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Ethical challenges in research involving children affected by armed conflict

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Studies examining the impact of armed conflict on children's lives must confront a variety of ethical challenges, which may arise at any point in the research process and often in unexpected ways. Procedural ethics is therefore not sufficient, needing to be complemented by ethics in practice. Drawing on a critical analysis of power inequities in research carried out with conflict-affected children, this article proposes a reflexive, care-ethical approach to dealing with "ethically important moments" in research practice. It discusses how core principles of research ethics—such as informed consent, harm prevention and reciprocity—can be implemented when working with children in conflict settings as well as the respective challenges this may imply. It is argued that reflexivity based on care ethics is a collective practice involving not only researchers but also participants and other relevant actors alike.

KEYWORDS

armed conflict, care ethics, children, reflexivity, research ethics, war

Introduction

Armed conflict[1] poses a serious and ongoing threat to the lives, rights and wellbeing of children around the world. In 2023, approximately 473 million children lived in a conflict zone: that is, 18.9 percent of the world's population under 18 years of age (Østby and Rustad, 2024). Over the past decade, the number of armed conflicts occurring worldwide has increased, reaching a total of 134 in 2023 (International Institute for Strategic Studies, 2024). The manifold effects hereof on children are devastating in nature. Every year, thousands of children are killed or wounded in armed conflicts; the estimated numbers of those affected continue to rise (United Nations, 2024). In conflict zones, children are abducted, orphaned, forcibly recruited into armed groups and witness or sometimes even participate in acts of violence and human rights abuses. Moreover, contemporary conflicts are characterised by the deliberate targeting of civilian infrastructure, including residential areas, hospitals, schools as well as water and electricity facilities. This has grave consequences for children, who depend on these institutions for their basic needs and wellbeing. Furthermore, the destruction of agricultural lands and markets as well as the blocking of humanitarian aid by conflict parties serve to create or exacerbate food shortages which can be life-threatening to children (UNICEF, 2022). Displacement, one of the most pervasive effects of armed conflict, may also have a long-term negative effect on children's lives.

1 The term "armed conflict" is used in this article to refer to both conflicts between the armed forces of different states (international armed conflict) and armed clashes between state and non-state armed groups or among non-state groups within a state (non-international armed conflict).

By the end of 2023, indeed, an estimated 47.2 million children worldwide had been displaced as a result of conflict and violence (UNICEF, 2024).

As the prevalence of conflict and its ruinous impact on children's lives continue to deepen around the world, "research is increasingly heralded as a solution" (Shanks and Paulson, 2022, p. 169). Scholarly insights hereon may inform evidence-based policy and help to develop and evaluate related prevention and intervention programmes. However, research involving conflict-affected children must grapple with a number of ethical challenges: Children living in or displaced from conflict zones may be particularly vulnerable to the material, physical, social and emotional impacts of armed violence. Scholars must, therefore, make sure not to inflict further harm on them as a result of their involvement in research. Moreover, unequal power relations between adult researchers and child participants as well as between the former and other involved stakeholders may raise complex and unforeseen ethical issues, as will be shown in detail.

Disciplines such as anthropology, law, medicine, psychology or sociology have addressed scholarly work on and with conflict-affected children very differently in terms of their chosen focus, methodology, methods and approaches to research ethics. In this article, I will introduce perspectives from Forced Migration Studies, Social Anthropology and Sociology to psychological research investigating the impact of war and conflict on children. Psychology stands to benefit greatly from these disciplines' own concepts and reflections on research ethics in this context for the following reason: current focus in the former tends to be on laboratory experiments and quantitative methods, and thus cannot appropriately address the many ethical challenges arising in research with children carried out in settings of conflict and displacement and using qualitative and participatory methods. Moreover, in biomedical and psychological research, research ethics is primarily an issue at the preparatory stage when ethical approval is required before data collection can begin. Yet ethical challenges and dilemmas manifest throughout the research process, from the determination of the exact topic to be studied through the dissemination of findings.

How, then, can research involving children affected by war and armed conflict be designed, conducted and shared in ways which respect their dignity and rights and safeguard their wellbeing? While there is no simple answer to this key question, I will outline what a reflexive care-ethical approach to addressing related challenges during the research process might look like. Then, I will apply this proposed approach to a selection of ethical challenges I consider to be pervasive and difficult to manage in research involving conflict-affected children. I will also explain why ethical reflexivity cannot be achieved through individual introspection alone; rather, it requires a collective, dialogue-based process ideally involving both researchers and participants. This collaboration can take different forms depending on the topic, methodology and context informing the scholarship to hand.

I define "children" in terms of social age (Clark-Kazak, 2009) rather than chronological age throughout. Accordingly, the term is taken to include all young people who have not yet attained full adult status as defined by the societies and communities which they are part of. Definitions based on chronological age, such as in Article 1 of the United Nations Convention on the Rights of the Child (UNCRC), are commonplace. As Denov and Akesson (2017) note, however:

> *Defining childhood based solely on age not only reflects a bias toward Western notions of childhood that are rooted in biomedical theory [. . .] but also may overlook other salient cultural, social, economic, gendered, class and other status determinants that extend well beyond the notion of age. Furthermore, armed conflict challenges preconceived notions of childhood, with children taking on positions of adults, such as caregiving or assuming an active combat role.* (Denov and Akesson, 2017, pp. 11–12)

As will be argued, distinctions between children and adults in terms of competencies and roles should not be made based simply on age or presumed biological differences. Rather, the specific experiences and living conditions of children in one's chosen research context need to be taken into account. The literature reviewed in this article examines the impact of armed conflict on young people in many different geographical, cultural and social contexts. The word "children", therefore, will be used as an umbrella term for young people from infancy to youth, without a clear age limit.

The article is structured as follows: Starting with a brief historical review, I will first outline fundamental moral principles and ethics codes relevant to research involving children affected by armed conflict. Then, I will introduce two dimensions of research ethics—namely procedural ethics and ethics in practice (Guillemin and Gillam, 2004)—and justify why both institutional ethics approval and continuous ethical mindfulness are indispensable. Subsequently, I will introduce the principle of ethical symmetry (Christensen and Prout, 2002) as well as key points of care ethics (Gilligan, 1977; Held, 2006; Noddings, 1984; Tronto, 1993) and draw conclusions for research involving conflict-affected children. Following this theoretical section, I will discuss specific ethical challenges in research practice and make suggestions for dealing with these challenges from a reflexive care ethics perspective. The article concludes with considerations on how ethical reflexivity can be implemented in concrete terms as a collective practice throughout the research process.

Historical development of ethics codes and regulations

Research ethics refers to the normative standards and legal regulations underpinning good scientific practice as well as to necessary reflection on the objectives, methodology and impact of one's work (Rat für Sozial- und Wirtschaftsdaten, 2017). While the precursors of today's research ethics date back to the works of ancient philosophers, it is only since the twentieth century that research involving human subjects has been officially regulated by national governments or international non-governmental organisations (Nelson and Forster, 2024). The first international code of ethics was the Nuremberg Code (1949), which is considered a milestone in the development of modern research ethics.

During the Second World War, Nazi scientists mutilated and murdered thousands of prisoners in concentration camps in cruel experiments. After the war, the Nuremberg Military tribunal tried some of those responsible for war crimes and crimes against humanity. As part of the so-called Doctors' Trial, the Nuremberg Code was created based on the testimonies of American physicians (Annas and Grodin, 1992). It comprises ten core principles to be followed in medical experiments on human subjects. These include—among others—that participation in research must be voluntary, experiments should avoid all unnecessary harm and suffering, and benefits of the research must outweigh the risks.

