Conducting large-scale mixed-method research on harm and abuse prevention with children under 12: Learning from a UK feasibility study

Winrow, Eira; Edwards, Rhiannon Tudor

Children and Society

DOI:
http://dx.doi.org/10.1111/chso.12658

E-pub ahead of print: 23/11/2022

Publisher's PDF, also known as Version of record

Accepted: 1 November 2022

DOI: 10.1111/chso.12658

ORIGINAL ARTICLE

Children & Society ncb WILEY

Conducting large-scale mixed-method research on harm and abuse prevention with children under 12: Learning from a UK feasibility study

Christine Barter[1] | **Farwa Batool**[2] | **Joanna Charles**[3] | **John Devaney**[4] | **Nicola Farrelly**[1] | **David Hayes**[5] | **Zain Kurdi**[4] | **Annemarie Millar**[6] | **Claire Monks**[7] | **Helen Richardson Foster**[1] | **Lorraine Radford**[1] | **Rhiannon Tudor Edwards**[3] | **Eira Winrow**[8] | **Nicky Stanley**[1]

[1]School for Social Work, Care and Community, University of Central Lancashire, Preston, UK

[2]Manchester Metropolitan University, Manchester, UK

[3]Centre for Health Economics and Medicines Evaluation, Bangor University, Bangor, UK

[4]School of Social and Political Science, University of Edinburgh, Edinburgh, UK

[5]School of Social Sciences, Education and Social Work, Queen's University Belfast, Belfast, Northern Ireland

[6]British Psychological Society, London, UK

[7]School of Human Sciences, University of Greenwich, Greenwich, UK

[8]School of Medical and Health Sciences, Bangor University, Bangor, UK

Correspondence
Christine Barter, Connect Centre for International Research on Interpersonal Violence and Harm, School of Social Work, Care and Community, University of Central Lancashire, Preston, UK.
Email: cabarter@uclan.ac.uk

Funding information
NSPCC (National Society for the Prevention of Cruelty to Children)

Abstract

This paper reports on a feasibility study for an evaluation of a UK primary school-based prevention programme that addresses multiple forms of abuse and neglect, identifying research design and ethical issues and exploring research practice. For this feasibility study, 194 children aged 6–11 years completed a baseline survey and 113 did so following the intervention. Eight focus groups were undertaken with 52 children and nine interviews with school staff. We highlight key considerations for conducting large-scale mixed-method research on sensitive topics with younger children, a focus that is largely absent from the extant research methods literature.

The feasibility study showed that younger children can contribute their views on sensitive topics in ways that are measurable, replicable and reliable, contesting ideas that certain topics are too sensitive to explore with younger children.

KEYWORDS
child abuse, evaluation, methodology, prevention, younger children

INTRODUCTION

Evaluating interventions on harm and abuse for younger children requires careful thought and planning. Often, evaluation of preventive interventions is interested in whether and how changes occur in children's understandings, attitudes and beliefs (Stanley et al., 2015) and theories of change seek to trace connections between such changes and subsequent changes in behaviour (Bergman, 2016). If children's understanding and beliefs are to be explored, it is important to speak to children themselves, rather than obtaining information by proxy since adult informants may impute understandings and attitudes that reflect their own position rather than that of children themselves. A shift towards a recognition of children's rights together with an understanding of children as social actors (James & Prout, 2003) has resulted in an emphasis on children's direct and full participation in research (Dockett & Perry, 2011; Leeson, 2014). Although asking children, especially older children, directly about sensitive issues is now more widely accepted, there is less confidence and a limited knowledge base in respect of such research with children under 12 years and the implications for research design (Alderson & Morrow, 2020).

Consequently, researchers may still experience resistance when seeking approval from adult gatekeepers, especially if the research addresses sensitive issues with young children (Kay, 2019; Powell et al., 2020). Isham et al. (2019) suggest that this is because 'sensitive research' generally involves emotive, private topics which are difficult to talk about due to prevalent social and historical norms. This has been compounded by the traditional view of children, and especially younger children, as constituting a vulnerable population due to their legal status as minors, their diminished social power and the potential risks of their involvement (Martins et al., 2018). One consequence of this conceptualisation has been to undermine children's rights to participate in processes which impact on their lives (Collings et al., 2016). Nevertheless, as Radford et al. (2017) contend, a recognition of children's rights alongside a growing awareness that ethical issues are important but can be addressed, especially if children themselves have meaningful participation in the research design, has reduced some of the barriers to undertaking sensitive research with children. Accordingly, care and attention are required when conducting sensitive research with younger children to ensure that information, processes and content are appropriate and accessible and that no harm is done (Malloy & Stolzenberg, 2019).

