

Ethics in ethnography. Anthropology confronted by its “little demons” (examples from Latin America)

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Résumé :

La question de l'éthique ethnographique, plus ou moins volontairement mise en œuvre par l'anthropologue, est envisagée dans ce texte à partir de quatre terrains différents. Ces terrains renvoient à des scénarios dans lesquels les enfants et l'éthique occupent au départ une place plus ou moins centrale dès le départ. À chaque scénario ethnographique (« complice », « interventionniste », « attentiste », « participatif ») correspond un ensemble de postures épistémologiques de recherche différentes. Après avoir discuté ces scénarios et les postures qui s'y rattachent, la question de la singularité ou de l'universalité de l'éthique, et des conséquences de son application dans la recherche est débattue. Le problème plus général de la convocation de l'éthique en anthropologie sera finalement posé.

Mots-clés : Éthique, place de l'enfant, posture épistémologique, rôle du chercheur, scénarios ethnographiques

Abstract :

Implemented more or less voluntarily by anthropologists, the issue of ethics in ethnographic studies is considered here from four different fieldwork sites. These fieldwork sites represent different analytical scenarios in which children and ethics are initially involved. Each ethnographic scenario (“complicit”, “interventionist”, “wait-and-see”, “participative”) fits into a different epistemological stance. After discussing these scenarios and the related postures, the singular or universal dimensions of ethics will be debated, such as their consequences for research. The more general problem of ethics in anthropology will finally be tackled.

Keywords : child's place, epistemological stance, Ethics, ethnographic scenarios, researcher's role

Introduction

It may seem surprising that the words “anonymous”, “discretion” or “respect” are not employed by Marcel Mauss in his *Manual of Ethnography*, published in 1926. The status of the informant in his own society and in relation to the ethnographer are not addressed. We can draw the same conclusion for *Notes & Queries in Anthropology*. Originally published in 1874, the following six editions omitted these issues. More recently, with the exception of a few works in sociology or educational sciences¹, research guidelines, handbooks or manuals make only very general mention of the relations between ethics and children: most remarks are centered on specific recommendations such as “informed consent” and “protection of research respondents”². This relatively new orientation apparently places research on children within the protective framework of the Universal rights of the children³. As ethical standards have evolved, they have focused increasingly on granting greater control and agency to the would-be subject of the research (James 2009, Hanson & Nieuwenhuys 2012).

What do anthropologists working with children mean by “ethics?” Clearly, the meaning of the term is more or less restrictive, and its forms of assessment more or less stringent, if it is based on philosophy, medicine or law (Grodin & Glantz 1994). For decades, medicine has obviously been a source of inspiration – and a mode of control – for the various ethics protocols emerging worldwide in anthropology, and which tend to make research more “reflexive” and “responsible” regardless of the context (see Razy in this issue). And there is no doubt that the increasing interest for children in the scientific and public arena favors the debate, controversies and international initiatives on the theme⁴.

Recent debates in the social sciences explore the extent to which children can – or can’t – be regarded as ordinary informants, focusing on concepts such as “vulnerable child”, “incompetent child” or “powerless child”, and discuss the practical and methodological consequences of these conceptualizations on research (Morrow & Richards 1996). The biggest issue here is “informed consent”; can children too young to understand the nature of the research actually give “informed consent?” The debates clearly emphasize the problem of what Christenen & Prout (2002) call the “ethical symmetry” when working with children. The paper presented here aims to discuss the possibility – or not – for the anthropologist to follow an “ethical line” adapted to his/her fieldwork and to the perceived “best interests” of young informants. Ethnographic fieldwork experiences undertaken in Latin America will support the discussion.

Historical account: a view from France

In the 1970s, some anthropologists – such as Asad (1973) or Copans (1975) – saw in pre-war anthropology its unmentioned but profound alienation or explicit submission to the administrative and political interests of colonial empires⁵. After a period of self-criticism, a number of publications have emerged on the “ethnographic relationship”, i.e. the “(...) unequal relationship that develop between the interviewer and the interviewees” (Fassin 2008: 9). Questioning the place, role, and status of the ethnographer in the society under study has produced critical and reflexive works, both on the practice of the founding fathers as well as contemporary anthropologists (Leservoisier ed. 2005)⁶. These relatively recent questions, which refer more fundamentally to the epistemological conditions that underlie the existence of “anthropological knowledge”, have become a major

concern of the discipline (Sperber 1982, Vidal 2010). Nevertheless, in spite of these discussions within the framework of “ethnographic relations”, ethics in relation to research with children remains poorly documented in France (Buchillet 2002, *Autrepart* 2003 special issue).