Influenced by the Nuremberg Code, the World Medical Association developed and adopted the Declaration of Helsinki in 1964. The Declaration has been amended several times, most recently in 2024 (World Medical Association, 2024). It expands and specifies the principles of the Nuremberg Code to adapt them to the advancement of clinical research. For example, it introduces the principle of informed consent and defines the tasks of ethics committees.

Another influential document in the field of biomedical ethics is the Belmont Report, which was written by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research (1979) on behalf of the U.S. Department of Health, Education, and Welfare. In the Commission's view, the existing codes were not suitable for solving complex ethical problems. It therefore pursued the goal of formulating fundamental principles that could be used to resolve ethical dilemmas for which other codes had no answer (Fischer, 2006). The primary ethical principles identified in the Belmont Report are respect for persons, beneficence, and justice.

Building on the classic codes of ethics mentioned here, numerous other national and international ethical guidelines for biomedical research have since been published (for reviews, see Fischer, 2006; Nelson and Forster, 2024). In general, the creation and adoption of ethics codes has contributed to the institutionalisation of research ethics, albeit in different guises depending on the discipline and geographical context in question. While prior approval by ethics committees is mandatory for clinical and experimental studies on humans, this does not necessarily apply to other fields; there is great variance to be found in respective institutional processes around the globe (Nelson and Forster, 2024).

As this brief historical review shows, modern research ethics is strongly influenced by discourses and developments within biomedical research. Although questions of research ethics were also addressed early on in the social sciences (Dingwall, 2012), they are little known in psychology, with the exception of controversies surrounding individual well-known experiments in social psychology, such as the Milgram Experiments (Milgram, 1974). Social scientists have widely criticised the fact that ethical guidelines and regulatory frameworks developed in the context of biomedical research do not adequately address the specific ethical issues in the social sciences (Dingwall, 2012; Schrag, 2010). In addition, indigenous scholars have critiqued the dominant Western concepts and values enshrined in research ethics codes and developed related principles and methodologies informed by the worldviews and cultural traditions of their own peoples instead (Brayboy et al., 2012; Loveridge et al., 2024). Such indigenous frameworks usually highlight the key importance of reciprocal and respectful relations, a point also stressed in care ethics (more below). Over the last two decades, these critical discourses have led to the development of codes of conduct for specific social science disciplines as well as scholarly work interdisciplinary in nature, such as forced migration studies (International Association for the Study of Forced Migration, 2018). Although these codes and guidelines often refer to general principles of bioethics, they go beyond these and specify the particular ethical challenges of social science research.

Recent developments in the multidisciplinary field of childhood studies are particularly relevant for ethical considerations in research on children affected by armed conflict. Noteworthy in this regard is the International Charter for Ethical Research Involving Children (ERIC Charter), which was the outcome of intensive international consultation and collaboration between academic institutions, non-governmental organisations and the international research community on such matters (Centre for Children and Young People at Southern Cross University, Australia and UNICEF Office of Research-Innocenti, 2024). Based on the three core principles of the Belmont Report, the ERIC Charter emphasises the need for a reflexive approach to research ethics. The Charter is therefore supplemented by detailed ethical guidelines, case studies and resources for researchers (Graham et al., 2013). A key reference point of the ERIC Charter and of research ethics in childhood studies, in general, has been the United Nations Convention of the Rights of the Child (UNCRC). Scholars in this field have emphasised that the ethical treatment of children in research endeavours is closely linked to the UNCRC's inscribed principles (Alderson and Morrow, 2011; Lundy and McEvoy, 2012; Powell et al., 2012). Based on the latter, an international group of academics has continued to promote children's "right to be properly researched" (Abebe and Bessell, 2014; Beazley et al., 2009). Whilst recognising that the UNCRC is a set of obligations laid down for states rather than individuals, and as such the Convention does not impose direct responsibilities on researchers *per se*, it still provides important guidance for ethical scholarship involving children (Lundy and McEvoy, 2012; Powell et al., 2012). As Bessell points out: "If taken seriously, rights-based research with children requires that the 'best interests' of the child be the primary consideration" (2024, p. 315).

Procedural ethics and ethics in practice

Criticism of the dominance of biomedical issues in ethics codes and the resulting development of discipline- and topic-specific ethical guidelines points to a tension within research ethics between general moral principles and context-specific ethical reflections. Guillemin and Gillam (2004) differentiate in this regard between two dimensions: *procedural ethics*, which examines compliance with established standards through institutional processes (e.g., ethics committees), and *ethics in practice*, which deals with situational challenges emerging during the research process. The friction between these two aspects lies in the fact that procedural

ethics is highly formalised and usually takes place before a given research project can begin, while ethical issues may arise at any point during the research process and often in unexpected ways. In this context, Guillemin and Gillam speak of "ethically important moments" (2004, p. 265): that is, unforeseen situations stirring in the everyday practice of doing research where it is not clear how to respond or act in an ethically appropriate way. Procedural ethics alone, thus, is not sufficient for dealing with such unpredictable and suddenly occurring dilemmas or concerns. Moreover, since procedural ethics is based on general moral principles, it tends to conceptualise social life in an overly simplistic way and fails to recognise the complexities, ambiguities and contradictions of lived reality and typical academic practice.

Accordingly, some researchers in childhood studies have criticised ethics protocols and regulations for being too lengthy and bureaucratic, as well as for being based on a biomedical conceptualisation of children as but passive objects of protection rather than as active research participants. Others, in turn, have argued that procedural ethics has generally led to greater attention being paid to ethical issues in research and pointed out how good examples exist of ethics protocols which are respectful of children's rights and evolving competencies and protect them from harm (for a summary of this controversy, see Hanson et al., 2023).

Regarding research involving conflict-affected children, I consider both procedural ethics and ethics in practice as vital; ipso facto, they need to be equally taken into account. Procedural ethics helps emphasise core moral principles (such as respect, non-maleficence, beneficence and justice), whose honouring is fundamental to the conducting of sound research involving human subjects in general. Highlighting these non-negotiables and monitoring compliance with them is particularly important for research in conflict zones, where violence and human rights abuses occur daily and become normalised. Moreover, governments in Europe and the US are increasingly excluding and discriminating against migrants and refugees, including conflict-affected children, denying them fundamental rights (Morland and Kelley, 2024; Russo, 2025). Furthermore, academic freedom finds itself increasingly under threat worldwide, as transpiring in dictatorships and democratic states alike (Lott, 2024). It is, therefore, essential that the ethical assessment of research be based on guidelines formulated independent of political agendas.

Procedural ethics also draws attention to specific issues regularly manifesting in the course of the research process, such as ones of informed consent, harm and benefit, privacy and confidentiality, or reciprocity. Dealing with these matters is, however, never straightforward, particularly in work on and with conflict-affected children. As will be shown, research in such settings involves particular ethical challenges; these matters become even more complex when the participants are children, given that concepts of "childhood" are socially constructed and vary significantly according to milieu (Denov and Akesson, 2017; James and Prout, 2003; Wessells, 2013). Consequently, procedural ethics is necessary but not sufficient for scholarship involving children affected by armed conflict. In addition to obtaining ethics approval, researchers need to continuously reflect on the accompanying challenges emerging in and with their daily practice.

Ethical reflexivity

Guillemin and Gillam propose reflexivity as a means of addressing ethical concerns in research and bridging the gap between procedural ethics and ethics in practice. They define reflexivity here as a continuous process of "critical reflection both on the kind of knowledge produced from research and how that knowledge is generated" (2004, p. 274). The outlined concept is central but not limited to qualitative work, since reflecting on the process of knowledge production and the role of the researcher in it is necessary for all types of academic endeavour regardless of chosen methodology and design (Lazard and McAvoy, 2020). From an epistemological point of view, reflexivity is generally regarded as a means to enhance scientific rigour and the validity of findings. However, it is also important for ensuring core principles are upheld. Ethical reflexivity refers to continuous deliberation on how the researcher's meeting of moral obligations, such as beneficence or justice, can be ensured in everyday practice. Moreover, this implies also critical assessment of how their own social positions and the specific social, cultural and political context under examination both raise ethical questions and influence the chosen responses to them (Guillemin and Gillam, 2004; Warin, 2011).

