Ethical Dilemmas in Social Research: no easy solutions

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SUMMARY

Ethical dilemmas have been encountered in many areas of social research and have at times been the subject of much controversy. Despite this, the problem of how to tackle ethical dilemmas has received little attention in the literature. As a result, researchers faced with these dilemmas have little knowledge to draw upon, and groups associated with research, such as participating agencies and ethics committees, may not fully appreciate all the issues involved in dealing with ethical dilemmas. These issues are not only philosophical in nature but relate also to the methodological and practical implications of following one, rather than another, ethical principle. The researchers encountered a number of ethical dilemmas in their research in child protection. By discussing different approaches to solving ethical dilemmas, they intend to show that this is a complex problem and one which, along with ethics in general, requires greater attention in the literature.

A number of groups have emphasized the importance of conducting social research in accordance with ethical principles. These groups include professional bodies, such as the British Sociological Association (BSA, 1989), ethics committees (Sieber and Stanley, 1988), and the academic community (Reynolds, 1979; Beauchamp et al., 1982). While there are differences between these groups in terms of their particular interest in ethical principles, there does appear to be some agreement as to which principles are most applicable to social research. Beauchamp et al. (1982), for example, concentrate upon the basic concepts which
underlie ethical principles. They argue that the concepts most relevant to protecting the interests of the research participant are: autonomy, non-maleficence, beneficence and justice. The Statement of Ethical Practice (BSA, 1989), by contrast, focuses upon the procedures which need to be followed to ensure that research is ethical. However, many of these procedures, such as privacy, confidentiality and informed consent, correspond closely to the concepts identified by Beauchamp et al. (1982).

While social researchers should, therefore, be aware of the need to adhere to certain ethical principles this may, in practice, prove to be problematic. This is particularly true where there is a conflict between two or more ethical principles—what has been referred to as an ethical dilemma:

When there is uncertainty about how to balance the competing moral values it is proper to speak of the situation as an ethical or moral dilemma. A dilemma is apparent in research situations in which two or more desirable values present themselves in a seemingly mutually exclusive way with each value suggesting a different course of action that cannot be maximized simultaneously (Kimmel, 1988, pp. 27-8).

Ethical dilemmas have been reported in many areas of social research, for example in studies of professional behaviour (Holdaway, 1982), juvenile delinquency (Mulvey and Phelps, 1988), and access to health care (Lawson, 1991). The manner in which some ethical dilemmas have been resolved has been the subject of controversy, as in the recently published study of allegedly racist recruitment practices in the National Health Service (Esmail and Everington, 1993). In this study the authors completed application forms for junior hospital doctor posts. For each post two very similar applications were made, but one bore an English-sounding surname, the other an Asian-sounding surname. On being uncovered, the researchers were subject to a police investigation, a disciplinary hearing by the British Medical Council, and the attention of the national media. In their defence, the researchers argued that the obligation not to deceive participants was outweighed by the responsibility to obtain reliable data on unfair recruitment practices.

Despite the prevalence and sensitivity of ethical dilemmas in social research, this problem has received relatively little attention in the literature (Reynolds, 1979; Friedrichs, 1983). Much of the work that has been published has been criticized for failing to appreciate the complexity of the problem (Adair et al., 1985; Imber et al., 1986) or for offering solutions which represent either a methodological or an ethical imperialism (Suls and Rosnow, 1981). Ethical guidelines produced by professional bodies have, likewise, tended to offer little advice on how to deal
with ethical dilemmas. The British Sociological Association’s Statement of Ethical Practice (BSA, 1989) is quite explicit: ‘The Statement does not, therefore, provide a set of recipes for resolving ethical choices or dilemmas’. Consequently, social researchers have only a limited amount of knowledge to draw upon in their attempts to tackle ethical dilemmas.

The authors were faced with this situation on encountering ethical dilemmas in a recent study of child protection. In response, advice was sought from colleagues, ethics committees and a steering group. While these consultations proved to be very useful, they also served to emphasize that there are widely differing approaches to handling ethical dilemmas. Furthermore, it was apparent that each approach or method that was put forward carried with it not only ethical, but also methodological and practical, implications for the research. By discussing their experiences the authors intend to illustrate the complex nature of this problem and encourage further debate.

DISCUSSION

THE RESEARCH

Reviews of the literature have shown that there is little reliable data on the effects of physical abuse on children’s mental or physical development (Lamphear, 1985; Agoustinos, 1987). Similarly, little is known concerning the nature and impact of services received by physically abused children and their families (Gough et al., 1988). Consequently, it is possible that the needs of these children are not being fully met and that the services they receive are not as efficacious as they should be. Recognizing this important gap in knowledge, the Department of Health commissioned the current study.

