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Young People's Perspectives on Participatory Ethics: Agency, Power and Impact in Domestic Abuse Research and Policy-Making

Children's perspectives literature repositions children and young people as active participants in surviving domestic abuse, protecting their family, opposing the violence and recovering from abuse. However, key tenets of safeguarding in relation to domestic abuse, both in practice and childhood research ethics, struggle to fully recognise children's agency and the need to empower children and young people as well as women. Children's right to participation now extends to national policy-making in many countries, yet has not been explored in relation to the interdependency of women and children's rights, safety and wellbeing where both have been subject to abuse.

This paper challenges the current exclusion of young voices from the development of ethical praxis. It outlines a participatory ethical approach that promotes the inclusion and empowerment of young survivors in research and policy. Young expert advisors on Scottish domestic abuse policy (2009–11) co-develop the approach (participatory action research) which is informed by a wider study (2004–11) about children's help-seeking and solutions for practice. Mullender *et al.*'s accepted model of three Cs and Ds (consent, confidentiality, child protection: danger, distress, disclosure) are adapted to focus on children's agency. Three Es are added focusing on children's power and impact: enjoyment, empowerment and emancipation. Copyright © 2015 John Wiley & Sons, Ltd.

KEY PRACTITIONER MESSAGES:

- Children and young people have a distinct, essential voice in risk assessment and management.
- They are competent and central decision-makers, they can consent to participation.
- Participation can be a powerful therapeutic tool.
- Enjoyment, empowerment and emancipation are intrinsic to participation, alongside recognition of children's agency in safeguarding.

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'Participation can be a powerful therapeutic tool'

'Access to power, equal voice and impact on children's lives are preconditions of participation to young survivors'

'It is essential to include young survivors of domestic abuse in debates about the ethics of their involvement in research and policymaking'

'An expansion of current thinking to include participatory principles of enjoyment, empowerment and emancipation'

- Access to power, equal voice and impact on children's lives are preconditions of participation to young survivors – to be worth the inherent risk of speaking out.
- Key Words: domestic violence/domestic abuse; young people; participation; ethics; agency

'I'm still in disbelief that something so dark and supposedly crippling has become the spark of something that's the best thing I've ever done in my life... support was a stepping stone, participation a bridge to a new life.' (Lola, age 19, young expert advisor to the Scottish Government)

focus on children's agency should not only refocus our response to domestic abuse but also the ethical approach taken to young survivors' participation in research and policy-making. The repositioning of children as active participants in surviving domestic abuse (Mullender et al., 2002) and in their own and their mother's recovery (Katz, 2015) directly resulted from listening to children and young people themselves. This paper argues that to fully recognise their agency, it is essential to include young survivors of domestic abuse in debates about the ethics of their involvement in research and policy-making. Direct engagement with young people on this issue, over 2.5 years of sustained involvement in national domestic abuse policy-making, refocuses the current ethical approach. The predominant adult-centric approach to protection from harm, in children's lives and the research process, is revised to focus on children's agency and rights, alongside those of their mothers (non-abusing parent). Furthermore, a move to a more participatory ethics is an intrinsic condition of involvement to young participants, focusing on empowerment and impact.

This article begins with a discussion of absence: of children's agency in current conceptualisations of domestic abuse; of children's voices in the ethics of involving children in research and policy-making. Following a brief description of the methodology, young people's perspectives on ethics are explored. Their key messages necessitate a refocusing on children's agency when considering accepted ethical principles relating to safety from harm, and an expansion of current thinking to include participatory principles of enjoyment, empowerment and emancipation.