Reflexivity in this sense does not prescribe specific solutions to the ethical dilemmas encountered; rather, as critical practice it encourages scholars to scrutinise their own role and its potential impact throughout the entire research process—from the planning stage, through data collection and analysis, up to the eventual publication of findings (Guillemin and Gillam, 2004). This is a call, then, to develop an attitude of ethical mindfulness as core premise: that is, an "awareness of risks and balances, a sensitivity to the day-to-day and ongoing nature of ethical dilemmas within the research relationship" (Warin, 2011, p. 809). While such reflexivity and attentiveness are vital in social research, in general, they play a particularly crucial role in empirical studies involving children in conflict zones. Here, potential risks and ethical dilemmas are manifold, and the relationship between children and researchers is influenced by complex and changing power dynamics.

Power inequities and ethical symmetry in research involving children

While unequal power relations may negatively influence the research process and any findings it yields in general, this is particularly the case when working with conflict-affected children. However, empirical studies in the field of children and armed conflict rarely address power inequities explicitly. I will therefore first discuss general findings from childhood research on intergenerational power relations before drawing specific conclusions for research on and with children in conflict settings.

Scholars in childhood studies regard the relationship between adult researcher and child participant as one fundamental source of inequity (Christensen and Prout, 2002). Compared to adults, children occupy a subordinate position in society. Despite the array of cultural differences and historical developments witnessed around concepts of childhood and intergenerational relationships,

power asymmetries between adults and children are a global phenomenon—one which also influences scholars' own views on such matters as well as their relationship with the children they investigate (John, 2003). Research on or with children is shaped by how "childhood" and "children" are socially constructed within specific academic disciplines and particular cultural contexts (Morrow and Boyden, 2014, p. 2896). Traditionally, children have been regarded as essentially vulnerable, incompetent and dependent on adults, and therefore investigated through the eyes of their caregivers alone (Christensen and Prout, 2002). This view of children as mere passive objects of protection is still prevalent in biomedical research, continuing to inform the standards and evaluations of institutional ethics review boards until today (Hanson et al., 2023, p. 344). Since the 1960s, influential takes in developmental psychology—such as Piaget (1926, 1928) —have led to a recognition of children as active subjects, albeit ones with limited cognitive, emotional and social competencies as compared to adults. In this child-centred approach, age-based criteria and assessments of development- and maturity levels are commonly used to decide whether and how to include children in research (Woodhead and Faulkner, 2000).

With the emergence of sociological childhood studies in the 1990s, children have come to be increasingly perceived as social actors who actively engage with the social and cultural worlds they inhabit. That is, they are viewed as fully-fledged human "beings" rather than as human "becomings" still on their way to adulthood (Qvortrup, 2009). Taking this perspective seriously means respecting children as social actors not only in their everyday lives but also in the chosen research context. Consequently, an increasing number of scholars are now calling for children's active participation in related academic work, for example as co-researchers (Christensen and James, 2017).

Christensen and Prout (2002) argue that acknowledging children as social actors and research participants is based on the normative principle of "ethical symmetry". This means "that the researcher takes as his or her *starting* point the view that the ethical relationship between researcher and informant is the same whether he or she conducts research with adults or with children" (Christensen and Prout, 2002, p. 482; italics in the original). Consequently, the same moral principles should be adhered to and equal rights granted vis-à-vis all research participants regardless of their age and social position. Ethical symmetry does not imply, however, there are no differences between children and adults nor that they should be treated the same in research. Instead, it means not to assume such differences *in advance* because of preconceptions about children's competencies based solely on their age and developmental status. Due to their positioning within an intergenerational order which classifies children as subordinate to adults, young people may share similar experiences across social settings. At the same time, however, they are a very diverse group, and their experiences and competencies vary widely because of factors such as (dis)ability, ethnicity, gender and encountered levels of socio-economic inequality (Christensen and Prout, 2002).

On the other hand, power imbalances also exist between children themselves. Awareness of these unequal relationships is necessary to avoid some children being excluded from participating in research or being silenced by their more powerful peers in the course of proceedings. Researchers also need to contemplate whether their envisaged participants will adequately represent the perspectives and experiences of their peers in a given context (Berman et al., 2016, p. 23).

Furthermore, researchers' position of power over child participants and their views of children and childhood are not solely determined by their adult status, but also by other elements of their positionality. Originating from feminist standpoint theory (Harding, 2004), the concept of positionality states that an individual's understanding of the world is influenced by his or her social positions. One's standpoint is not monolithic or static but rather spans multifaceted and fluid social positions: among others, age, class, culture, gender and race. Black feminists (Crenshaw, 1989, 1991; Hooks, 2000), in particular, have long emphasised the intersectional nature of identity.[2] A person simultaneously holds multiple social identities, which interact in contextualised ways within entrenched structures of social inequality. A researcher's positionality is, therefore, not reducible to demographics alone; rather, it varies in relation to the participants and social context to hand (Soedirgo and Glas, 2020).

Therefore, attentiveness is required to variations in children's social experiences and competencies within and across research contexts. Awareness is also needed of how own attitudes towards and preconceptions about children are influenced by one's biography, absorption of social constructions of childhood and embedding in intergenerational power differentials. Moreover, one's positionality as adult researcher differs remarkably from the experiences and living conditions of child research participants. Yet, what exactly these points of divergence are and how entrenched power imbalances influence the research process and its outcomes cannot be identified ahead of time; they must, rather, be examined through continuous critical reflection hereon.

Hence, the normative principle of ethical symmetry can help prevent the essentialising of identified differences between children and adults. This framework is, though, only the "starting point" (Christensen and Prout, 2002, p. 482) when conducting research on and with children. However, important conclusions can be drawn for research involving children affected by armed conflict.

Power dynamics in research with children in and from conflict zones

Armed conflicts can have a profound impact on children's close relationships and social networks, for example if parents or other attachment figures are killed or children are separated from relatives and friends due to displacement or abduction. As a consequence, children's social roles and the associated intergenerational power relations may change in conflict settings: Some actively take part in combat as child soldiers, others take on the role of head of the family or caregiver for younger siblings. Still others must fend for themselves, as in the case of unaccompanied child migrants. Moreover, children often are silent and unrecognised witnesses to extreme violence and

2 Coined by Crenshaw, the term "intersectionality" refers to the way in which race, class, gender, age, sexuality, disability, and other categories of difference interact with each other, as well as the impact of these interactions on power relations.

frequently overhear adults' conversations on related issues. It is, therefore, likely that conflict-affected children have knowledge and competencies well beyond their chronological age.

Researchers need to be aware of these conflict-related changes in children's social roles, relationships and competencies because these also affect the power relations and other ethically relevant issues in the research context. For example, interviewing children who experienced traumatic losses of attachment figures or have been victims or witnesses of violence is both methodologically and ethically challenging, as it can lead to re-traumatization (Akesson et al., 2018, p. 82; Ellis et al., 2007, p. 465), and standard interview formats are not appropriate for children from non-Western cultures and economically disadvantaged communities (Mordock, 2001). The absence of parents or legal guardians as well as involvement in activities considered to be harmful to children raise complex ethical questions regarding informed consent, harm prevention and confidentiality, which will be discussed in detail later.