Our study was commissioned to evaluate a UK primary school prevention programme that sought to address a wide range of harms, including bullying, abuse and neglect among children aged 5–11 years, and aimed to enable children to recognise trusted adults and to empower them to seek help when they feel unsafe. The full evaluation sought to answer questions about the impact of the programme as well as capture views of both children and teachers on its accessibility

and applicability. The research included an integrated process, outcome and economic evaluation of the programme which allowed for both quantitative and qualitative data to be collected (Stanley et al., 2021a). Data collection methods included a survey for children, observations of the programme delivery, interviews with programme facilitators, school staff and focus groups with children.

This paper seeks to present the learning gained from piloting our research tools and of seeking feedback from research participants about the appropriateness of our research design. In doing so we aim to make a significant contribution to the literature and practise on involving young children in sensitive research.

A Rapid Evidence Assessment (Stanley et al., 2021b) undertaken in preparation for the study identified 28 papers reporting large-scale quantitative or mixed-method evaluations on school-based abuse prevention programmes for children aged 4 to 12 years. Most of these evaluations primarily focused on a single form of abuse, most often child sexual abuse or bullying. Furthermore, as Tutty et al. (2019) state in relation to sexual abuse prevention programmes, 'Virtually all evaluations have been quantitative, seldom allowing children to directly comment on their experiences' (p. 1).

Quantitative evaluations have been undertaken of programmes that target more than one form of harm or abuse for younger children. The US Child Safety Matters (CSM) programme for elementary school children addresses sexual, physical and emotional abuse, neglect, bullying and digital forms of harm, however, Bright et al.'s (2020) evaluation focused on children's knowledge of safe and risky situations which did not encompass neglect. Kenny et al.'s (2022) later evaluation of the same programme consisted of pre- and post-tests consisting of five safety rules applied to different items (statements) which varied by grade, although again neglect was not included. Thompson et al. (2022) conducted a randomised control trial of the Play it Safe! programme which targets sexual and physical abuse for elementary school children.

Only one mixed-method study by McElearney et al. (2021), completed after the REA was undertaken, evaluated a multi-component, whole-school programme, that aimed to teach younger children aged 4–11 to recognise a wide range of abusive behaviours and tell an adult. In preparation for this study, the authors presented a case study (Turtle et al., 2010) describing the process by which 19 children from a special and a mainstream primary school participated in the design and development of the research instruments and data collection procedures. Children were involved in three tasks: critiquing the format and content validity of the chosen outcome measure; devising guidelines for being safe while collecting photographic data; and devising a procedure for matching child and parent questionnaire data.

There is, however, a rich and growing body of literature exploring qualitative methods for research on abuse and harm with younger children (Alderson & Morrow, 2020; Lombard, 2015; Punch, 2002; Renold, 2005). While individual interviews allow children to share personal experiences, focus groups are a commonly used method for exploring children's attitudes and awareness (Adler et al., 2019; Lombard, 2015). Focus group discussions involve interactions between children, enabling them to explore their own and other's ideas and attitudes. The unequal power relationship which exists between the adult researcher and the child becomes diffused in group discussions where children are supported by their peers (Einarsdóttir, 2007). Yet problems can occur in relation to power dynamics among children themselves, which may prevent them from speaking out in a group setting. This is compounded within the school environment where, due to their minority status compared to adults, children may not be used to expressing their views (Punch, 2002). Thus, focus group discussions require skilful facilitation and the use of innovative techniques to empower children to contribute meaningfully. For example, Lombard (2015) used

vignettes to provide context and a starting point for group discussions among young children around their beliefs on the dynamics of interpersonal relationships.

THE INTERVENTION

Speak out Stay Safe (SOSS) is a UK primary school-based programme which seeks to equip children to recognise trusted adults and to empower them to seek help when they feel unsafe. The National Society for the Prevention of Cruelty to Children (NSPCC), a major UK charity, that designed and developed the programme, describe it as facilitating early intervention for children who have experienced abuse, and the prevention of the recurrence of abuse. For brevity, this paper will refer to SOSS as a prevention programme.