Aside from the case of France, what can be the reasons of such limited attention to ethics in ethnography with children? Etymologically, ethics refers to both formal rules and practices. However, anthropologists often “practice” ethics without knowing it, especially keeping names, places or dates anonymous in order to preserve the confidentiality of their informants. For decades, this informal use refers to an orally transmitted code of conduct during the academic training of the anthropologist. This transmission is about “minimum research ethics” or “the respect of informants privacy”. But the problem, reminds Fassin (2008: 12) – who is both physician and anthropologist – “(...) is that anonymity does not guarantee privacy and neither of them is obvious, especially in a universe of social acquaintanceship” (see also Béliard & Eidelman 2008).

In anthropology, it is in the United States that explicit ethical questioning has been built, following controversies raised by such famous works as *The Children of Sanchez. Autobiography of a Mexican Family* of Oscar Lewis (1963) or *The Mountain People* of Colin Turnbull (1972). In some cases, such as the “Tierney issue” in the late 1960s, teams of doctors, including anthropologists, are accused of pretending to ignore the anti-ethical social consequences of blood samples on Yanomami populations of Brazil (Albert 2001 and 2003, Brohan 2003). Simultaneously, people depicted in ethnographic accounts sometimes react strongly to the writings about them (Vine Deloria 1969 for Amerindians; Linda Smith Tuhiwai 1999 for Maori of New Zealand).

In some countries, such as France, conflictive fieldworks where the anthropologist is “endangered” (Agier ed. 1997) have questioned the problematic dimension of ethics in the ethnographic approach: such as in the case of the confrontation with HIV (Dozon 1997, Gruénais 1997), marginal urban practices (Werner 1995, 2007) and political violence (Suremain 1997). The researchers involved in these situations raise the problem of the rationale for an ethical concern in ethnography, and for whom. Is the purpose to control research in order to protect the researcher? Is it to protect the people under study? Or to do both at once? To protect the populations among which they are working and to protect themselves from later accusations of unethical conduct from the subject populations or colleagues, anthropologists have progressively adopted a series of formal “good research practices” (ASA Guidelines 1987) more or less consciously.

Since the Second World War, international protocols⁸ have gradually been established along with ethics committees, whenever research on a “human subject” is envisaged. Inspired by the North American model, Brazilian and Australian ethics committees, for example, are involved both in the building of research, along with its development and the treatment of results (Bosa 2008). This is one of the reasons why a “research permit” is compulsory in these regions. Its issuing may last several months and constitutes a real constraint for a funded research project, particularly in the area of international development⁹.

The problem of ethics in ethnography is even more acute when children are involved. The very close, personal nature of ethnographic work, which often leads to a strong physical and affective relationship to the informant, requires more attention. This is obviously the case for “participant observation”¹⁰ which can lead to a series of ambiguities and misunderstandings in relation to children’s rights (Fine & Sandstrom 1988, Mayall 2000). In particular, the asymmetry regarding the relations of power and authority lead anthropologists to adopt very sensitive research practices. In

a context of growing media coverage, but also increasingly complex legislation to protect children, the issue of ethics in ethnographic research with children is deeply questioned and tested. This is probably even more problematic in the context of developing countries where children – because of their supposedly strong dependency and the lack of legislation – are more likely to be “used as guinea pigs for the people of the North” (Bonnet 2003: 8; see also Grodin & Glantz ed. 1994 on related problems of research, ethics and law).

Four scenarios from Latin America

I would like to distinguish four types of ethnographic situation in which I was – as an anthropologist who works on childhood and children in developing countries – directly confronted with ethical issues. Of course, my intention here is not to lock anthropologists in one or another of these ethnographic situations. First because none of these situations are mutually exclusive and secondly because these situations are not ideal types in the Weberian sense of the term. They are rather operative “scenarios”, not representative or universal at all, which aim to enlighten a variety of specific ethnographic situations that might appear during fieldwork where children play a significant role. Far from being isolated, these scenarios are entangled with each other.

The place of ethical protocols in the different fieldworks described here is variable (Guatemala, Bolivia and Peru). In Guatemala, no particular research permit was required. At that time (1985-1988), in spite of the first presidential election in 1985, the country experienced a particularly tense political climate severe armed conflict between opposing social groups (civilians, militaries, guerrillas, unions, old and new Christian churches...). All public political and military efforts were focused to avoid full-scale war. Children’s right and protection was of little concern. In particular, the most productive agricultural region of the country in which I conducted my doctoral fieldwork¹¹ was not concerned by ethics at all.