Domestic Abuse and Children's Agency

Recent reframing of domestic abuse, building on previous feminist thought and practice, focuses on the ongoing nature of the mental, financial, sexual as well as physical abuse that women endure. Such abuse has been renamed 'coercive control' by Stark (2007, pp. 5–6), the sustained fear akin to 'everyday terrorism' (Pain, 2014, p. 531). Stark prescribes a shift to focus on women's agency, decision-making and choice as well as safety (Stark, 2007, 2013). Yet, it is not only women who are suffering this 'liberty crime' (Stark, 2007, p. 13), the emergent children's perspectives literature details lives overwhelmed by fear of fathers/father figures, the horror of their everyday experiences of abuse, and the controls that perpetrators place on their lives, play, freedom of movement, relationships, friendships and education (see Houghton, 2008a, 2013, for overviews). Children's standpoint is that the experience of coercive control and fear that it invokes is shared – it is 'simultaneous abuse of women and children' (Kelly, 1994, p. 47). Like women's, children's 'space for action' (Kelly *et al.*, 2014, p. 4) is restricted by the perpetrator, yet children do take action within and beyond that situation – to survive it (Mullender *et al.*, 2002; Överlien and Hyden, 2009), oppose it (Överlien and Hyden, 2009), and promote their and their mothers' recovery (Katz, 2015).

Morris' (2009) conceptualisation of a web of coercive control entrapping the whole family more accurately reflects children's narratives: 'a fusion of violence which permeates [women and children's] everyday lives' (p. 417). Within that, it remains crucial to recognise children's unique, autonomous voice and experience. Children's individual narratives of abuse and survival are different and perhaps unknown to the experiences, actions and perceptions of mothers and siblings (e.g. Edleson *et al.*, 2007; Jarvis *et al.*, 2005; Kitzmann *et al.*, 2003; Överlien, 2010; Stanley *et al.*, 2012).

For positive outcomes for women and children, differing accounts must be heard safely and separately (Stanley *et al.*, 2012), children's (and mother's) difficulties in talking about and disclosing domestic abuse recognised (Houghton, 2013), and mothers and children supported to communicate and understand the effects of abuse on their relationship (Humphreys *et al.*, 2006). Children tell us that having their voice heard, actively participating in decision-making, their mother's support, and adults pulling in the direction of children's own strategies are all vital elements in coping and surviving (Irwin *et al.*, 2006; Mullender *et al.*, 2002; Stafford *et al.*, 2007; Stanley *et al.*, 2012). Yet, adult-centric approaches struggle to reposition children as agents in their family's protection, with a crucial voice in decision-making.

The Ethics of Involvement

To involve children and young people with experience of abuse in research and policy-making presents complexities that could lead to their voice being stifled (Morris *et al.*, 2012; Mudaly and Goddard, 2009). Concerns remain about the balance between a child's right to participate and their right to protection and provision in both research and policy-making (Powell *et al.*, 2012; Woodhead, 2010, p. xxi); inadequate consideration is given to the interrelation of children's rights and women's/parents' rights (Alderson, 2012; Mullender and Kelly, 2000). There seems to be a consensus that children's participation requires a 'child research ethics' (Powell *et al.*, 2012, p. 1), linked to rights principles (Hill, 2005; Powell *et al.*, 2012), that explores both ethical codes and situated ethics – 'an ongoing process of questioning, acting and reflecting' (Gallagher, 2009, p. 26). Currently, children's voices are missing from this exploration of ethics, with rare exceptions, which perhaps reflects the ongoing struggle to recognise children's agency and to see children as central

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'For positive outcomes for women and children, differing accounts must be heard safely and separately'

'Children's voices are missing from this exploration of ethics, with rare exceptions' 'The child's participation in research is in itself a potential trigger for violence from the perpetrator of abuse'

'Young survivors' perspectives are absent, as well as participation's potential for 'do[ing] good"

'The 2009–2012 phase involved sustained dialogue between a young expert group... and politicians'

'Eight young experts (aged 15–19 at the onset) participated in the study over 2.5 years' participants (Tisdall *et al.*, 2009, p. 2) who are competent in deciding their own best interests (Alderson, 2012).

