithorn, L. A. & Sherer, D. G. (1994). Children's involvement in research participation decisions: Psychological considerations. In M. A. Grodin & L. H. Glantz (Ed).*Children as research subjects.* (pp.133 – 180). New York: Oxford University Press.
Whiteside, A. and Sunter, C. (2000). *AIDS: The challenge for South Africa*. Cape Town: Human and Rousseau and Tafelberg.

Willan, S. (2002). *Women's Empowerment - Africa's AIDS Vaccine*? Paper presented at the Gender Studies Seminar Series, University of Natal, Durban, South Africa.

Willig, C. (2001). *Introducing qualitative research in psychology: Adventures in theory and method*. Buckingham: Open University Press.

Willow, C. & Hyder, T (1998). *It hurts you inside*. National Children's Bureau: London.

Woodhead, M. & Faulkner, D. (2000). Subjects, objects or participants? In P. Christensen & A. James (Eds). *Research with children; perspectives in practices.* (pp. 9-35). London: Falmer Press.

Yeich, S. & Levine, R. (1992). Participatory researcher's contribution to a conceptualization of empowerment. *Journal of Applied Social Psychology, 22* (24), 1894-1908.

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UNIVERSITY OF
KWAZULU-NATAL

7 MARCH 2007

MRS. V MURUGEN (991235376)
EDUCATIONAL PSYCHOLOGY

Dear Mrs. Murugen

ETHICAL CLEARANCE APPROVAL NUMBER: HSS/0052/07M

I wish to confirm that ethical clearance has been granted for the following project:

"Participatory methodology: An investigation into its use with primary school children in mapping HIV/AIDS as a barrier to learning in KwaZulu Natal"

Yours faithfully

Ximba

MS. PHUMELELE XIMBA
RESEARCH OFFICE

cc. Faculty Research Office (Derek Buchler)
cc. Supervisor (Dr. A Ramsuran, Mrs. HB Ebrahim)

2007 -03- 09

3 February 2007

School of Education and Development
Faculty of Education
Pietermaritzburg campus

Derek Buchler
Faculty of Education
Edgewood Campus

Dear Derek

Re: Ethical Clearance – V. Murugen Student Number: 991235376

This is to state that Ms Veshanti Murugen, M Ed student in School of Education and Development, has been a student researcher in the NRF Project: Mapping Barriers to Basic Education in an HIV and AIDS context.

She has been granted permission to base her study for her Masters dissertation on project data. The project has been granted ethical clearance by the University. Ms Murugan has worked closely with me and the School of Education and Development research team in planning the whole research process. Her supervisors Dr A. Ramsuran and Ms Hasina Ebrahim were key members of the research team.

Yours sincerely

Professor Nithi Muthukrishna
Principal Investigator
NRF Project: Mapping Barriers to Basic Education
School of Education and Development
Tel: 033 260 6045
E mail: muthukri@ukzn.ac.za

Appendix 2 : Consent Letter

Dear Researcher

I am currently enrolled at the University of KwaZulu Natal for a Masters in Education Degree. My topic of my study is: Participatory Methodology: An investigation into its use with primary school children in mapping barriers to learning in an HIV/AIDS context.

You have conducted research on primary school children using participatory methods in the NRF Project at Richmond (2004/2005). I would like to interview you on your experiences with the use of participatory research methods. I also seek your permission to record the interview so that I could decode it later.

I will ensure that all information is treated confidentially. Any articles published from this research will ensure that anonymity is maintained by not using any identifying information. If you agree to be in this process, you may also withdraw at any time if you don't want to be part of the interview any more.

Please sign the attached form to indicate whether you agree/do not agree to participate in the above research.

Yours sincerely

Mrs Veshanti Murugen Masters student Tel no:	Dr A. Ramsuran/ Ms H.Ebrahim Supervisors Tel no: 033 260 5078

Appendix 2: Consent Form

I, (please write your full name) _____
understand all the issues in the letter and agree/disagree _____ to participate in this research study.

Signature: _____

Date: _____

Student Number 991235376 **July 2005** **Veshanti Murugen**

Appendix 1 : Semi Structured Interview Schedule

Questions

1. **Why** did you and your team decide to use **participatory research methods** in this project?
   What is your understanding of PM methods?
2. What **preparation** had to be done before interviewing the learners?
   Did you encounter any problems at this stage?
   How did you deal with these problems?
   (selection, consent, meeting parents, confidentiality, contract, pseudonymns)
   What was your involvement at this stage?
3. **What participatory research methods** did you use?
   Why did your team decide on these methods in particular?
   How did the use of these PM influence the type of data collected?
   Would you have got different data with conventional methods?
   What would you change in terms of methods?
4. What would you say were the **strengths** of the use of participatory methods in this project especially with grade 6 learners?
   (focus group activities involvement, therapeutic talk about issues in safe environment)
5. What would you say were the **weaknesses** of using participatory methods in the project with grade 6 learners?
   (language, probing, time constraints, absenteeism, abstract(River of life), power relations, researchers inexperienced training not involved in agendas etc.)
6. Given that this topic is of a sensitive nature, what **ethical issues** did you and your team have to consider?
   (reaction crying, hypothetical characters exploitation)
7. What **lessons** would you say that you and your team **learned** from this project on **researching sensitive issues with children**?

8 What **effect** does the use of PM with children have **on the researcher**? (traumatized, helpless to intervene)

9. What forms of transformation can you forsee taking place or would you like to see take place?

10 How valid is the data that is collected? (copying, researchers preconceived ideas)

Student Number 991235376 **July 2005** **Veshanti Murugen**

Appendix 2 : Observation Schedule

Observations

1. Venue

2. Space

3. Interferences

4. Facilitator (knowledge, expertise, skill)

5. Children (participation, reaction, responses, knowledge, skill)

6. Relationship between Facilitator/Children

7. Language (as a barrier, use of mother tongue, children's understanding)

8. Time frames

9. Ethical/sensitive issues (if any, how handled)

10. Methods used (instructions, participation, effectiveness, responses, data gleaned, limitations)