Furthermore, researchers need to critically reflect on their own ideas of childhood and the feelings associated with them. For example, exposure to images of children living in places beset by war and conflict can provoke intense emotions and conjure up the impression of these individuals being but helpless victims suffering the fate of a "lost childhood". Consequently, researchers may be inclined to put too much emphasis on the vulnerability of conflict-affected children and overlook their resilience and agency in the process (von Denkowski and Krause, 2024). They may also, as such, underestimate these children's capacity to actively participate in research. Moreover, a lack of reflection on own normative views of children and childhood can lead to those in question being portrayed in a predominantly negative or deficit-oriented way because their experiences differ greatly from Western ideals of a happy and carefree upbringing.

In sum, ethical symmetry in research involving conflict-affected children means, first and foremost, respecting the latter as human beings carrying the same dignity and fundamental rights as adults. Second, awareness of one's own positionality and refraining from a priori assumptions about children's inherent competency or vulnerability is paramount. Third and finally, ethical symmetry implies orientating *all* research towards the context-specific needs of participants, be they children or adults.

As mentioned above, factors such as age, caste/class, (dis)ability, ethnicity and gender influence and reinforce power differentials between adults and children as well as among children themselves. Moreover, how armed conflicts affect young people and what resources and coping strategies are available to them also depends on the interactions between social categories such as gender, age, ethnicity and disability (Cerimović, 2023; McLean Hilker, 2014). Taking an intersectionality perspective is thus vital for research involving conflict-affected children. From an ethical point of view, considering the interaction and cumulative effects of multiple forms of discrimination in settings of conflict and displacement helps to ensure that marginalised groups of children are not excluded, ignored or silenced (Hart, 2022, p. 117).

The principle of ethical symmetry focuses on intergenerational power relations between adult researchers and child participants. Yet these are not the only power dynamics at play in research involving children affected by armed conflict. Conflict settings are often characterised by unequal and shifting power relations between the respective conflict parties. Researchers not familiar with the chosen field site will not necessarily be aware of these complex and often subtle power dynamics. Even if they do know the local context well, they are likely to become entangled in such power inequities regardless: access to the field is dependent, for example, on the permission of the government or armed forces controlling the area in question (Habib, 2019; Norman, 2009). Moreover, non-locals, in particular, may be suspected by those on the ground of working for the enemy (Wessells, 2013). The entanglement of researchers in such complex power relations has far-reaching consequences for research ethics: Doing fieldwork in a conflict zone puts both researchers and participants at risk, restricts the voluntary nature of consent and makes it difficult to guarantee anonymity and confidentiality, to name but a few examples. I will discuss these challenges in more detail later on.

Global inequalities also affect power relations in research involving conflict-affected children. The majority of civil wars and interstate conflicts take place in the so-called Global South.[3] However, field research conducted there, has generally been dominated by scholars and donors from the Global North (Shanks and Paulson, 2022; Steinert et al., 2021). As a result, the necessary resources for working on and with conflict-affected children are unequally distributed and often allocated in ways serving to reproduce existing power asymmetries both between researchers and participating children and within international project teams. In addition, those not familiar with the local context and language find themselves dependent on gatekeepers whose connections to local authorities and conflict parties influence the selection of research participants as well as the process behind and outcomes of data collection (Habib, 2019). Consequently, "[t]he daily practices of designing, conducting and sharing research can perpetuate epistemic injustice [. . .] within research teams and towards research participants, raising profound ethical challenges" (Shanks and Paulson, 2022).

It is hence essential to be aware of unequal power relations at work in the respective research contexts, be it fieldwork in war zones or studies involving displaced children in host countries not directly affected by armed conflict. Awareness alone though is not sufficient for ethical research involving war-affected children. How can researchers best navigate these power dynamics and the resulting ethical challenges in everyday practice? Care ethics can provide some guidance here.

3 The Global North-Global South dichotomy was introduced as a less evaluative alternative to "Third World" or "developing countries". The classification does not have a strictly geographical meaning but refers to a distinction between economically richer and poorer countries or regions in the context of global capitalism. While usage of the terms Global North and Global South has become popular in the social sciences and humanities, it has also been criticized for its methodological nationalism and simplification of complex global inequalities.

Reflexive care ethics

The origins of care ethics can be traced back to the seminal works of psychologist Gilligan (1977) and philosopher Noddings (1984), who both criticised male bias in moral theories. Since then, feminist scholars from different disciplinary and cultural backgrounds have contributed to the development of care ethics and its application to various fields of research and practice (e.g., Held, 2006; Tronto, 1993). This approach views moral actors as "related, interconnected, mutually dependent, and often unequal in power and resources—as opposed to the conventional portrayal of the agent as independent, equal and self-sufficient" (Pettersen, 2011, p. 55). In care ethics, not only individuals but also collectives—such as groups, institutions or states—are understood as moral subjects. Relations between different categories of the latter are often characterised by unequal access to power and resources, which can lead to vulnerabilities, dependencies, coercion and violence (Tronto, 1993, pp. 134–135). As argued above, this also applies to conflict-affected children.

Feminist approaches to care ethics understand "care" both as a practice and as a moral value (Held, 2006, pp. 29–43). The term thus refers, on the one hand, to care work and, on the other, to the moral standards used to assess the quality of such work. Care is by no means limited to individual—often female—care work but refers in a broader sense to various types of caring relationships between individual and collective actors at the organisational, national or global level (Held, 2006; Tronto, 1993).

In terms of epistemology, care ethics goes beyond abstract moral reasoning. It takes contextual differences into account when forming moral judgements and includes subjective experiences and self-reflection (Pettersen, 2011, p. 55). In this respect, care ethics coincides with the concepts of positionality and reflexivity discussed above. However, care ethics goes even further in that reflection on one's own entanglement in power relations not only serves to improve the quality of knowledge production but also aims to build relationships yielding the greatest possible benefit for all research participants, children included. The core values embraced here, then, are preventing harm and promoting human flourishing (Pettersen, 2011, p. 54). Despite the similarity with procedural ethics' established principles of non-maleficence and beneficence, care ethics advocates for taking a proactive approach to preventing harm instead of just seeking to reduce or minimise it. This sets, however, a very high standard, one which can never be fully realised in scholarship involving conflict-affected children: researchers are neither fully aware nor in complete control of all the risks their work poses for those concerned. Nevertheless, they should do their utmost to prevent harm; a care-ethical approach can, at least, sensitise them to potential risks.

In care ethics, "care" is understood as a relational process in which both the giver and the receiver participate. This means that the core values of care ethics apply equally to all those involved in the caring relationships taking shape. So doing is not, then, to advocate self-sacrifice or self-denial in favour of others' wellbeing. Rather, it is a call for "mature care" (Pettersen, 2011, p. 56): namely, to recognise that the involved actors should care for themselves to the same extent they care for others.

Applied to the research context, this means that a care-ethical perspective focuses not only on the wellbeing of research participants, but also on that of the researchers themselves. Field research in conflict zones can be very dangerous and stressful for those performing it. Witnessing how children are victimised, displaced or living in inhumane conditions can be emotionally overwhelming and cause intense feelings of grief, anger, fear and powerlessness. Particularly when building up personal relationships with the children participating in one's research, there is a risk of developing secondary traumatisation due to strong affective empathy (Chiumento et al., 2017). Moreover, scholars may take on the role of "savior" by overestimating their own limits and thus putting themselves and others at risk (Vervliet et al., 2015, p. 12).

Hence, embracing a care-ethical perspective can help researchers to find a balance between caring for others and caring for themselves. Care ethics aims at structuring relationships in ways working to enhance reciprocity and each party's wellbeing. This approach implies, accordingly, planning and conducting research which allows for mutually beneficial and continuing relationships between researchers and participants. Care ethics, therefore, is incompatible with "extractivist practices" (Spyrou, 2024) of data collection in the form of "one-off snatch and grab research" (Loveridge et al., 2024, p. 395).