The main aim of the study was to investigate the longer-term effects of physical abuse, and subsequent professional intervention, on children’s development in a number of distinct areas, such as cognition, attainment, behaviour and emotional adjustment. The study also sought to examine the nature and effect of life events, such as separation from parents, hospitalization and moving home. The sample consisted of 170 children whose names had been placed on child protection registers in either of one of two areas. The children were registered because of physical abuse (86 per cent) or because they were thought to be at risk of physical abuse (14 per cent). All the children were registered in one year, when their ages ranged from nought to four years. The children were followed up 9–10 years after being registered.

Data on services received by children were obtained through searches of child protection register files and social work case records. In order
to assess development, the children and their main carers were interviewed. The children also took part in tests, and were weighed and measured; and their teachers completed behaviour questionnaires. A comparison group of children and carers took part in the interview and assessment stage of the study. Data collection occurred between 1989 and 1991.

The study raised two main ethical dilemmas. The first of these arose from the need to access records. The information contained in social work records was confidential. Therefore, the researchers could have been expected to obtain the consent of family members for access to these records. However, such a procedure could have rekindled painful memories and caused feelings of stigmatization for them. More importantly, references to these records might have caused conflict between family members who knew of this history and those who did not, possibly because, as in the case of a new partner, they had joined the family relatively recently. Therefore, if the researchers had sought consent they might have failed to meet their obligation not to cause harm to participants.

The second ethical dilemma emerged from the need to interview carers and children. It could be argued that in seeking consent for interviews, the researchers had a duty to provide carers with enough information about the research to ensure that their decisions were taken on a fully informed basis. This would have meant referring both to the earlier abuse and to registration. Again, this could have had an adverse effect on family members, with the researchers failing to meet their responsibility concerning the well-being of participants.

In discussing these ethical dilemmas reference is made to the Statement of Ethical Practice (BSA, 1989). However, these references are not intended as a critique of the 'Statement'. Rather, individual guidelines from the Statement are quoted simply as a way of highlighting, through a more formal means, the existence of ethical dilemmas. The Statement of Ethical Practice includes the following guidance: 'Personal information concerning research participants should be kept confidential.' While it is primarily concerned with information gathered by the researcher him/herself, a logical extension of this guidance would appear to be that researchers have a duty to respect the confidentiality of information where they are a third party, as would be the case in respect of records kept on an individual by an agency. The guideline suggests that the current researchers should have obtained the consent of carers, and possibly children, for access to confidential material.
However, had the researchers done so, this would, almost certainly, have contravened a second ethical guideline. This guideline is set down in the Statement of Ethical Practice: 'The sociologist has a responsibility to ensure that the physical, social and psychological well-being of research participants is not adversely affected by the research.'

Data for this study was collected some eight to ten years after the children had been registered. If the researchers had attempted to seek consent, after so many years had elapsed since registration, it could have been harmful to the families in a number of ways. First, they would have been reminded of the events which surrounded their child's registration. For many families these events had been very traumatic, and to have had them resurrected would have caused renewed distress. Secondly, any reference to child protection or social work records or intervention could have caused the families to again feel stigmatized and labelled.

Perhaps the greatest risk arose from the fact that by the time the follow-up was being carried out, some of the families would have contained new members, for example a different carer, who knew nothing of the original abuse or registration. Similarly, as the children themselves were very young at the time of their registration, there was a good chance that many of them would have been unaware of this history. If any of these persons had been informed by a researcher of the events which led up to registration, this could have been a source of considerable stress in families who were already known to be quite vulnerable.

This vulnerability is well illustrated by the following family (written in the third person in the interests of anonymity): one of the parents in the study had violently shaken the baby in an uncontrolled outburst. As a result of this abuse, the baby suffered severe neurological damage. Ten years on, this child had serious physical disabilities and learning difficulties, and exhibited very challenging behaviour. Social work records indicated that the violence perpetrated by the parent was quite out of character, and that since the incident the parent had striven against enormous odds to care for the child, and give the child as near normal a life as possible. On meeting the research interviewer, the parent explained, quite spontaneously, that the child's condition was due to a congenital abnormality. It was clear that the parent had constructed this explanation for the benefit of the 'outside world'. If the research interviewer had asked the parent for consent for access to child protection records, then this would have effectively contradicted the parent's account of the child's condition and could have been detrimental to the parent's well-being.