Adult researchers have, necessarily, been adapting childhood research ethics to the specific dynamics of domestic abuse. Their main ethical concerns focus on the protection of children (and women) from further harm and retraumatisation (Morris et al., 2012). The child's participation in research is in itself a potential trigger for violence from the perpetrator of abuse, presenting a risk to the child, mother, family and, perhaps, the researcher, a risk that is heightened if the child has contact with the abusive father (Morris et al., 2012). Protection of children by adults predominates; it is mainly the mother's domain to ascertain risk (Mullender et al., 2002; Thiara and Gill, 2012), and her knowledge is elevated over the child's. In healthcare research, Alderson (2012) argues children's own consent offers better support and protection than 'assent', competence a 'potential to be nurtured' (p. 187) through encouragement, information and respect. Yet, in domestic abuse research an argument for children's assent and mother's consent is proffered (Morris et al., 2012). Mullender et al.'s (2002) mnemonic of three Cs and Ds - consent, confidentiality, child protection (danger, distress, disclosure) - encapsulates the major issues that scholars currently consider. This paper will argue that young survivors' perspectives are absent, as well as participation's potential for 'do[ing] good' (Manzo and Brightbill, 2007, p. 35; see also McCarry, 2012).

Methodology

The Wider Study

A series of qualitative participatory research projects with 48 children and young people experiencing domestic abuse were undertaken at key times in Scotland's domestic abuse policy (summarised in Table 1 in the online Supporting Information). Thematic analysis of the perspectives of young participants in this study informs this paper, as does skill-sharing with specialist support workers of Women's Aid.

The Ethics Study

The 2009–12 phase involved sustained dialogue between a young expert group (Voice Against Violence) and politicians, following young participants' critique of tokenistic participation (Houghton, 2013). The second aim of the project was to critically examine this participation process from a young person's perspective. A third aim quickly emerged due to young people's concerns about the ethics of such sustained engagement. They felt that a 'sensitive' approach with 'rules of engagement' was needed to feel safe and happy in the process; furthermore, young people should develop it. The exploration of young survivors' perspectives on participatory ethical principles is the focus of this article.

Eight young experts (aged 15–19 at the onset) participated in the study over 2.5 years (see Table 2 in the online Supporting Information), exploring 'ethical codes' from the onset, then identifying, reflecting and acting on ethical and rights issues that arose (Gallagher, 2009) – 'situated ethics' (see Figure 1). A participatory action research approach respected young people as expert and equal in the development of ethical standards: 'a politics of becoming and

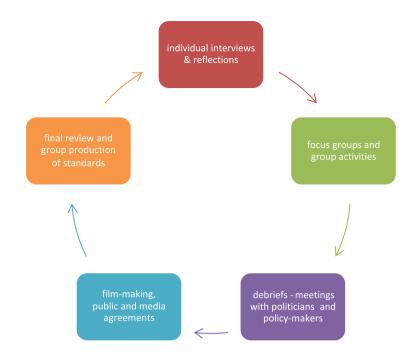


Figure 1. The ethics development process - identification, reflection, action (2009-12).

between-ness where knowledge, analysis and action emerge between co-researchers and participants' (Pain *et al.*, 2007, p. 29).

Collection of Data, Analysis, Dissemination

Ethical decision-making within the process was necessary (Manzo and Brightbill, 2007) due to the unique nature of such sustained involvement of young survivors in policy-making: public engagement opportunities and adult/young person relationships in the policy-making process raised particular ethical issues. The researcher facilitated the process of thematic analysis, including transcribing, coding and grouping the data according to agreed themes. There was a specific need for researcher facilitation on sensitive and private subjects, particularly in relation to fathers or stigma, and to anonymise some data even within the group. Young people decided that they would analyse and disseminate their data in an online booklet representing all voices (http://www.voiceagainstviolence.org.uk/wp-content/uploads/2012/07/standards-booklet.pdf). Young participants gave the researcher permission to further analyse using her own expertise and insights in relation to the wider research study, literature, theoretical debates (Alderson, 2009) and did not want a part in that 'boring' endeavour.