In Bolivia and Peru (1998-2003), no formal research permits were required, either. In Bolivia, the collective multidisciplinary research on child health I was involved in was conducted in the conflicted Amazonian rural region of Chaparé where most of the illegal cultivation or trade of coca leaf was taking place. Local authorities essentially warned the scientific team orally not to refer to any kind of activities related to coca; so that the team took the initiative to present a short general protocol in order to formalize its legal presence in the region. In Peru, the same scientific team had to validate and sign a short and simplified medical-oriented ethics protocol only applicable locally and issued by the regional medical administrative authorities. Only valid for the urban area of investigation concerned by the study (northern Lima), the protocol didn’t allude to children in particular – but to patients in general.

Scenario 1: “complicit ethnography”

The first scenario refers to what might be called “complicit ethnography” with all the ambiguity implied in the term. Actually, complicity refers to a situation where the questionable individuals and things we know about are kept silent voluntarily. This situation is very common for the many anthropologists who have faced one or another form of child labor when doing their fieldwork (Nieuwenhuys 1996, Bonnet & Hanson *et al.* 2006). At first level, the formal legality or illegality of child labor in a given context raises classic questions: is child labor some kind of socialization which is part of a more general social and cultural integration process of the child to local society?

Or is it just outright exploitation, i.e. some kind of disguised activity that only benefits of adults? The issue at stake here is important not only for academic researchers, development agents and Ngo's - which are supposed to act for the strict benefit of children -, but, obviously, for the children themselves.

In the large coffee plantations of Guatemala (*fincas*) where I was conducting my doctoral fieldwork, I was confronted by this situation¹². Even if I did not consider the problem of child labor in terms of socialization vs. exploitation - incidentally, an adult-centric approach -, there were yet ethical questions that demanded attention¹³. For me, the issue was not strictly academic in terms of comprehension: I had to consolidate my unstable position of researcher in the particular context of the capitalist coffee plantations. On the one hand, I had to calm the huge concern of the landowner (*finqueros*) about my eventual political intentions; on the other hand, I wanted to establish a long-term trusting relationship with the local coffee wage-laborers (*rancheros*) who resided permanently in the *finca*, including their children.

At coffee harvest time, which runs from May to October according to altitude, many girls and boys, mostly aged 6 to 12 years, picked cherries that littered the ground of the coffee plantations. Of course, I knew that the Guatemalan Labor Code prohibited the remuneration of children under-15. When I asked children "what are you doing in the coffee fields", they replied that they were "finishing the work...". Practically, each child was giving the fruits of their harvest to a *ranchero*, a "real" coffee worker (always an adult, generally a man) who poured them into his own coffee bag. Once the bag was full, it was weighed in the coffee factory and the *ranchero*, who was paid per kilos of coffee harvested, thus increased its own earnings. Nevertheless, the redistribution of the earnings within the worker's own entourage was not questioned by children.

In this kind of situation where a Labor Code is formally respected, I felt I was complicit with children who often skipped school to "finish the job" - as they put it. I was also accomplice to the many disputes between children to take over the portions of the *finca* where coffee beans abounded most. I was also complicit with the adult *rancheros* who considered the harvest of children as a "normal contribution" to the family's work or implicitly as a sort of rite of passage that transformed them into "good workers" (Suremain 2000). I was also complicit with the *finca* supervisors and the schoolteachers who closed their eyes to the exploitation. They did not intend to punish children who were perceived as "normal kids" in as much as they were trying to fight for the survival of their families. Lastly, there was the *finquero* who, although well aware that child labor laws were being violated, decided not to interfere in what he called "small arrangements among them [the working population as a whole]".

When I first faced this situation, the issue for me was the following: should I speak out - and to whom - or say nothing? By keeping quiet, I persuaded myself to adopt a code of ethics to "protect" all my informants, and not only children. Now, if the Labor Code was formally respected - children were not paid -, that of the Rights of the Child for education was not. Actually the rights of the child were being hijacked by the same people who were supposed to benefit from it. However, I don't know if it would have been more ethical to say what I knew. Would it have been more ethical to face all the people involved in this kind of passive collusion? In addition, as long as the children were unable to speak on their own behalf, it was much more the responsibility of adult caretakers than mine to denounce the situation. More fundamentally, as it was the people's (including children) will to involve children in the harvest, "blowing the whistle" may have done more harm than good.