The second ethical dilemma was related to the researcher's obligation to provide participants with a full explanation of the study. The Statement of Ethical Practice describes this obligation thus:
As far as possible sociological research should be based on the freely given informed consent of those studied. This implies a responsibility on the sociologist to explain as fully as possible, and in terms meaningful to participants, what the research is about, who is undertaking and financing it, why it is being undertaken, and how it is to be disseminated.

According to this guideline it could be argued that the researchers should have informed carers that this was a study of child physical abuse and that the sample had been identified from child protection registers. However, had the researchers done this they could have contravened the ethical principle concerning the avoidance of harm to participants, for the same reasons as were set out above.

SOLVING ETHICAL DILEMMAS

In an attempt to respond to these ethical dilemmas the authors consulted a steering group, ethics committees and colleagues. This exercise, and subsequent reviews of the literature, revealed that there are at least three main approaches, or methods, for managing ethical dilemmas. These might be loosely termed as the expedient; the value-driven; and the pragmatic.

THE EXPEDIENT APPROACH

Within the 'expedient approach', there appeared to be three distinct strategies for dealing with ethical dilemmas. The first of these would have been for the researchers to decide not to proceed with the study (Sieber and Stanley, 1988). At first sight this appears to be a straightforward solution. However, a decision whether or not to conduct research which is of potential social benefit is itself an ethical issue (Rosenthal and Rosnow, 1984). Many areas of social research can be described as being of potential social benefit—child protection research is a prime example. Reviews of the literature show that there are significant gaps in our knowledge concerning the effects of abuse and subsequent professional intervention (Lamphear, 1985; Agoustinos, 1987; Gough et al., 1988). Given the vulnerability of abused children, and the fact that they are sometimes subject to quite major interventions, the authors were of the firm belief that this research should go ahead. Indeed, it can be argued that researchers and practitioners have a duty to see that such research is carried out. While terminating the research might have solved the immediate ethical dilemmas, this decision would then have led to a new ethical problem.

The ethical dilemmas were, in part, a product of the methodology which the researchers wished to use. Therefore, a second expedient
strategy for dealing with the ethical dilemmas would have been to use an alternative methodology or research design (Ginsberg, 1979; Brenner, 1981). As far as the present study was concerned the options were quite limited. In order to avoid the ethical dilemmas, while obtaining the same quality of data, the researchers would have to have carried out a prospective study with families being contacted at the time of registration and being followed-up 8–10 years later. Given a start date of 1989, this would have meant that the fieldwork would not be completed until approximately 1999, with the first published results not being available until beyond the year 2000. As previously mentioned, there are significant gaps in current knowledge. The researchers did not feel that it was tenable to delay the research by the length of time that would have been involved in this alternative research design.

The third expedient strategy for resolving ethical dilemmas would have been to submit the research proposals to an ethics committee, for it to decide what course of action should be taken (Broadhead, 1984). In theory, this would have meant that the ethical dilemmas could be discussed by a group of persons who were detached from the immediate concerns of the research, but who could bring to the deliberations a relatively high degree of knowledge and experience of ethical problems.

The authors did in fact submit their proposals to six medical ethics committees in the two research areas, although this was primarily for the purpose of gaining access to children's health records. Five of these committees gave their approval to the research. While this response can be taken as strong endorsement of the research procedures that were ultimately used, the fact that one ethics committee did not approve of the research procedures indicated that this strategy is not necessarily a straightforward one (Goldman and Katz, 1982).

A more fundamental criticism of ethics committees is that they tend to be somewhat conservative in nature, and are likely to reject research proposals which raise sensitive issues (Sieber and Stanley, 1988). While the detachment of these committees from the immediate research questions may be of value in terms of enabling them to concentrate upon the ethical issues, it may also mean that they do not fully appreciate the potential social benefit of the research, and consequently the ethical issues that would be raised by failing to carry out the research. Given the nature of the interventions which they oversee and the acute vulnerability of potential research participants, the role of medical ethics committees is obviously different from that of ethics committees in the social sciences, but as far as the latter are concerned, it may be more appropriate to view the role of ethics committees, not as solving ethical dilemmas, but rather as bodies able to offer researchers detached but informed advice regarding these problems.
THE VALUE-DRIVEN APPROACH

In the 'value-driven' approach to ethical dilemmas the researcher relies upon his/her own value system to determine which of two conflicting ethical principles should take precedence. This approach is acknowledged in the Statement of Ethical Practice:

The Statement does not, therefore, provide a set of recipes for resolving ethical choices or dilemmas but recognises that often it will be necessary to make such choices on the basis of principles and values, and the interests of those involved.