SOSS consists of a 30-min school assembly followed by a 1 h workshop for older pupils. Different assembly presentations are delivered to Key Stage (KS) 1 children (aged 5–7) and KS 2 children (aged 7–11) (or equivalent classes), by trained NSPCC staff or volunteers working in pairs. Children are introduced to Buddy, a friendly, green speech bubble, who encourages children to speak out to a trusted adult if they are worried about themselves or a friend and get help when they need it. Children learn about different types of abuse and harm including neglect, physical abuse, sexual abuse, emotional abuse and bullying. The assembly for the older age group also includes domestic abuse. Both age cohorts also learn about Childline, a free UK helpline for children and young people run by the NSPCC. During the interactive workshop, older children explore definitions of abuse in greater depth. They take part in group activities and discuss reasons why children might feel sad, worried or anxious and need someone to talk to. The workshop emphasises that all children have a right to speak out, be safe and to get help if they need it.

THE FEASIBILITY STUDY

Our full evaluation used a matched control design with integral process and economic evaluations. Over 3000 children completed the baseline survey and 61 children participated in focus groups (Stanley et al., 2021a). The large-scale evaluation aimed to answer questions about the effectiveness and cost effectiveness of the programme as well as capture views of both children and class teachers on its accessibility and applicability. The design of the research tools was informed by discussion with the study's Young People's Advisory Group (YPAG) consisting of six young people aged 13 to 16 years. The feasibility study reported in this paper aimed to test the feasibility and acceptability of the methods and tools proposed for the full evaluation. The piloting of the data collection processes and tools was completed in six primary schools (four intervention schools where the programme was delivered and two matched comparison schools not in receipt of SOSS) from September 2018 to January 2019. The six schools were selected from across the UK and the sample was structured to include a mix of rural/urban schools and schools with both high and low proportions of pupils receiving free school meals as a proxy for socioeconomic status. One faith school was included. In total, 194 children participated in the survey at baseline in both intervention and comparison schools and 113 at Time 2 in the four intervention schools.

For the mixed-method feasibility study, children in one KS1 (aged 6–7) and one KS2 (aged 9–10) class in each school completed outcome measures at baseline, prior to SOSS. A follow-up survey was administered in the four intervention schools within 2 weeks of SOSS delivery; this

asked the same questions as well as some additional questions about the experience of completing the surveys.

Children's outcome measures were delivered via the Qualtrics (version 2) App for Android on tablet-based activity books aimed at measuring: knowledge and understanding of different forms of abuse and harm; help-seeking; school culture; and children's health and well-being. A range of validated outcome measures were considered for inclusion in the children's survey. The REA identified 28 papers which reported on 20 measures tested with children aged 4 to 12 years and predominantly addressed child sexual abuse and bullying. No measures were found that considered change in children's outcomes across the entire range of harmful experiences included in the programme being evaluated (Stanley et al., 2021b). Questionnaires and/or vignettes were the most commonly used approaches taken to assessing changes in children's knowledge and attitudes to abuse and harm. Just over half the papers assessed included some information on reliability, validity, measurement equivalence and empirical testing, but the extent of this information was variable. Tutty's (1995) Children's Knowledge of Abuse Questionnaire-Revised (CKAQ-R) emerged as one of the most tested measures used in respect of sexual abuse for children in this age group.

The measures for our study were selected based on their suitability for the topics covered within SOSS, their psychometric properties, and validation for use with children aged 5–12 years. As no pre-existing measure covered the full range of harmful experiences included in the programme, as well as children's willingness to tell, a bespoke measure was developed by the research team and included a total of 13 questions for KS2 children and 12 for KS1 children. This bespoke measure explored various scenarios (see image 1) in which a child or their friend experiences harm or abuse and asked children what they would do, or what they would advise a friend to do and who they felt was responsible for the harm or abuse. These questions were developed around the content of the programme being evaluated and were influenced by Wurtele et al.'s (1998) 'What If' questions. The bespoke measure was positioned at the beginning of the online survey.