By choosing to continue my fieldwork, rather than attempting to recruit political and legal aid in ending the employment of children, I actually protected myself. I only realized the methodological and analytical implications of such a choice much later in my career, through my publications (Suremain 1996a, 1996b, 2000). Obviously, the effort to render anonymous people and places could not apply to the ethical problem sets. Actually, despite the numerous publications on children's work in the social sciences, only a few authors have looked at the ethics of analyzing the phenomena¹⁴.

Scenario 2: “interventionist ethnography”

The second scenario refers to what might be called “interventionist ethnography”. Although very different, it can't be simply understood as a complete opposition to the first scenario that could be interpreted as a passive or laissez-faire. Actually, interventionism consists for the anthropologist in acting immediately, in the heat of the moment, in order to influence the course of events. The purpose is thus not only to condemn a practice but to try to reorient a practice to benefit social actors - in this case children. Many anthropologists have experienced severe dilemmas, particularly when investigating diseases, hunger, domestic violence or suffering which may lead to death among children. But very few of them, such as Scheper-Hughes (1987, 1992, 1995), are deeply engaged in “militant” anthropology and focus their attention on the ethical dimensions of interventions. Beyond this position, there is a more general project of reinforcing an “ethically grounded” anthropology on the horizon.

Between 1998 and 2003, I conducted a multi-site and long-term ethnographic fieldwork on malnourished children in the context of an international collective research-project on under-five child health growth and development¹⁵. Because of the multidisciplinary perspective of the research, anthropology was only one scientific component of the research - although central - between medicine, pediatrics, public nutrition, epidemiology and public health... Before starting the data collection in Chaparé, the rural region of the Bolivian Amazon where the research was implemented, the scientific team leaders (including me) were invited to attend a meeting with the local political authorities. The aim of the meeting was to clearly define the limits beyond which attempts at scientific research would become politically counter-productive. The watchword was to strictly avoid talking about coca leaf, whether its production, trade or medicinal use¹⁶. At the end of the meeting, the scientific team suggested that local authorities sign a short ethics protocol that mentioned the obligation for the health professionals to provide medical assistance to local children “if necessary”. No other requirements were drawn to the conduct of the research.

Once the research was underway, I regularly encountered malnourished children. Initially, I had learned to recognize the most frequent and visible symptoms of child malnutrition by observing my medical colleagues in the field. For me, accompanying them during the nutritional surveys was highly informative some doctors took responsibility, once the health measures were gathered, to take steps to place the child in appropriate medical facilities and others did not. I obviously could not evaluate the merits of their decisions. However, I felt that the ethics protocol all researchers had approved was in some cases considered as a real burden or a disincentive for some of them. Particularly when the parents of a sick child wanted immediate care to be provided. Some doctors felt they were obliged to provide medical care; some other didn't consider it “necessary” - to use the term mentioned in the protocol.

As I was interviewing an old woman on the transformation of child feeding practices, I faced a very uncomfortable situation. A two-year old girl, sitting on the floor of the patio, interrupted the

interview with cries. As I went to see if she was hurt, I immediately noticed the usual signs of malnutrition on her body. A very young woman suddenly appeared to pick up the little girl and to get her in a small separate room near the family kitchen. Before getting back to my interview, I unsuccessfully tried to gather information on the child from the young woman I assumed was the mother. The old woman didn't comment on the child and its supposed mother. As the interview was going on, I definitely felt uncomfortable and guilty of inaction in face of the situation¹⁷.

Insofar as the term "necessity" entered in the protocol was still indefinite, vague and broad, I chose to report to my medical colleagues the case of this girl, as her health showed alarming symptoms of malnutrition. My initiative resulted in immediate medical intervention, in this case a visit of the doctor to the young girl's house. Once there, a complete checkout of the child was carried out as well as a long interview with her mother - including the verification of the compulsory Health Card parents were supposed to keep carefully¹⁸. In that particular case, the child was given food supplementation at home and finally recovered after ten days of treatment.