As discussed above, the relationship between researcher and participating children is embedded in a broad network of actors who influence both proceedings and outcomes. These may include community leaders, educational/research institutions, gatekeepers, interpreters, political authorities, social services and many others besides. Within such a network, power in a Foucauldian sense cannot be clearly attributed to individual persons but circulates according to context and situation (cf. Doná, 2007, pp. 223–225). From a care-ethical perspective, under these circumstances it is the task of researchers to continuously reflect on and navigate their own positionalities with a view ultimately to preventing harm and generating the greatest possible gains for all involved. However, that is easier said than done. What specific ethical challenges are likely to arise in the process of research with war-affected children? And how can a reflexive care-ethical approach help to address them? In the following, I will illustrate the various possibilities here as regards three concrete principles: namely, informed consent, harm prevention and reciprocity.

Informed consent as an iterative process

A central tenet of research ethics is the voluntariness of participation in scientific studies. Obtaining informed consent is, therefore, a necessary precursor to any empirical research carried out with human subjects. It presupposes that participants are informed about and have an understanding of the research set to take place. Consent must be given freely and explicitly, and it must be revocable at any point throughout. In research involving children, informed consent by parents or guardians is usually required for those under 12 years of age; legal regulations in some countries may allow adolescents to provide consent on their own behalf, dependent on the nature of the study (Graham et al., 2013, p. 57). From a rights-based perspective, children's direct informed

consent—or at least assent—should always be obtained even if parental consent is legally sufficient (ibid., pp. 58–60). Studies have shown that even very young children or children with intellectual disabilities are able to give informed consent if they are approached ethically and given appropriate information (Powell et al., 2012, p. 15).

When researching children affected by armed violence, obtaining truly informed consent—be it from parents, carers or children themselves—can be ethically challenging for various reasons. First, in conflict and post-conflict settings it may be difficult or even impossible to identify the parents or legal guardians of children who have been orphaned and/or displaced. As a result of these developments, children often must fend for themselves or take on the role of caregiver. In such cases, it may be questionable whether the opportunity to take part in research should depend on permission by adults (Hart, 2022, p. 109). In countries of the Global South, moreover, children are often embedded in a network of care relationships rather than living in a single household (Abebe, 2009, pp. 456–457), which makes it difficult to identify who exactly should give informed consent. In addition, the focus on individual consent as regards research participation may be inappropriate in cultural contexts "where children or young persons may not have the right to impart collective knowledge without the consent of other family and community members" (Suaalii and Mavoa, 2003, p. 195). Yet, even in Western research environments it may be difficult to ensure that children's consent is free and voluntary here given the aforementioned power differentials at work (Graham et al., 2013, p. 58).

Hence, sound knowledge of the cultural context and careful local consultation are crucial for determining who should give consent to children's participation in the proposed research. An important factor to consider in this regard is the exact topic under investigation. In research focusing on violence against children or the latter's involvement in armed groups, for instance, it may be better to carefully select a limited number of people on the ground from whom informed consent will be obtained in order to protect the participating children (Graham et al., 2013, p. 57). Moreover, how to give consent in an ethically appropriate way is also context-dependent. Written informed consent, as often required by research ethics committees, may be inappropriate in conflict zones. People affected by armed violence and displacement may be reluctant to sign forms and register their names because maintaining anonymity can be vital to protecting themselves and their families from danger. Insisting on a signed consent form may, therefore, deter research participants or even jeopardise their wellbeing (Hart, 2012). These examples show that there is a tension between the principles of informed consent and the necessity of preventing harm. From a care-ethical perspective, the protection of children takes priority here.

Research in refugee camps or among displaced people mostly depends on local organisations and community leaders for field access. These local authorities often also serve as intermediaries for the distribution of aid relief and the provision of other essential services. Consequently, research subjects being directly recruited by local community leaders may compromise the voluntariness of consent out of fear that services could be discontinued or reduced due to participation or non-participation (Akesson et al., 2018, p. 26; see also, Habib, 2019). Moreover, the presence of presumably rich and powerful outsiders usually raises hopes and expectations, even if researchers emphasise that they are not in a position to provide aid (Crivello and Morrow, 2021, p. 16; Wessells, 2013, p. 93).

Permission from the military forces or armed groups controlling the area in question is also typically required in conflict settings. Local communities affected by prolonged hostilities are often exposed to long-term military surveillance and violence. This impedes voluntary participation in research due to fears that to willingly decline a study which has been authorised by those in charge could have grave consequences (Habib, 2019). Such power dynamics may result in children and their parents or guardians feeling under pressure to agree to their own involvement.

In view of these restrictions on voluntary participation, researchers should not regard initial consent as binding and permanent. Rather, children and adults should have the opportunity to withdraw at any time. Those working with children emphasise, as such, how informed consent is an ongoing process rather than a singular act and that dissent and opting out should always be possible (Bessell, 2024; Dockett et al., 2012; Flewitt, 2005). Renold et al. (2008, p. 427) coined the notion of "becoming participant" in their research with children and young people, noting informed consent to be "always in-process and unfinished". As children may express their dissent in myriad ways both verbal and non-verbal, researchers need to be sensitive to such signals and fully respectful of them (Dockett et al., 2012). According to Bessell, "[u]sing multiple methods is one means of providing children with the option of withdrawing from some methods or topics but remaining engaged in the research overall" (2024, p. 321).

In sum, informed consent is an ongoing process and one which requires ethical reflexivity on the part of the researcher. Respecting children's dissent or opting out not only recognises their right to freely express their views and be heard on matters affecting them (Articles 12 and 13 UNCRC). It also contributes to preventing distress and harm as a result of involuntary participation.

Preventing harm

According to Article 19 of the UNCRC, children shall be protected "from all forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment or exploitation, including sexual abuse, while in the care of parent(s), legal guardian(s) or any other person who has the care of the child." Hence, scientists have the responsibility to shield these individuals from any harmful consequences arising with participation, an obligation which corresponds to the principle of non-maleficence in procedural ethics. However, putting this moral obligation into practice is challenging when working with children affected by armed conflict.

A widely recognised ethical challenge here, more broadly, is how to deal with situations in which children disclose abuse, maltreatment or neglect to researchers. While there are legal reporting requirements, these vary between countries and

jurisdictions. Furthermore, such disclosures often do not clearly indicate those in question are in immediate danger. More commonly, children's statements exist in a grey zone where both reporting and not reporting them to the authorities may similarly harm the individual concerned (Bessell, 2024, p. 316). In this case, researchers should involve professionals with expertise in child protection in the risk assessment. Such episodes should be taken seriously and quickly addressed, and that in an appropriate manner. To this end, it is necessary to identify support services and referral processes prior to research commencing. In addition, project teams should receive training from child-protection specialists before conducting academic work with children (Bessell, 2024, p. 317).

This approach is, however, difficult to implement in marginalised communities or conflict settings, where child-protection mechanisms and other such support services are dysfunctional or simply not available. In this case, researchers should establish internal structures and processes which can facilitate the ethically appropriate handling of such matters should they arise. For example, in the Young Lives longitudinal study, which aims to identify determinants and outcomes of childhood poverty in four countries of the Global South, local research teams jointly assess child-protection issues on a case-by-case basis, drawing on the project's safeguarding policy (Crivello and Morrow, 2021, p. 19). This example illustrates that ethical reflexivity as a collective practice should be systematically planned into the work of research teams and carried out regularly. I will discuss ways in which this can be implemented later on.