Findings: Three Cs, Ds and Es

The underpinning finding of this ethics study is that there is a need to reposition children as agents in their own (and their family's) protection and as agents of social and political change. This requires an adaptation of current ethical approaches that focus on adult protection of children – I adapt Mullender *et al.*'s (2002) mnemonic of three Cs – consent, confidentiality

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'There was a specific need for researcher facilitation on sensitive and private subjects'

'There is a need to reposition children as agents in their own (and their family's) protection'

'The three Es – enjoyment, empowerment and emancipation to encapsulate children's power and impact'

'Young experts felt that information should be advertised directly to children and young people'

'Separate and joint contact with the trusted support worker and/or researcher was recommended'

'Confidentiality was the biggest concern for young experts' and child protection, and three Ds – danger, distress and disclosure, to incorporate children's agency. It also requires an expansion in current thinking to position (and sustain the participation of) children as agents of change – I contribute the three Es – enjoyment, empowerment and emancipation to encapsulate children's power and impact. This useful aide-memoire was developed through a (shared) wish that all nine domains would become an intrinsic consideration for future participation. Each domain is now explored from the perspective of the study participants – the 'young experts', who are identified individually by their pseudonym. Figure 2 summarises the nine domains at the end of this section.

Consent and Information

To respect children and young people as central participants, young experts felt that information should be advertised directly to children and young people; it was for the potential young participant to declare an interest which would lead to information for the young person and her/his mother. Support agencies were the conduit for advertisements; specialist workers' (who had received information/training on the project) involvement in the process was essential. Young experts felt that participation had to be part of and not distinct from the therapeutic process, while making clear 'it's not a support group' (Karen).

Risk assessment for involvement needed to be a shared process with mothers as domestic abuse was a shared experience: 'we go through it together' (Marc).

Young experts agreed that it was difficult to speak to mothers about domestic abuse (wider study), which necessitated care (and options) in communication. Not all mothers were the young person's confidante about domestic abuse, yet all were the stated main support. Therefore, separate and joint contact with the trusted support worker and/or researcher was recommended, to acknowledge shared and unshared knowledge of risk, help communication about domestic abuse and validate the expertise of both women and children in their own lives. To opt out would be a joint decision, acknowledging women's and children's competence in assessing their own best interests.

Young experts felt that written consent for participation in research and policy-making should be for the young participant only, of whatever age, so long as they and their mothers agreed that it was taking place in a safe location with safe people. They were clear that it was their opinions, their views on services and policy that were being sought: 'we are the experts, we lived it, we know what worked and what didn't' (Declan)

However, where there is a risk of identification 'like being traced or seen' (Jack), for example, at public events, then this risk also applies to women and siblings and written consent should also be sought from mothers (even for the young people aged 18–25).

Confidentiality and Anonymity

Confidentiality was the biggest concern for young experts who felt that 'no-one understands the severity of our experiences' (Chloe) or the 'real life consequences if confidentiality is breached... it could ruin our lives' (Declan). It could affect their and their mother's recovery: 'a step back for the whole family' (Jack).

Policy-making involves greater contact with adult strangers than research, which young people felt increased risk. They shared a mistrust of adults due

to inappropriate and unsafe responses when attempting to speak out about abuse. Agreements with adults should include ethical good practice such as not sharing stories without permission, anonymising personal details but also 'don't say hello to me in the street' (they could be with friends/dad/family who did not know about involvement), 'don't mention me in social media' (some dads were on Facebook), 'don't reveal the location of meetings'. Young experts felt that any adult involved should educate themselves about domestic abuse before meeting young people. Numbers of adults should be limited, giving young people clarification about why each adult was meeting them, what role, expertise and power they had to change things.