However, in the long run, I repeatedly put my colleagues in the situation to intervene as I suspected many other malnutrition cases. Gradually, I felt these reports were experienced as interferences by the doctors of the scientific team. Eventually, I was asked politely but firmly to "stay in my place" on the pretext that my warnings were not always justified on a medical basis. Despite these warnings, I opted to pursue my interventionist attitude. I preferred to act, even if uncertain of my diagnosis. In doing so, I have used and abused the ethics protocol by taking it literally. I felt compelled to alert health professionals even if it was to have negative effects on the functioning of the team. I preferred to keep interfering and to face my colleagues' reprimands than ignore particularly unfair and cruel situations.

Scenario 3: "wait-and-see ethnography"

The third scenario refers to what might be called "wait-and-see ethnography" in as much as the attitude here is to postpone an eventual action until the general context and the actors involved contribute to implementation. A wait-and-see attitude assumes that the implemented action will happen by itself once the conditions are right. Although it is clearly a proactive attitude - which requires the anthropologist to have a pretty good knowledge of the context and of all the actors - it also supposes some expectation of the way context and actors will respond¹⁹.

The project described in the previous section (scenario 2) had a geographical research component in Peru, the neighboring country. Although the goals of the scientific team as a whole were similar in both countries, the approach implemented in the second (Peru) was slightly different from the first (Bolivia). For several reasons, the Peruvian researchers wanted participatory-action research to be the prevailing approach. This choice was somehow coherent with their long-term expertise on development research-projects with local populations. Within local populations, participatory or action-research was seen as an opportunity for cultural empowerment and political self-consciousness. In other words, development was in the context a clear path for the improvement of the common good and democracy among its "beneficiaries" (Suremain & Lefèvre *et al.* ed 2003).

For the Peruvian team, the ethnographic analysis of the uses and perceptions of the child Health Card was a key point to reach a global comprehension of child growth monitoring and health development. It was crucial to seek the views of all caretakers involved (parents, family, neighbors, health professionals...). The choice of exploring the Health Card uses and perceptions was justified

by the fact that the local population was anxious to improve the doctor-patient relationship at the health centers. By doing so, improving the Health Card and its use by health professionals would consequently benefit patients – including children who receive medical consultation. However, the research project came into conflict with the ethics protocol agreed to by the research team. Actually, Peru was experimenting with a vast restructuring of its national health system, and it was understood that all actors agreed to work together to help the process. But the analysis and critique of the Health Card by the research team was not timely but, rather, unwelcome.

The inflexibility of the protocol had been initially discussed within the research team and then with local health professionals. In order to circumvent the ethics protocol, the anthropologists of the team (including me) proposed to our colleagues to hold discussion sessions (called *grupos de discusión*) with the various actors focusing on topics related to health care. The idea was to adapt discussions to the topics that emerged from informal interviews. Over a year, 20 successive *grupos de discusión* brought together local health professionals, mothers of under-five children, fathers, single mothers and, teenagers of both sexes in order to discuss collectively the topics each wanted to address. The process allowed the gathering of rich and diverse information complementary to that gathered through individual interviews and participant observation. At the end of the process, the idea of writing a manual of children’s rights (*Manual de los Derechos del Niño*) was jointly proposed. In practice, the *grupos de discusión* had been previously recorded and transcribed by researchers, and then discussed, completed and approved by the actors concerned.

Among the topics actors wanted to discuss collectively was the Health Card issue. Many practical and conceptual aspects were subject to criticism, and thus to proposals for improvement. In its final version, the *Manual* emphasized what particular care and attention to children under-five should be; it also pointed out what patients were supposed to expect and receive during medical consultation. In the *Manual*, non-medical issues related to the professional conduct of health professionals, such as “respect”, an attitude they should adopt when addressing patients – particularly children.

Writing of the *Manual* overcame obstacles posed by the ethics protocol without jeopardizing the Peruvian health professionals of the research-project. Recommendations for the Health Card were embedded in a broader debate on children rights and efficient/effective “good care”. The objective was to avoid possible clashes with medical local authorities. On the contrary, insofar as the *grupos de discusión* finally helped the health professionals to understand better the various actors’ concerns and the local context, they participated with great enthusiasm in the redaction of the *Manual*. The ethics protocol they had approved and signed was not violated.

Considering this scenario, it is obvious, after the fact, to assert that the adoption of a wait-and-see attitude was a better option than direct interventionism. It appears that a standardized and limiting medical ethics protocol can be “manipulated” or at least circumvented and diverted by the self-same actors that contributed to its strict application in the first place. Now, the flexibility of medical researchers in the project was made possible through the participative orientation of the research. Without such strong and militant methodological and political oversight, it is likely that this “wait-and-see ethnography” would never have emerged.