In practice, social scientists rely heavily upon their own values in determining how ethical dilemmas should be solved (Schlenker and Forsyth, 1977), and the current authors were no exception. However, it is essential that researchers are aware of the limitations of this approach, and the safeguards that are needed to avoid unethical behaviour. A major limitation of this approach is its arbitrary nature. Rezler et al. (1992), for example, have shown that ethical values are related to both professional background and gender. The extent to which views in this area differ is illustrated by the existence of two distinct theories of ethical behaviour: the teleological school which holds that actions should be judged by the consequences they produce; and the deontological school which, while recognizing that the consequence of actions should be an important factor in determining ethical behaviour, argues that certain responsibilities, for example being truthful, are immutable (Frankena, 1973). A further criticism of this approach is that individual values may be no more than a reflection of self-interest (Diener and Crandall, 1978). Consequently, researchers should not rely wholly on their own values when faced with ethical dilemmas but should, as a minimum, seek advice from more detached sources, such as colleagues, steering groups and ethics committees.

THE PRAGMATIC APPROACH

The 'pragmatic approach' to tackling ethical dilemmas involves an assessment of the relative importance of each of the conflicting ethical principles. This approach is embodied in two techniques in particular: ranking, in which an attempt is made to place conflicting ethical principles in order of priority (Friedrichs, 1983; Rezler et al., 1992); and cost–benefit analysis, where precedence is given to that principle which maximizes benefits while minimizing costs (Levine, 1975; Shensul, 1980).

The major drawback of this approach is that it is heavily dependent upon the value-system of the person making the assessment. Therefore, this approach is open to many of the criticisms levelled at the value-
driven approach. Cost–benefit analyses have, for example, been criticized on the basis that they 'typically yield predictable results', where the benefits of carrying out the research are invariably seen as outweighing the costs to the individual participant (Adair et al., 1985).

Despite these problems, the pragmatic approach has much to commend it. In particular, by attempting to assess their relative merits, it encourages ethical principles to be viewed not only from a philosophical perspective but also in terms of their significance when applied in an actual research setting.

Although it was not followed in any very structured sense in the current study, this approach was influential in determining how the ethical dilemmas should be solved. In terms of ranking, the authors believed that their first priority was to avoid causing harm to participants. Obtaining participants' permission for access to records, and providing them with fully informed consent, were given a lower priority. Similarly, it was felt that the benefits of avoiding harm to subjects far outweighed the ethical costs involved in not seeking permission and not providing fully informed consent. The authors also felt that if, in practice, participants could still be given a comprehensive account of the study, then this would further justify the solutions recommended by the pragmatic approach.

METHODOLOGICAL AND PRACTICAL ISSUES

Given that any discussion of ethics is essentially concerned with abstract issues of 'right' and 'wrong', it might be thought that resolving conflicts between ethical principles is basically a philosophical problem. However, in the context of empirical research, ethical principles have methodological and practical implications which may be critical in determining how an ethical dilemma is dealt with.

In the current study both methodological and practical considerations had to be taken into account. The methodological considerations arose from the effects that were anticipated if participation had been sought on the basis of fully informed consent. If the study had been described as one of child abuse, it was likely that the refusal rate would have been much higher (Kinard, 1985); the families who chose to participate would not have been representative of the original sample (Farrington et al., 1990), and their responses would have been significantly biased (Elms, 1982). As these effects would have seriously undermined the reliability of the study's findings, there was a powerful methodological argument against seeking fully informed consent. Furthermore, to have gone ahead on this basis could have constituted a neglect of the researcher's responsibility to use effective research designs (Broadhead,
This was a particularly relevant factor in the current study as it was possible that the research findings could come to influence both policy and practice decisions relating to other highly vulnerable individuals.

The practical issue arose from the fact that the follow-up was being conducted approximately ten years after the children had been registered. In order to adhere to the ethical principle of confidentiality, families should have been traced and asked for their consent for access to records. However, in order to trace families, the researchers needed to have access to information in files, such as address, place of work, birthplace. Given the residential mobility of registered children (Creighton, 1992), tracing the families without access to this information would have been virtually impossible. As Lynch (1978) has remarked, following-up abused children is a 'researcher's nightmare'. Therefore, the practical problem of tracing families proved to be a major factor in determining whether attempts should be made to seek the permission of family members for access to their records.