The second measure used was the CKAQ-R; Tutty (1995), which is designed to measure children's knowledge of abuse (mostly inappropriate sexual touching) and who to tell. We included all 24 items and added an additional question exploring whether children thought it was appropriate to send a picture of themselves in their underwear to a peer as this enabled inclusion of a form of harm not present when the CKAQ-R was developed. The third measure was a shortened version of Cornell's (2016) Authoritative School Climate Survey: Elementary Version, designed specifically for children under 12 years. The final measure used was the CHU-9D, a measure of health and well-being validated for children aged 6 years and above, to inform the economic analysis (Stevens, 2009).

Careful consideration was given to the design of the tablet administered survey which included colourful, child-friendly images, a limited amount of information on each page and a game for children to complete at the halfway point. Informed by a child rights approach, a skip button allowed children to bypass any questions they did not wish to answer without drawing attention to themselves.

Eight focus groups with 52 children (18 KS1 and 34 KS2) were undertaken to elicit feedback on children's experience of completing the survey and to test focus group methods for the main study. Interviews with nine class teachers and teaching assistants captured their views of children's participation in the feasibility study, any immediate impact, for example children being upset due to the survey questions, and tested interview schedules for the main study. Focus group questions for children included:

- Were the information and consent forms clear? Were any changes required?
- What did you think to the front cover of the tablet-based activity book? Were any changes required?
- What about the instructions at the beginning: were they clear enough?
- Did you like the pictures/drawings/colours in the activity book? If no—what would you like to change or add?
- Was the writing big enough?
- Did you think it was too long to fill in? Was it boring/fun ...
- Looking at the first section with the different situations (the bespoke measure), were there any words or questions you did not understand? How could we make them easier to understand? What did you think about the questions which asked: 'what would you do?' or 'would you tell your friend to do?' Were these questions easy to understand? Did you think it gave enough different options to answer?
- Were there any bits you did not like filling in?
- What were these and why?
  - Prompts: made them uncomfortable/private information/a bit embarrassing—how could this be made better?
- Can you think of any questions we should have asked but did not?
- Was the end of the activity booklet ok? Should we say anything else here?
- If you could change something in the book to make it better for other children to fill in what would that be?
- Has anybody anything else they would like to say?

Informed consent procedures for all adult and child participants were developed, implemented and tested. We analysed survey responses by completion rates, and use of the 'I do not want to answer' or 'skip' option for each measure and then by individual questions, separately for KS1 and KS2 children. All focus group and individual interviews were transcribed fully. We compiled an initial framework based on the interview questions and we then applied thematic analysis (Braun & Clarke, 2006) using both inductively and deductively derived themes firstly for each question in the framework and then across the framework areas. The overall objective was to identify, describe and interpret key patterns within and across the questions and themes, for example by type of abuse/harm, child's age and gender. Ethical approval for the study was provided by the NSPCC's Ethics Committee and University ethics committees.

Below we draw on the experience of developing and implementing this feasibility study to explore key issues that arise when undertaking mixed-methods large-scale research on sensitive topics such as abuse and harm with children under 12 years.

RECRUITMENT AND CONSENT

Accessing child participants for research on sensitive issues is often challenging (Øverlien & Holt, 2018). When the research addresses topics of abuse and harm, children's needs as participants should be considered and gatekeepers will need reassuring that children's welfare will be protected. In fact, Øverlien and Holt (2018) suggest that children are often more comfortable talking about sensitive matters than adults anticipate. Where children are under 12, multiple gatekeepers may be required to agree or consent to the child's participation BEFORE children are asked for their consent. This may mean that some children, for instance, disabled children

about whom adults may be particularly protective (Rabiee et al., 2005), may not be given the opportunity to contribute. This has the potential to influence the applicability of research findings and undermine attempts to protect children from harm (Hayes & Devaney, 2004).

In our study, a hierarchical approach was taken to eliciting consent. First, schools agreed to participate in the study and head teachers signed a Memorandum of Agreement that specified what would be required of the school and the researchers' responsibilities. Second, parents were asked for their consent to their child's participation on an opt-out basis: they were sent a letter and a form to complete and return to the school if they did not wish their child to participate. Children, whose parents had not opted them out (88%, n = 274) were asked to opt into the research in the classroom prior to completing the survey.