Scenario 4: “participatory ethnography”

The fourth scenario refers to what might be called “participatory ethnography” that exemplifies the highly unusual case where both the anthropologist and the children construct, develop and implement

a research-project all together - including the collecting, analysis, interpretation, promotion and dissemination of the data. In participatory approach, the active cooperation of children is driving the whole process. The research obeys the conditions set by children. The participatory approach with children has been heavily promoted by psychologists. Until recently, and to a lesser extent, anthropologists have also implemented this approach²⁰. The interdisciplinary field of Childhood Studies, promotes the importance of having a critical and reflexive understanding of ethics, power relations, child dependency and the voice of the children that are at stake in ethnographic fieldwork (Meloni & Vanthuyne *et al.* to be published).

I clearly experienced the ethical issues of “participatory ethnography” when I was living in La Paz (Bolivia) between 1998 and 2003. Viewed as an anthropologist with expertise on children (see scenarios 2 and 3 above), I was invited by a professional photographer - specializing in local social matters (jails, psychiatric hospitals, urban minorities...) - to help to develop a “humanitarian intervention” with street children. The idea was very vague, but the project (*Luz de Esperanza*) was supported by an emerging rehabilitation program, with some financial support, managed by a Catholic sister of Peruvian origin. I proposed in return to provide my services to the project in building a participatory action-research project “with” and “for” the 15 to 20 street children already involved, while conducting an ethnographic study “on” them. The aim of the process was to integrate children into some activities that would bring money to the rehabilitation project. The activities were to be defined during the project by children themselves. In this context, no particular interest in ethics - save my own - was weighing on the project.

Ethnographic fieldwork did not begin by observing children in the street because children simply did not want to participate²¹. The children preferred that the photographer take portraits of each of them, displaying their wounds from street fights. The idea was not to exhibit cracked bodies, scars, misery, injury or pain in order to gain pity or sympathy - or on the contrary to provoke fear or respect. It was intended, as they said, to make their “best part” known. The long-lasting shooting sessions yielded extensive comments on the part of children. More than simple anecdotes, children’s street stories were starting points in as much as they helped to make connections between the picture’s meaning and their more global social condition as street children. At this particular moment, I remember I was starting to think about the ethical dimension of the fieldwork. More or less clearly, I felt that the very harsh pictures taken - which could easily be condemned for their intrusive dimension - had achieved a greater and much more subtle meaning. Due to their important social significance, the pictures were given a deeper dimension.

The ethnographic fieldwork went on with the recording and/or the writing of the children’s life stories. Children unable to write were helped by those who knew how. Others wanted to be recorded as they were drawing particular events in their lives. Once the life stories and drawings accumulated, I started to build an “analytical frame” with the children. The idea was to help children to identify some guidelines for an in-depth discussion on their present life in the street. A dozen in-depth interviews were then conducted. Topics discussed included social relations in the street, food and health, violence and theft, drug taking and alcohol, family status and future prospects. It was only after a lengthy period of interaction that I was invited to accompany children in the street for a limited time. Children didn’t want to share any activities with me in the street; their intentions were more to test whether I could be trusted. As they pointed out, I had to “risk myself” in order to reach out to them. Only after trust was established could children reveal the very rough details of their daily lives²². Furthermore, all observations I realized on my own were presented to children for discussion, commentary, and precisions in context. This shared activity helped to strengthen the

participatory dimension of the project. Ethics was not at this point an issue, but rather to continue to build this very unique “ethnographic encounter” (Christensen & Prout 2005).

The idea of publishing a photographic book together with the stories and pictures of the street children was the result of these participatory activities and collective discussions. Children actively participated in the designing of the book, including its composition, colors and size. “To make money” was certainly a major goal when children chose this activity to support the rehabilitation program. Indeed the 500 copies of the book have been sold within a short time to the local embassies, consulates and foreign colleges. But, beyond money, it is obvious children have appropriated the book and gained “empowerment” by the means of its dissemination and sale. In this context, I understood that making money out of the book was not unethical at all. On the contrary, it was part of the process of empowerment that children enjoyed. In a more general way, “participatory ethnography” reveals the value of an ethical approach that develops during the research project “from below”. For me, the issue was to allow children latitude to identify what they wanted to achieve. For children, the only real ethical issue was to verify that I was trustworthy and that I would accept that what they could offer was valuable. In view of the above, it can be assumed that children are highly capable in dealing with ethical issues.