However, ethical challenges are liable to emerge not only in connection with the disclosure of harm inflicted outside the research context. Rather, children can also suffer because of their participation therein. This is most obvious in biomedical research but can also occur in social studies—especially in contexts of war, conflict and displacement. When dealing, for instance, with refugee children whose status in their host country is precarious or even illegal, it can be particularly important to ensure anonymity is maintained. Research activities drawing attention to children in such a situation may result in them and their families being deported, detained or transferred to displacement camps (Hart, 2022, pp. 109–110).

For a thorough understanding of the diverse life situations war-affected children inhabit, it is essential to explore their own experiences and perspectives. However, when addressing sensitive topics such as experiences of violence, death or separation from family members this can evoke painful memories and lead to emotional distress or even re-traumatisation (Akesson et al., 2018, p. 82; Ellis et al., 2007, p. 465). The risks hereof increase when carrying out qualitative and participatory work seeing prolonged and intensive interactions between researcher and child. In longitudinal and participatory studies aiming to nurture long-term and reciprocal relationships of trust between researchers and participants, children may feel safe enough to open up and talk about sensitive topics. This can provide enormous relief for them. Encouraging these individuals to speak out in front of others may put them at risk though, with the information shared potentially being used against them. When participatory methods are adopted with war-affected children, researchers must thus be aware that so doing can not only stir up strong emotions but may also elicit sensitive information. Sharing such details might not only lead to stigmatisation and suspicion but also jeopardise the safety of children, their families and their communities alike. In situations where the recruitment of children is officially denied, for example, the disclosure of one's own recruitment or that of peers could put children and their families at great risk (Hart, 2012). Moreover, when participatory research is conducted with groups of children or in the presence of family or community members, it may be difficult or even impossible to maintain the confidentiality of sensitive information disclosed in this collective context. Special care should also be taken when using photographs or videos in conflict-related participatory work. Prior consultation with local experts is necessary, as is clear discussion with the participating children of the potential risks involved when disseminating visual content portraying themselves or others (Berman et al., 2016, p. 30).

On the other hand, participatory and creative methods can also have a positive impact on conflict-affected children, as they may help them to express their emotions, needs and desires as well as to develop their life skills. This shows that participatory research is not automatically more (or less) ethical than other forms of academic work. Rather, its potential risks and benefits must be carefully weighed up, especially when dealing with vulnerable groups—such as, in our case, children living in contexts of conflict and displacement (Krause and von Denkowski, 2020).

Despite extensive criticism (e.g., von Denkowski and Krause, 2024; Denov and Akesson, 2017; Wessells, 2013), much of the psychological literature and research on children affected by armed violence still focuses primarily on young people's mental-health problems or anti-social behaviour. Sole focus on children's vulnerability and need for protection based on Western concepts of childhood not only leads to biased results but is also problematic. If scholars are exclusively interested in children's hardships, issues and traumatic experiences without recognising their resilience, resources and agency, this can have an adverse impact on the self-esteem and coping strategies of the young people involved. Moreover, representing conflict-affected children in research publications as "damaged" or "traumatized" reinforces negative stereotypes (Hart, 2012).

Yet, even when taking a more balanced view of children's vulnerability, resilience and agency and upholding a strong commitment to their rights unintended harm may still ensue. For example, they may suffer at the hands of others who are not part of the research project as a consequence of choosing to participate therein. In one study carried out in Sri Lanka, focus-group discussions with youth were misinterpreted by adult community members as political meetings aimed at recruiting young people as fighters. This exposed those taking part in the research to an increased risk of being arrested or attacked by armed forces (Wessells, 2013, pp. 81–82). In my own ethnographic and participatory work with displaced youth in one post-conflict area of Peru (Strocka, 2008), the presence of a white European woman hanging out with mostly male youth who were suspected to be gang members raised suspicion and led to increased police surveillance.

Children may also face danger even if they do not directly participate in the study, namely as a result of members of their community being consulted for research purposes. Relationships and power dynamics among local stakeholders must be carefully

analysed, particularly in the case of sensitive research topics. For example, in studies on violence against children in conflict and post-conflict situations the interviewed community members could themselves be perpetrators or abuse positions of power without the researcher's knowledge (Graham et al., 2013, p. 32). Special care also needs to be taken when recruiting local research assistants for data collection. Hart (2012) reports on survey work done in a conflict zone where the local research team employed by a foreign organisation included persons connected with the armed group responsible for the recruitment of children (while officially denying that fact). This jeopardised the safety of child research participants who gave information about their own recruitment.

Considering this right to protection from harm must not, however, lead to the general exclusion of conflict-affected children from participation in research. As Bessell puts it: "Rather than protecting children from research, the emphasis should be on ensuring that children are able to decide whether or not they wish to participate and protecting and supporting those who do" (2024, p. 323). However, balancing protection and participation proves difficult in practice because ethical dilemmas usually arise unexpectedly, and every envisaged solution might harm the children concerned in one way or another. This highlights once again the need to supplement procedural ethics with ethics in practice, as ethical dilemmas are difficult to predict and cannot be resolved in advance in abstract terms. Rather, continuous ethical reflection is required throughout the entire research process.

From the perspective of care ethics, harm prevention pertains not only to research participants but to each and every people directly or indirectly involved in the research. Project leaders have, therefore, a responsibility to protect themselves, their staff and collaborators in the field from physical and emotional harm. Local project staff who collect data in participants' communities and homes are particularly exposed to security risks, while non-local researchers tend to be less familiar with context-specific dangers and required safety measures; they will also be highly visible due to their outsider status (Steinert et al., 2021, p. 16). While physical threats are an issue particularly during fieldwork in conflict zones and emergency settings, emotional harm can occur also in what are considered safe research environments. Repeated confrontation with narratives of trauma and desperate living situations, including those of children, may lead to secondary traumatisation, compassion fatigue or over-involvement in participants' lives (Chiumento et al., 2017; Steinert et al., 2021). Self-care is, however, not solely the responsibility of the individual scholar. Rather, academic institutions and donors are also both accountable for the self-care of researchers and auxiliary staff: namely, by providing support services such as supervision and agreeing appropriate project frameworks (Chiumento et al., 2017; Steinert et al., 2021).

As these examples show, protecting researchers and participants alike from harm can be a complex endeavour, one requiring a high level of ethical reflexivity as well as the investment of sufficient time and resources. In pursuit of systematic, reflexive risk assessment and harm prevention, *Do No Harm* analysis by Anderson (1999) can be helpful. This analytical framework was originally developed for international development-cooperation projects but can also be applied in our context. Through its systematic examination of settings, target groups and potential influencing factors, this approach facilitates the development of an ethically appropriate research design (Krause, 2017, pp. 5–7) and is, therefore, particularly relevant for the planning phase. However, in line with the ethics in practice approach (Guillemin and Gillam, 2004), it is advisable to repeat the analysis over the course of the project and adapt the research design accordingly as necessary. Views on what constitutes harm and danger may differ between researchers and participants, though, due to their respective positionalities and levels of familiarity with the situation on the ground. Iterative risk assessments should, as such, involve local cooperation partners and participating children in order to respect their prior knowledge and own perspectives. Such a participatory iterative analysis can be linked to the abovementioned approach of ensuring ongoing informed consent.

As shown, care ethics' core values are preventing harm and promoting human flourishing. From this perspective, minimising harm in research with conflict-affected children is not enough. Rather, the aim should be to prevent it from occurring in the first place—as difficult as this is in practice—while also generating benefits not only for researchers but all parties involved.