Parents'/carers' consent

Information about the study provided to schools and parents/carers needs to be clear, informative and accessible. We aimed to make the parent information sheet concise, employing subheadings that posed questions which were answered in the text below (e.g. 'What is this research for?'). Participant information sheets and other forms of communication also provide an opportunity to describe the benefits of the research and to allay concerns. However, although these strategies are likely to enhance participation by increasing understanding of what participation involves, readiness to participate in sensitive research is likely to vary according to familiarity with the subject matter. For instance, it proved much easier to recruit intervention schools which were primed for children to engage with the topics, due to earlier contact with the NSPCC through implementation of SOSS, compared to comparison schools which were not receiving the intervention and whose level of preparedness to discuss such topics could be assumed to be lower.

In total, a minority of parents/carers (n = 36/310, 12%) opted their children out of the research. However, over half (19) of those opting their children out came from one school in Northern Ireland and the high rate in this school was attributed to parents/carers not understanding the combined information and consent forms. For the main study forms were separated into two documents to make them more accessible.

Eliciting children's consent to participation

Children's rights researchers take the position that 'informed consent is the fundamental right of every child irrespective of age and ability' (Arnott et al., 2020; Kellett, 2010, p. 24; McNeilly et al., 2020). Nevertheless, participants (of all ages) may not fully understand what they have consented to, basing their consent on trust rather than information (Lombard, 2015). Consent may also be constrained by context. One teacher in our study noted that children are rarely asked to give written consent to participate in school activities and it may have seemed 'a bit overwhelming for some' of the younger children to be asked to do so. Consent needs to be informed, and the information provided to children needs to be accessible and readable (Grootens-Wiegers et al., 2015). The YPAG provided advice and feedback on materials, including information sheets and consent forms. We initially considered using emojis to make the consent form accessible for children—for example, placing a 'happy face' next to the 'agree to take part' box. However, Dockett and Perry (2011) note that children may feel that a happy face is the 'correct' answer and may be more inclined to select it. Subsequent to the feasibility study, the language of children's

information and consent forms was simplified to make them more child-friendly and they were checked for readability (Kincaid et al., 1975) and found to be appropriate for 7–8 year olds. Ideally, information about the research should be provided more than once in advance of data collection. For our study, children were prepared for the process of eliciting consent in advance by their teacher and the process was explained again by the researcher prior to survey completion. However, it became apparent that there was variation in the extent to which children had been adequately prepared by teachers:

> some of the children before it, they were getting a bit worked up because they were not quite sure what it was they were doing but that's probably our fault as teachers, we should really have informed them in a bit more detail, exactly what it was they were doing.
>
> (Teacher, Comparison School 1)

In total, 49 (16%) of the 310 children invited to participate in the survey chose to opt out beforehand. Clustering of child opt-outs in some classes suggested that some may have opted-out in imitation of others who did so, whereas others may have been attracted by the alternative activity provided by the school. Reflecting on this pattern, the research team noted the delicate balancing act of presenting completion of the survey as an enjoyable activity (most children found it to be so) while also conveying that participation was optional.

We conceptualised children's consent as an ongoing process (Kellett, 2010) rather than treating it as a one-off 'tick-box' exercise. This approach was validated in discussions with the study's YPAG who provided valuable guidance on recognising subtle signs which might indicate that children did not want to answer a question or no longer wanted to take part, for example, avoiding eye contact. Children were encouraged to feel that they could *withdraw* their consent at any time and without a reason. Children provided initial consent by signing/ticking a paper consent form which was read out and explained to the whole class by the researcher. They were reminded that they could change their mind in the course of completing the tablet-based survey and only needed to raise their hand (a standard procedure in school settings) to tell the researcher that they wished to do so. Those children participating in focus groups were also told they could change their mind at any point in the activity and reminded of this at the halfway point. Consent was also built into the survey design by providing a 'do not want to answer' response and by inclusion of a 'skip' option for each element of the activity books. In doing so, careful consideration needed to be given as to how to treat such responses in the process of analysis.

USING THE TABLET ADMINISTERED SURVEY

Generally, children enjoyed participating in the feasibility study. Children from both key stages were very enthusiastic about taking part and found the tablet-based survey to be engaging and a welcome contrast to usual approaches to classroom learning. They also valued the privacy and confidentiality that the use of hand-held tablets provided:

> I like the app because there was different questions and I like answering them and ... it's not about your friends and it's about you and it's private because you were not looking at other people's ... .
>
> (KS1 Child, Comparison School 1)

> It was fun because ... it's a bit different.
>
> (KS2 Child, Intervention School 1)

Teachers noted that the use of a touchscreen made the survey more accessible for some children:

> some of them ... do not like writing so that's why they opted out, so having that electronic method, electronic media, is very engaging for them.
>
> (KS2 Teacher, Intervention School 3)

However, the length of time the younger KS1 children required to complete the survey emerged as problematic. It was anticipated that the survey would take children 30 min to complete but it often took considerably longer, with many KS 1 children being unable to complete within the designated lesson. Teachers and researchers reported that some children in this key stage were often unable to keep pace with the rest of the class in completing the measures, despite the game which offered a catch-up activity in the middle of the survey. Children participating in the focus groups found the survey long and one child commented, "my brain was scrambled" (KS1 child, Intervention School 2).