Conclusion - towards an anthropological convening of ethics

The four scenarios I have described in this paper are not exclusive and frequently overlap or shade into one another; they may also be continuous within the same research. Whether complicit, interventionist, wait-and-see or participatory, these different ethical issues do not cover all concrete and possible ethnographic scenarios. As I have tried to show, the aim of the analysis is to describe and explain my experience as an anthropologist facing the ethical issues that arise in working with children in different contexts. However, from these specific scenarios, I assume that broader epistemological issues in anthropology emerge and merit further discussion.

Many researchers have suggested guidelines - which they make more or less exemplary - for enhancing their research and solving potential conflicts that occur between them and children during their fieldwork. In the literature, both the general attitude and the epistemological stance of the anthropologist have been thoroughly discussed. The challenge is to move from the philosophical and humanistic discussion of ethics to the concrete constraints inherent in an ethnographic project. This is for example the “least adult role” (Mandell 1988) assumed by the researcher in order to erase differences between the adult observer and the children observed (see also Brougère 2006 for quiet a similar position). Other anthropologists identify informants as “friends” (Fine & Sandstrom 1988) or behave as “non-authoritarian adults” (Corsaro 1985). In adopting the children’s perspective, the researcher assumes children have their own agenda - and thus consider them as subjects (and not as objects) of research (Bonnet 2003). It seems I have combined these two perspectives during my fieldworks.

The general attitude and epistemological stance of the anthropologist also suggests a degree of uniqueness in ethical principles applied during ethnography compared to other forms of research, whether scientific (such as medical ethics) or universal (the International Convention on the Right of the Child)²³. Is there consensus on a code of ethics for ethnographic research with children (Qvortrup 1987: 3)? If so, what does the code entail? If not, can we ever reach consensus through further discussion and analysis of cases like those presented here?

Obviously, the four scenarios discussed here are based on a series of classic epistemological assumptions whose definitions are not so clear-cut in concrete situations. I refer here to the relative position of power of the anthropologist *vis-à-vis* his/her young informants; their proper voice or capacity to respond, to express themselves or to interact with the anthropologist (and adults in general); their agency or possibility to make choices, to take decisions or to negotiate with adults in a particular context²⁴. In three of the scenarios (1, 2 and 3) described, the relations between me, as an anthropologist, and the children were mediated by other actors i.e. adults in particular (parents, health professionals...). It is only the fourth scenario with street children where no additional adult or institutional involvement prevented face-to-face relations between the adult anthropologist and children. To a certain extent, this case is unique and uncommon. In most of the scenarios, anthropologists have to consider ethics issues with children taking into account other agents' perceptions and requirements.

Another general ethical matter concerns the restitution – or feedback – of ethnographic research results to children. Using the four scenarios, two aspects particularly stand out: first the fact that the anthropologist faces children who may or may not be able to speak – whether for physiological or social reasons. Then you have the presence or absence of some adults (parents, referees...) who speak “for” the children. In both cases, the question is what kind of information is it possible to return to children? What is supposed to be out of reach of children and what is not? And how to make sure to put it within their reach? These questions raise the more fundamental issue of what is socially and culturally acceptable to return to children in a given case. We may also wonder when does the reporting of research results have to occur: during the research process, before publishing or after? These concerns refer to the various underlying conceptions – never fully explicit – of the children' capability. In as much as anthropological research shows that children are not completely “vulnerable”, “incompetent” or “powerless”, they certainly should play a role in the interpretation and dissemination of research results. Obviously, being “powerless” as a group in society does not mean that children can't appreciate, discuss and challenge scientific results (Alderson 1995).

In fact, it is rather during the “oral” phase of research that children who speak are given voice. They are then allowed to express themselves and explain how they experienced the research, and what, if anything, has changed for them thanks to the research. Apart from publications that include pictures, stories and drawings of children, there seem to be very few options in fully disclosing the data to one's informants. As the research process unfolds, the greatest challenge may be to maintain contact with informants who are peripatetic. Plural or collective signature of publication occurs but it's rather a token of appreciation for the participation of children than inviting them to join as full collaborators²⁵. Rare finally are situations where children continue to ensure the sustainability of activities undertaken by the research after the anthropologist's departure²⁶.

In view of these questions, one thing remains clear: ethics is an historical, social and cultural construction. Codes of ethics are always under review and subject to interpretation and revision. This suggests the need for critical reflection on “ethics relativism” (Massé 2000). We may also wonder if it is constructive to distinguish between “moral rules” (honesty, courage, etc.) and “social rules” (lifestyles, codes of politeness, etc.) such as recommended by Héri-tier & Ameisen (2013). More generally, we may question which kind of “human subject” (Bonnet 2003) is constructing ethical research?