The most heated debate amongst young experts was whether to recommend blanket anonymity: 'members felt angry that... the perpetrator was still controlling them, was still making them live their lives like they were constantly at risk' (Karen).

Whether to remain socially and publicly anonymous elicited different views from mothers and young experts. Young experts actively wanted to address public stigma about domestic abuse, ensure that children heard from real survivors who 'got through it' (Jack), break isolation and signpost help. Yet, some young experts were unable to speak out publicly due to the perpetrator and relationships, which challenged their aim of equality of voice. While a key principle was that young people spoke for themselves, not through adult intermediaries, this could work well in research and direct, private, meetings with politicians but was difficult in relation to the media, public speaking and film-making. Young people decided to recommend safe options for public messaging, such as the online advert produced using an actor but created by young survivors (http://www.youtube.com/watch?v=Sf5yjJq7ubU), media packages and opinion pieces with anonymised stories and messages, using animation in film (http://vimeo.com/46348189).

There remained a problem of voice, raising young people's voice above others. Young people felt that those at least risk from perpetrators could decide with their mothers to have a (blurred) media presence so long as they were made fully aware that it is 'always a risk' (Marc) in relation to stigma, identification and intrusion and that mothers were present for dilemmas/upsets that occur: Chloe was safe from abuse but felt violated after an acquaintance recognised her on television and therefore knew about it. In group projects such as filmmaking, the family most at risk should be the 'litmus test' for decisions about the way in which young people participated and they should strive to each have an equal voice. For example, young experts and mothers jointly decided to risk voice identification in their legacy film to ensure that authentic voices spoke out to children, practitioners and policy-makers (http://www.voiceagainstviolence. org.uk/category/resources/).

Child Protection: Danger

Safety from the perpetrator was the main concern of young experts, as participation potentially endangers the family (and researcher/participants). A condition of involvement should be that mums and young participants lived away from the abuser though this did not mean that the abuse had stopped; young experts cited examples of ongoing coercive control and fear, particularly if there was contact. Those with contact were aware of the precarious nature of

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their relationship with their father and most did not want him to know about their involvement: 'Dad wouldn't like me being involved in anti-domestic abuse stuff, it would remind him what he's done' (Declan) 'Yeah, he'd do his nut' (Declan's mother) [both laugh].

For young people, the major risk factors were how recent the abuse was and contact. Severity of abuse was significant but only if the mother *and young person* were still afraid and felt that the perpetrator might pursue them.

Disturbingly, young people expressed almost equal fear about the stigma attached to domestic abuse and were concerned about other members of the family, peers and communities finding out that they had survived domestic abuse with their mother. Years later, young people mainly had only one or two confidants with whom they could speak about domestic abuse.

Distress

Young experts felt that distress was an inevitable part of participation: 'We're coming along with our experiences and we're discussing it more – it keeps those memories fresh, therefore it can cause problems beyond that as well' (Marc). What was important was how to manage and minimise distress and take measures to redress harm caused by young participants' 'horrible experience' (Chloe). These include a respect for privacy (including own bedrooms and bathrooms), support for sleep and mental health issues, accessible and free contact with mothers and support workers, comfortable, peaceful, safe locations. A support plan for each young person allows opt out and support at any stage: 'hearing [young people's stories] brought stuff up... I went outside and phoned my mum and talked about it and calmed down' (Chloe).

Young experts felt that the researcher should have specialist domestic abuse counselling and groupwork skills and there should be additional support available at each residential.

Disclosure

Participating in domestic abuse policy-making is an act of disclosure. Young experts were acutely aware of this and concerned that this opened young participants up to intrusive questions and the stigma attached to domestic abuse survivors. Reflecting the wider study, young participants require choice and control in what information is shared and with whom, with explicit agreement from adults about this.

Young experts believe that adults don't comprehend how difficult it is to speak about personal experiences, how emotional the content is, or the importance of privacy. Adults should be requested to ask open, general questions rather than direct, intrusive questions on an individual's experience. Young participants need practice in handling questions and what to reveal, for example, writing down prepared statements to make a subject 'real' while being comfortable with details shared.