Benefits and reciprocity

Given the power asymmetries inherent to conflict settings, it is of fundamental importance from a care-ethical perspective that not only researchers but also participating children, their families and their communities gain from involvement in a given study. However, collecting data from marginalised groups merely for scientific knowledge production and the advancement of academic careers remains commonplace despite extensive criticism (e.g., Mackenzie et al., 2007; Shanks and Paulson, 2022; Spyrou, 2024). More than two decades ago, Jacobsen and Landau (2003, p. 185) formulated the "dual imperative": Research on people affected by armed conflict and displacement "should be both academically sound and policy relevant". Policy relevance means that findings should influence governmental and non-governmental responses to humanitarian emergencies and help to improve services for vulnerable and marginalised groups.

Yet, even if research is relevant from both a scientific and a policy perspective this does not necessarily mean participants directly benefit from it. From a care-ethical viewpoint, relations between researchers and participants should be characterised by mutuality and reciprocity, which implies that both sides must directly gain from the work underway. According to Zwi et al. (2006, p. 267), "reciprocity implies that the risks and costs associated with involvement in research are offset by tangible benefits to participants". Particularly when conducting research in contexts of poverty, violence and conflict, it is unethical to merely document hardship and suffering without offering some benefit in return that could help those concerned to cope with these difficulties and improve their situation (Mackenzie et al., 2007).

Consequently, the dual imperative should be expanded so as to become a "triple imperative" instead: research should not only be academically rigorous and policy relevant but also pertinent and beneficial to all involved (Krause and von Denkowski, 2020).

This is by no means to say that *all* research must fulfil these three conditions. Yet applied research, and particularly studies involving conflict-affected children, should pay particular attention to ensuring that the latter can also derive direct benefit from their participation therein.

There are a variety of ways in which this might happen. First, participation itself can be rewarding when it is fun, gives children a voice and builds their capacity to claim their fundamental rights. As mentioned above, theoretical developments in the sociology of childhood have led to the increasing recognition of children as social actors, capable of understanding and actively engaging with the world around them (James and Prout, 2003). Moreover, in line with the rights-based approach in Childhood Studies (Gal and Faedi Duramy, 2015; Lundy and McEvoy, 2012), scholars have argued that children's right to participate in decisions affecting their lives also applies to their involvement in research (Alderson, 2017). Consequently, a variety of participatory methods have been developed and applied, also in work done with children affected by conflict and displacement (Akesson et al., 2014; Bilotta and Denov, 2023; Câmara, 2025). Providing opportunities for conflict-affected children to actively partake in all stages of the research process can help nurture their life skills and increase their sense of ownership of the work taking place (Berman et al., 2016, p. 27). Although creative and participatory methods are more likely to meet children's own interests and capacities, ensuring meaningful participation is less a question of method than of methodology; any method can, in principle, be used in an ethical or unethical manner. As Bessell points out: "Ethical research with children requires methodologies that support children in forming and expressing their own views freely while ensuring children are safe, comfortable and engaged" (2024, p. 323). There is a core tension, then, between children's right to participation and right to protection from harm, as both enshrined in the UNCRC. It is thus the responsibility of the researcher to balance the two (Bessell, 2024), therewith ensuring that children directly benefit from research done with them.

Second, material benefits may also accrue. These include reimbursement for direct expenses, such as transportation costs, compensation for the time and effort invested, bonuses or tokens given to children as a thank you for their participation, and incentives provided in advance in order to encourage their involvement. Incentive payments, in particular, have been criticised for undermining voluntary informed consent/dissent. Researchers should also be aware that "[a]ny financial dealings in the research context change relationships and impact on the power dynamics already at play" (Graham et al., 2013, p. 88). Paying money to participants is likely to raise unrealistic expectations which researchers are unable to fulfil for all participants and over a longer time period (Vervliet et al., 2015).

Remuneration is ethically justifiable, however, when children's participation is associated with a loss of income. This could be the case, for example, in instances where the family economically depends on what is earned by offspring (Porter et al., 2010). In any case, the specific sociocultural context to hand should be considered carefully when determining what form any payment or compensation offered for children's participation will take. Accordingly, types and amounts hereof may vary across localities—even within the same research project. In the Young Lives study, for instance, project teams in Ethiopia, India, Peru and Vietnam handled compensation differently—some paid participants, some bestowed small thank-you gifts and others encouraged children to buy school materials with what they gave them. Local staff also provided schools and community centres with supplies where supporting institutions seemed more appropriate than giving to individual children (Crivello and Morrow, 2021; Morrow, 2013).

Third, there are also immaterial forms of compensation by the offering of which researchers can nurture caring reciprocal relationships with the participating children. These include personal support, such as helping with schoolwork or organising fundraising campaigns (Câmara, 2025), or referral to professionals and formal services able to provide advice and guidance (Vervliet et al., 2015). Yet, scholars should also recognise the limits of their responsibility and "refrain from adopting a 'saviour' position" (ibid., p. 12), in order to avoid creating dependencies and negatively affecting children's agency and self-esteem.

While establishing mutual and reciprocal relationships may be beneficial to those taking part, breaking these bonds once the research is over may cause considerable harm. Especially so in contexts of conflict and displacement, where children are likely to have already experienced the loss of or separation from figures of attachment and the erosion of social ties (Hart, 2012). Researchers thus must be transparent about the ultimately limited duration of their relationship with the children involved and carefully design appropriate procedures for eventual stepping out as well as following up (Vervliet et al., 2015). Sometimes continuing contact after project completion may not be possible due to ongoing conflict or instability, or because participants have since moved or been displaced elsewhere. In such cases, it is necessary to ensure that children and their families receive certain immediate benefits rather than promising ones which may or may not follow at some vague point in the future (Mackenzie et al., 2007, p. 311).

Fourth, reciprocity should also be considered in the dissemination of findings. Sharing the latter with participants and their communities is, however, still an exception when it comes to work done with young people affected by conflict and displacement. This is illustrated by a qualitative study on refugee youths' prior experiences of participation in research in Kakuma refugee camp, Kenya (Bilotta and Denov, 2023). None of the 31 young people interviewed, who had all participated in a number of previous studies, reported researchers having returned after completing their work to present findings or to campaign for improvement in the situation of their interlocutors living in the camp. In the words of one interviewee: "Of course we expect the researchers to come and return with feedback. Isn't that the whole point of research? … to share the results … but they never came back" (Prossy, cited in Bilotta and Denov, 2023, p. 140).

As such, sharing results is crucial for reciprocity but only if it is done in an appropriate manner. One way of increasing core relevance to the local communities involved is to present the obtained findings in their native language(s) and in formats which are practice-oriented and understandable to non-academic audiences. In the Young Lives study, for example, the research team in Peru created leaflets of the findings and distributed them to all participants, held discussions about nutrition in communities

and organised a travelling photo exhibition (Crivello and Morrow, 2021, pp. 25–26). In a participatory needs assessment I conducted for UNICEF with youth from post-conflict areas in Papua New Guinea and the Solomon Islands, the youth co-researchers presented our findings in the form of poems, songs and role plays to community members and local authorities. Yet, dissemination strategies which actively involve research participants and local communities pose additional challenges and risks when it comes to work with conflict-affected populations. The latter are sometimes difficult to access due to ongoing security risks and processes of forced migration (Akesson et al., 2018), making it difficult for researchers to return and give feedback. Moreover, as noted above, anonymity and confidentiality cannot be guaranteed if the communities, households and individual children involved can be identified, as in the case of young people presenting the findings of participatory research to their home communities. Nevertheless, from a care-ethical perspective and per the triple imperative, it is important to establish appropriate and viable channels by which to offer meaningful feedback to participants regarding obtained findings.