These various questions involve both a concern for better child protection in general as well as a more careful anthropology within the broad ambition to understand children “as they experience

their lives in the here and now " (Morrow & Richard 1991: 92). This ambition might be reached through the anthropological implementation of ethics rather than a formal ethical implementation of anthropology. The anthropologist is finally facing two "little demons": ethical ethnography on the one hand, and children on the other, constantly recall the immense benefits and the unsuspected risks to seal a pact with the one or the other.

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Notes

1 Thomas & O'Kane (1998), Mayall (2000), Hill (2005), Spodek & Soracho ed. (2006), Alderson & Morrow (2011), Boyden & Bourdillion (2011). On epistemological issues of ethics in general, see the special issue of the journal *Desacatos* (2013), particularly the text on the anthropologist's “responsibility” (Sánchez Jiménez 2013).

2 For United Kingdom, see ASA Guidelines (1987); for United States, see the Code of Ethics (<http://www.aaanet.org/issues/policy-advocacy/code-of-ethics.cfm>)

3 This goal appears clearly in Davis (1998) contribution to the debate.

4 See for example, the ERIC project (Ethical Research Involving Children, <http://childethics.com/>)

that provides support and assistance for researchers.

5 Bourdieu & Bensa (1985) even speaks of “missionary anthropology”. See also Leclerc (1972).

6 At the same period, see the works of Stocking (1983) and Fabian (1983).

7 See, <http://www.theasa.org/ethics/guidelines.shtml>

8 Such as the Declaration of Helsinki I (1964) and the International Tribunal at Nuremberg (1947) that requires “informed consent” of the subjects in any research involving human beings.

9 Literature is important on the subject. Among others, see Caplan ed. (2003).

10 For examples of researches based on the everyday observation of children, see Rabain (1979), Nieuwenhuys (1993), Gottlieb (2004), Razy (2007).

11 For an overall analysis of the social-political-cultural dimensions of the armed conflict in Guatemala, see Le Bot (1992) and Burrell (2013).

12 My long-term fieldwork in the coffee *fincas* was one year long (between 1987 and 1988). I regularly visited the country, once a year on average, from 1985 to 1994.

13 As mentioned by Morrow & Richard (1996: 101): “A more social-anthropological approach that allows data to be coproduced in the relationship between researcher and researched, rather than being driven by problem-oriented adult questions, may be useful in child research”.

14 See in particular Boyden & Bourdillion (2011).

15 At that time, I already had a full-time anthropologist position in the IRD (Institut de Recherche pour le Développement) and was thus detached from job research. Before going to Bolivia, I had previously been involved in a study on the same subject in Congo (1995-1997).

16 In as much as coca leaf was frequently used in domestic medicine, such censorship was impossible to meet.

17 A more complete account this experience appears in Suremain (2007). This account is the ethnographic basis upon which I have developed the notion of “nourishing environment” as a methodological and analytical framework to a greater understanding of social and cultural dynamics associated to the development of malnutrition.

18 The health Card is a document supposed to enhance the responsibility of the child’s parents and the health professionals. It contains several charts (weight-for-age; height-for-age); it allows the following of the child’s growth and development. It was issued worldwide after the International Conference on Primary Health Care held in Alma-Ata (ex-USSR) in 1978.

19 On anthropology and development, see, among others, Long & Long ed. (1992), Olivier de Sardan (1997), Berche (1998), Vidal (2010).

20 Actually, participatory action-research emerged in the 70s under the influence of militant development and humanistic urges, particularly in the rural Third-World (Frideres ed. 1992). The approach slowly applied worldwide ant to children and youth (Christensen & James 2000,

Christensen 2004, Bennett 2004, Suremain 2013).

21 This decision is consistent with the choice of doing a research “for” children a research “on” children.

22 Nevertheless children did not want to tackle the topic of sexuality.

23 Signed in 1989 by 192 countries, with the notable exception of the United States of America (and Somalia).

24 Literature is abundant on these assumptions. See in particular Lancy’s critical analysis on the notion of child’s agency (2012).

25 See Lutte (1997) who adds “and Fifty-nine boys and girls in the street” to his signature.

26 And yet, this participation is often ephemeral because, precisely, children grow up and one day cease to be children.