Young experts felt that peers need to discuss what is appropriate to reveal when meeting adults. Openness with strangers (adult policy-makers) could leave others concerned that: 'it was an open door to asking "what did your dad do?"" (Karen).

'Young experts felt that distress was an inevitable part of participation'

'Participating in domestic abuse policy-making is an act of disclosure' Unless focused, it could also distract from the action being discussed. This is not to say that young people did not want to talk about domestic abuse, but that they felt safest to do so with their peers and trusted manager: 'great to revisit in supportive atmosphere' (Lola).

Peer support and new-found openness emerged as key to further recovery, helping reframe domestic abuse as a thing of the past: 'what we do is turn our past into experience and I now see it [domestic abuse] in a different way' (Chloe).

Enjoyment

Young participants need to enjoy participation: 'not like work or school'. Fun activities should be built into each meeting plus regular teambuilding 'without the hard work' (John). This is not a frivolous principle – enjoyment and trust emerged as key to young experts feeling able to talk about abuse. Mothers should share the enjoyment and team spirit at key moments, to see the positive way in which young people can turn that negative experience around, which helps both recover and feel good about themselves.

Empowerment

Young experts had been silenced by the experience and the response that they received, they were confident that others experiencing domestic abuse had no voice. It was very important to this group that adults did not speak for them, including their mothers. Communication with others about domestic abuse was difficult and eased considerably if creative, empowering, cooperative, respectful methods were used.

That each young person's voice was heard is crucial – young experts recommended ways to ensure that each young person was heard in meetings, films, publications, and each had a lead role in governance, research processes and subject areas. This peer respect, validation and shared experience helped young participants feel release, relief and move on: 'it inspired me to make change, to fight for what you believe and be accepting of others' (Jack).

They found it more difficult to ensure that their voice should be respected as of equal importance as the voice of adults: 'they'll think, she's just a wee lassie' (Chloe). Politicians conferring the status of 'young experts', equal to adult experts, with direct access to power, empowered young people in their engagement with senior policy-makers: 'without that status they'd never even have met us' (Karen).

To achieve equal communication was hard; where this worked well, young people and adults worked alongside each other to achieve change, swapping expertise, building respectful relationships: 'it's important adults don't lead but empower us' (Declan).

Emancipation

There are two interrelated elements to the emancipatory approach: young people's active participation in politics and social change; and young survivor's freedom from the chains of domestic abuse.

To have a voice in policy-making, to be respected as a 'young expert' in the highest level of government, is not only a major source of confidence and pride but a condition that young people set. To actually have political 'Enjoyment and trust emerged as key to young experts feeling able to talk about abuse'

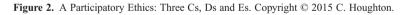
'That each young person's voice was heard is crucial'

'There are two interrelated elements to the emancipatory approach'



Three Cs, Ds and Es for the participation of young survivors: agency, power and impact	
Consent and information	Young person is the central participant in the process and key decision-maker.
Confidentiality	Young person has control and choice over information sharing. Risks to anonymity require involvement of non-abusing parent.
Child [and adult] protection	Young person is respected as an individual survivor, their own experiences and agency in their family's protection validated.
Danger	Young person's perceptions of risk are vital to assessment and safety planning, alongside others affected.
Distress	Young people are capable of managing and minimising (inevitable) distress.
Disclosure	Participation is an act of disclosure for young survivors, thereafter control/choice over personal stories needs maintained.
Enjoyment	Fun while building trust is an essential component of participation and key to feeling able to speak out.
Empowerment	An individual, equal voice (to each other and adults) and recognised status as experts and key decision-makers is crucial.
Emancipation	Real power within the political system that results in an impact on abused children's lives is a condition of involvement.