At the time the children were registered it was not a standard policy amongst Area Review Committees (ARCs), as they were then known, to inform carers that their child's name was being placed on the register. In agreeing to take part in the research the two relevant ARCs did not authorize the researchers to pass this information to parents. However, even if this practical constraint did not exist, it is doubtful that the researchers would have wished to pass this information on to carers, given its sensitivity and the risks it might pose to families' current stability.

The methodological and practical implications of ethical principles do, however, extend beyond those experienced in the current study. This is well illustrated in relation to informed consent, for which a number of different, sometimes conflicting, methodological effects have been reported. It has been argued that the greater the amount of information that is provided to participants about the research, the more likely they are to alter their behaviour to meet what they perceive to be the researcher's expectations (Rosenthal and Rosnow, 1969); the more suspicious they become of the research objectives (Resnick and Schwartz, 1973); and the greater their confusion regarding the purposes of the research (Imber et al., 1986). Other studies have, in contrast, reported positive effects of providing participants with increased information, including higher item response rates and an enhancement in the quality of answers (Singer, 1978).

The methodological effects of providing participants with different amounts of information concerning the research leads on to a practical issue; namely, what are the criteria by which fully informed consent is
met. This is, at the outset, a difficult question in the social sciences, as informed consent is traditionally seen as a medical concept—although it was actually first used in a court of law (Silverman, 1989). In spite of the fact that it is now used fairly widely in the social sciences, there is still some question as to the relevance of this concept (Adair et al., 1985). In one definition, the criteria for meeting informed consent are quite strict: 'The procedure by which individuals choose whether or not to participate in an experiment after being given information that likely would affect their decision (American Psychological Association (APA), 1982). While this definition was drawn up specifically for use in the behavioural sciences, it could be applied equally well to social research. Following on from this definition it might be argued that withholding any information pertinent to an individual's decision-making process constitutes deceit. Yet a definition of deceit utilized by Adair et al. (1985) is clearly far from being the converse of the APA's definition of informed consent:

The simple failure to disclose the true purpose of the study was not counted as deception. The subject had to be actively misled either about the study's purpose or task, or provided with false information about others or their own behaviour.

There are then major practical issues in determining what constitutes both informed consent and deception. This leads on to the question as to whether it is more appropriate to speak not in terms of such absolute concepts, but rather to think in terms of a 'continuum of disclosure' (Roth, 1962), and to view ethical principles in general as relative concepts (Kimmel, 1988).

**THE SOLUTION**

In deciding how to solve the ethical dilemmas consideration was given to all the approaches described above, along with the methodological and practical issues which had been identified. The authors were of the opinion that neither abandoning the research nor employing alternative methodologies were viable options. Similarly, while valuable advice was provided by medical ethics committees, it was not felt that they should be the final arbiters of how, and whether, the research went ahead.

Ultimately the authors were most influenced by the pragmatic approach. They believed that the harm that could be caused to individuals and families by referring to past child abuse, or child protection records, was of much greater concern than any consideration of fully informed consent or permission for access to records. Inevitably, this decision was dependent to some extent upon the researchers' own
value-system. Methodological and practical considerations were also significant factors. However, while it was believed that there were overwhelming grounds for this particular solution, the fact that it was necessary to compromise on any ethical principle meant that there was perhaps an even greater onus on the researchers to adhere to the other ethical principles.

Carers and children were, therefore, provided with an account of the project that was as detailed as possible without referring to the sensitive subjects of either abuse or social work interventions. In an introductory letter, and subsequent follow-up visit by a research assistant, family members were informed that this was a study of children from a particular age group 'some of whom have experienced difficulties with their health in their early life' and that names had been obtained 'from records kept by people who work with children'. They were also told what form the research would take, the types of questions that would be asked and how long the investigations would take. The introductory letter invited the family to ring the research office for further information or to call the local police station (with whom the researchers had already liaised) to verify the authenticity of the project. The names of two research assistants, one of whom would visit the family, were included in the letter.

Similarly, vigorous attempts were made to ensure that individuals really did wish to take part in the research. Both the carers and the children, some of whom were as young as eight, were asked to sign consent forms. The consent form specified each component of the research separately, i.e. interview, educational assessment, physical measurement and teacher questionnaire, and carers/children were at liberty to refuse consent to any or all of these.