In sum, ethical research in conflict zones implies ensuring that children, their families and the local community somehow benefit from participation. Choosing suitable options may be difficult prior to project commencement, though; establishing reciprocal relationships is, similarly, a non-linear process with unpredictable outcomes. Moreover, researchers and participants may have different views on what "benefit" and "reciprocity" should even be taken to mean. It may be useful to include negotiations on reciprocal benefit in the iterative procedures of *Do No Harm* analysis (Anderson, 1999) and ongoing informed consent (Mackenzie et al., 2007). In this way, researchers can also repeatedly explain what they and their work can and cannot deliver, thus minimising misunderstandings which lead to the breeding of disappointment and mistrust. A reflexive care-ethical approach can thus not only be useful in dealing with unforeseen ethical challenges but may also help to prevent them from arising in the first place.

Doing ethical co-reflexivity

As the above examples have shown, implementing moral principles in research practice is by no means simple. Nor can one's ethical approach be fully planned from the outset. Rather, scholars must be sensitive to "ethically important moments" (Guillemin and Gillam, 2004) throughout the entire research process and carefully reflect on their options, limitations as well as responsibilities in such instances. Thus, adopting a critically reflexive stance is necessary from research planning and design through data collection and analysis, writing and dissemination.

However, ethical reflexivity must not be understood as a purely individual activity assigned to the researcher alone. Self-reflexivity has its limits because one's own subjectivity cannot be completely transcended. A person can reflect on his or her own positionality and its potential impact on research, but this reflection is itself influenced by said positionality and thus always of a subjective nature (Savolainen et al., 2023). To interrogate how the researcher's positionality is read by others and how this affects what will ensue, bringing other individuals into the process of reflection is essential (Soedirgo and Glas, 2020). Moreover, since ethical dilemmas are characterised by the complex interaction of multiple different factors, an array of perspectives are needed here. From a relational and care-ethical outlook, such reflexivity is a practice which can only take place in relation to and interaction with others. These may include research participants, co-researchers, local cooperation partners and also external experts.

Collective ethical reflexivity can take several forms: Within projects, it can occur during regular team meetings or on specific occasions in the wake of ethical concerns or dilemmas having arisen. I call this "ethics peer counselling", as it involves co-researchers working at a similar hierarchical level in the current project. Another form is "ethics supervision", which consists of external advisors providing guidance to individual researchers or teams as a whole. Advisors who are not part of the project itself can bring new and vital perspectives to bear, especially as regards serious ethical dilemmas. A third form of collective ethical reflexivity can be applied in transdisciplinary and participatory projects, where "advisory boards" or "reference groups" formed of members of the target audience or the local community participate in planning, steering and monitoring the research process. Such advisory boards can also be systematically involved in discussing ethical issues (e.g., Ellis et al., 2007). Moore et al. (2016), for example, engaged young people in reference groups which were tasked with critically assessing and giving advice on their proposed research questions and methods, as well as on sensitive topics like intergenerational power inequities. Drawing on their experiences of involving child reference groups in a number of research projects in Australia, the authors call for "co-reflexive practice":

> *[A] process through which researchers and children and young people can take a step back from the research and reflect critically on the assumptions that researchers and participants bring to the practice of research, how participants are engaged in the research process, how data are gathered, analysed and interpreted and how new theories are created.* (Moore et al., 2016, p. 242)

This co-reflexivity approach has also been taken up in research on war-affected and displaced children (e.g., El Gemayel and Salema, 2023). In a similar vein, Abebe and Bessell have called for a "participatory research ethics" (2014, p. 131) which actively involves children in reflection and decision-making processes about issues such as informed consent, confidentiality and compensation. There already exist several guidelines and lists of questions for doing ethical self-reflexivity in qualitative and participatory research with children (e.g., Loveridge et al., 2024; Warin, 2011); these could be easily adapted for use in collective reflection settings.

Given the complex ethical challenges faced when children affected by armed conflict are involved, it is imperative to systematically develop and establish structures and procedures for collective and participatory ethical reflection throughout the research process. An elaborate model of ethical co-reflexivity should therefore be an indispensable part of any research

proposal and requested by ethics committees as standard practice. Depending on project type and context the design of such models will vary, but regardless being adaptable and flexible from beginning to end is essential. Accordingly, existing ethics review systems need to be made more dynamic, allowing for updates and revisions over the course of the research process after a priori ethics approval (Hammett et al., 2022). Moreover, research institutions and funding programmes must provide sufficient time and resources for the planning and implementation of appropriate, context-specific forms of ethical co-reflexivity.

This is no panacea, however. Ethical dilemmas in research with conflict-affected children do not simply dissolve away because a group of people have decided to jointly reflect on these matters. Doing ethical reflexivity is not inherently equatable with "doing it right". Given the complexities of carrying out academic work in contexts of conflict and displacement, researchers can never entirely avoid harming participants or making choices and decisions which later prove to be problematic despite their best intentions and continuous reflection. Nevertheless, ethical co-reflexivity cannot and must not be dispensed with. Drawing on Pillow's notion of a "reflexivity of discomfort" (Pillow, 2003, p. 192), I propose the key value of an "uncomfortable" ethical co-reflexivity: that is, a practice aware of its limitations and cognisant of its failures, but without simply accepting them. Respecting children's dignity and rights and safeguarding their wellbeing must be the ultimate goal of any research involving them, even if that may not always be accomplished.

Conclusion

Despite the numerous, protracted armed conflicts currently raging worldwide, we still know little about their impact on children's lives. Research on the living situations, vulnerabilities but also the resilience and agency of children affected hereby is thus needed for the development, implementation and evaluation of appropriate policies as well as prevention and intervention measures. However, conducting research on and with children who live in or have fled from conflict zones poses various ethical challenges, which may arise at any stage of the research process and in unexpected ways. While procedural ethics—in the form of codes of conduct and formal review procedures—is of great importance as it emphasises the researcher's obligation to uphold fundamental moral principles and human rights, it is not a sufficient means in itself of dealing with the concerns and dilemmas manifesting when working with conflict-affected children.

Scholars need, in addition, to adopt ethical mindfulness, meaning becoming aware of "ethically important moments" during the research process. Moreover, they must continuously reflect on their own positionalities and preconceptions about children and childhood, and the impact hereof on their work. The principle of ethical symmetry can serve as a useful starting point for said reflection, as it helps avoid essentialising the identified differences between children and adults while paying attention to the former's own individual and context-specific experiences and perspectives. Ethical symmetry also implies recognising children as social actors who are capable of actively participating in research and to whom the same ethical principles apply as to their adult counterparts. Viewing children as social actors in research also foregrounds the importance of relationships, not only between researchers and participating children but all involved actors indeed. Given the power dynamics present in research with conflict-affected children, it is crucial not only to be aware of such inequities but also to ensure they are not reinforced through one's scholarly pursuits.

I have proposed care ethics as a useful theoretical lens for reflexivity vis-à-vis research with conflict-affected children, because it aims at building mutual and reciprocal relationships with a view to preventing harm and promoting human flourishing. Using the examples of three principles of research ethics, namely informed consent, harm prevention and reciprocity, I have shown how a reflexive care-ethical approach can help deal with the manifold challenges which may arise when trying to implement these principles in working with conflict-affected children. Reflexivity grounded in care ethics is by necessity a collective and continuous endeavour, involving an array of different actors throughout the research process, from initial planning to the eventual dissemination of findings. Ethical co-reflexivity can take several forms, such as ethics peer counselling, ethics supervision or advisory groups. Depending on the specific topic, methodology and context to hand, one or more of these prospective forms may be suitable. The prerequisite here, however, is that research institutions and funding programmes provide appropriate resources and conditions for such processes of collective ethical reflexivity to be realised. In sum, although co-reflexive and care-ethical approaches do not provide ready-made solutions to the dilemmas inherent to research involving conflict-affected children, they can at least contribute to these challenges being addressed in a responsible manner.

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