© Houghton (2015), Adapting Mullender et al's (2002) three Cs and three Ds to focus on children's agency; adding three Es to reflect children's power and impact



'Promotion of children's right to participate in national policy-making was crucial to young experts'

influence, to affect budgets, to change other children and young people's lives, is essential. Young experts did not feel that children should be involved if change was not possible. Young and adult experts need to evaluate impact; evidence for this group included multi-millions for service expansion and 2.5 million children accessing the online advert. Promotion of children's right to participate in national policy-making was crucial to young experts: 'we showed them young people can do it' (Chloe); 'we revolutionised participation' (John).

Key to all young participants was the sense of liberation from the coercive control of domestic abuse that participation can bring: 'domestic abuse no

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longer defines me' (Karen). Participation led to self-affirmation, a belief in themselves as individuals, a comfortableness with who they were: 'I can be me' (Marc). It increased confidence in their own competence, abilities and agency: 'I am a capable young person, I can really do things' (Raya). Participation instilled a confidence in the collective and political power of children: 'we can make the world a better place to live in' (John).

Summary

Every one of the three Cs and the three Ds (Mullender et al., 2002) was reexamined in the project and shown in a more nuanced light. Young experts moved away from children's 'assent' to 'consent', challenging age as a key factor, re-balancing mother: child involvement in the process whilst including each of their perceptions of risk. They reflected on breaches to *confidentiality* in political and publicity-related contexts and took their own views of *child* protection, notably where contact with the abuser was ongoing and thus danger was also revisited, while *distress* and *disclosure* were both seen as manageable with the right support. Young people have their own priorities (the three Es) as well as their own abilities and perceptions. Enjoyment is a wholly original staple of participation and speaking out. *Empowerment* requires a change in adult:child relations and respect for children's individual and equal voice(s). Furthermore, the experience needs to be *emancipatory*: young people want direct access to politicians and to have real power within the political system (Smith, 2009). While participation helped young survivors reframe their own experience of abuse, regain power and control over their sense of self, their chief principle was that participation must impact on the life of the thousands of silenced children and young people experiencing domestic abuse.

Conclusion: Agency, Power and Impact

A child-centric view of research ethics opens up a whole new perspective and refocus current thinking onto children's agency, power and impact. Young experts co-developed an ethical process that exchanged 'myths about [children and young people's] deficits for due recognition of their intellectual, emotional, social and moral capacities' (Alderson, 2012, p. 182). Children's agency throughout the research and policy-making process is recognised; their rights meshing (necessarily) with women's rights (Mullender et al., 2002) while reflecting the autonomy of both and ensuring that participation is part of their therapeutic experience. Abuse/distress was absolutely not an arbiter of involvement, though they agreed that 'safety comes first'. In fact, it was perhaps even more important for those previously silenced by abuse to be involved or to have someone speaking out for them. It was vital that their voice was respected by adults as equal and powerful in decision-making. Power and *impact* were the real arbiters of participation to young experts. They felt that a 'presumption of empowerment' (Sinclair, 2004, p. 111) was essential for young survivors' participation - if changing (other) children's lives was not possible, participation was not worth the cost (emotional and otherwise).

Young experts have set a challenge in relation to their right to participation and that is not whether young survivors of abuse should be involved at all

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'A child-centric view of research ethics opens up a whole new perspective'

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(Morris *et al.*, 2012). It is whether adults can respect young survivors as 'coproducers of their own welfare' (Prout and Hallett, 2003, p. 5), agents in the protection of children and families at both the micro (practice) and macro (policy) levels. Above all, though, it challenges whether adults can engage with young participants in a way that empowers them as 'change agents' (Malone and Hartung, 2010, p. 30), respecting their expertise as equal to, though different from, that of adults and each other. A shift to a more participatory ethics is an intrinsic part of the 'revolution in participation' (John) that young experts feel is necessary.

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'Respecting their expertise as equal to, though different from, that of adults and each other'

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