Throughout the study, the authors consulted with a large number of individuals and groups, such as social services departments, ethics committees, and a steering group. These consultations meant that decisions regarding ethical procedures were taken only after adequate and careful consideration. They also helped ensure that the degree to which ethical principles were compromised was kept to a minimum.

CONCLUSIONS

Ethical dilemmas present social researchers with a complex problem: there are a number of alternative approaches to solving any given dilemma; each of these approaches has implications for the research, and individual ethical principles raise different methodological and practical issues. In addition to this, researchers may have to take into
account the views of groups connected with the research, such as participating agencies, ethics committees, funding bodies and steering committees, as to how the dilemmas should be tackled.

It seems clear that if researchers, and groups connected with research, are to develop a better understanding of the nature of this problem and its solution, then there must be more work in this area (Kimmel, 1988). Journal and conference papers are obviously an effective means of promoting discussion, but researchers might wish to consider other formats, such as the one employed by the American Anthropological Association (AAA). In the *Anthropology Newsletter*, the AAA publishes anonymous accounts of ethical dilemmas encountered by its members. Readers are invited to suggest ways in which the dilemmas should be solved and these are published alongside the decisions which the anthropologist concerned finally took (Friedrichs, 1983).

One of the areas in which research is most required is the methodological effects of individual ethical principles (Adair et al., 1985). As the preceding discussion has shown, such effects may be crucial in determining how an ethical dilemma is handled. This research would also be of importance in identifying whether ethical principles have an effect as independent variables. These two factors underline the importance of reporting ethical procedures, especially if studies are to be properly replicated.

The need for greater discussion of ethical dilemmas is not unique to social research, having been cited, for example, in connection with research in both psychology (Adair et al., 1985) and psychotherapy (Imber et al., 1986). However, this lack of attention to ethical dilemmas in social research does appear to be symptomatic of a more general neglect of ethical issues. This is very apparent when one considers the emphasis upon ethics in other disciplines. In medicine, for example, there are a number of journals devoted to ethics, such as the *Journal of Medical Ethics*, and *Ethics and Clinical Research*. In contrast, the social sciences literature has been criticized for failing to identify, in any systematic manner, even the basic ethical problems encountered in research (Wax and Cassell, 1981).

This neglect is also evident in a comparison of ethical guidelines. The Code of Ethical Principles and Guidelines produced by the British Psychological Society (BPS, 1988) discusses ethical issues relevant to both research and practice in considerable detail. The British Association of Social Workers' Code of Ethics for Social Work (BASW, 1988), by comparison, makes no reference whatsoever to ethics in the context of research, even though a good deal of research is carried out in social work settings. However, it must be said that the British Sociological Association's Statement of Ethical Practice has made a valuable
contribution to the understanding of ethical issues in social research. Also, it should be acknowledged that the BASW code is not unique in ignoring ethical issues in the context of research. The Statement of Ethical Principles, published only very recently by the Association of Chief Police Officers (ACPO, 1992), makes no reference to research ethics, despite the amount of research which is carried out in the area of policing by criminologists, lawyers, sociologists, and the police themselves.

There are a number of means through which awareness of ethical issues could be increased. Foremost amongst these is more regular, if not mandatory, reporting of ethical procedures in published studies (Trice, 1986); a greater emphasis upon ethics in undergraduate courses (Rezler et al., 1992), and primary research to establish the frequency and type of ethical issues encountered in social research (Wax and Cassell, 1981).

The reason why the subject of ethics seems to have a relatively low status in social research is not clear. It may be due to a failure to appreciate the importance of ethics (Long and Dorn, 1982), or it may stem from a mistaken belief that because the techniques used, for example questionnaires and interviews, are benign, then the consequences of the research are always benign (Broadhead, 1984). Alternatively, this may be a false impression, created by the failure to report what, in reality, is a fairly active concern with ethical issues (Adair et al., 1985). Whatever the reason, social researchers must recognize that ethics constitute a fundamental aspect of their work.

The current paper has discussed only a few of the ethical dilemmas encountered in research involving individuals. A number of other dilemmas could have been discussed, such as those relating to covert observation (Bulmer, 1982), debriefing (Morans, 1988), and research with children (Koocher and Keith-Spiegel, 1990). Further, as Kimmel (1988) points out, ethical dilemmas exist at a number of levels, of which the research participant is only one. He identifies two others; namely, society and scientific knowledge. In short, ethical issues in general, and ethical dilemmas in particular, present formidable challenges in the social sciences. It seems highly appropriate that workers in this field share their knowledge and expertise to enable these challenges to be met in the most just and effective manner.

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