Moreover, completion rates declined as children proceeded through the survey. This was particularly true for KS1 children who skipped questions much more frequently than KS2 children: 17.5% of questions were skipped by KS1 children completing the baseline survey as compared to 10.1% of questions skipped by KS2 children. It was therefore decided that the survey would be shortened for KS1 children. Only one of the original four measures—a shortened version of the bespoke measure—was included in the final version of the survey completed by the younger KS1 children in the full study, while older KS2 children continued to complete all four measures.

SURVEY CONTENT AND LANGUAGE

There was a consensus from children, teachers and researchers that most KS2 children had a good understanding of the survey and were able to complete it with few difficulties. Although the original intention had been for the researchers to read the survey and take children through it together as a group, KS2 children preferred to complete it at their own pace. KS2 children said they enjoyed answering the questions in the bespoke measure; they appreciated the fact that the vignette style questions meant that they did not have to comment on their own experiences (Barter & Renold, 2000) and they could give a variety of responses to the question 'who would you tell?':

> I think they [the questions] were good because you did not have to, like, tie them in to me, you just had to say tell someone or no or yes and it, like at the bottom said, 'tell your parents, tell somebody', and ... you could tick more than one person, like there was a selection of people you could pick.
>
> (KS2 child, Comparison School 2)

Some children participating in the focus groups reported some discomfort in answering certain questions, especially those related to sexual abuse. Children in one school (the only faith school included in the feasibility study) said they found the question about 'pulling pants down'

'disgusting'. There were noticeably higher rates of skip button usage for questions addressing domestic abuse—a form of violence perhaps less familiar to children than bullying or physical violence—and touching. However, children also noted that, although such questions could make you feel uncomfortable, 'it would be good to answer if you could' (KS2 Child, Intervention School 1), acknowledging the value of the research.

Dorn et al. (1995) noted that emotional aspects of the situation may also impact on children's understanding and anxiety is related to poorer information processing which may hinder comprehension of research questions (Eschenbeck et al., 2004). This may be especially pertinent when children are answering questions on sensitive issues. Consequently, in designing the survey for the main study we ensured that children could skip any questions they felt uncomfortable answering. We also emphasised to researchers the need to observe if any children appeared uncomfortable or concerned and to discretely ask them if they would like to stop. Researchers were supporting children in other ways, for example, by explaining how to use the tablet, wording etc., so this was not obvious to the wider class. In some instances, a child's discomfort was found to be directly related to their own experiences, as subsequent disclosures after the fieldwork revealed.

KS1 children were more likely to struggle to comprehend questions and experienced some difficulty with the content of the 'what if' questions in the bespoke measure which included short abuse/bullying scenarios. They commented that: "some of them weren't nice" (KS1 Child Intervention School 1) and another child reflected that: "they made me feel a bit angry and sad" (Child KS1, Intervention school 1). However, other children described these tick-box questions as "very easy, very easy" (KS1 Child, Comparison School 1). The wording of some of the CKAQ-R questions in the K2 survey was also viewed as confusing by some children, reflecting Turtle et al.'s (2010) earlier finding. These 'confusing' questions were likely to include a double negative: for example, 'If someone touches you in a way you don't like, you should not tell anyone', which was subsequently amended to: 'If someone touches you in a way you don't like, you should keep it a secret'. Other 'confusing' questions included negatives and positives: for example, 'If you don't like how someone is touching you, it's OK to say "no"', which was amended to: 'If you do not like how someone is touching you, you can say "no"'. However, it was decided that the complex structure of such questions was generally too confusing and challenging for KS1 children and, for the full study, KS1 children only completed the bespoke measure. This measure was also slightly shortened with two vignettes being removed to reduce the response burden for younger children and the 'whose fault was this' follow-up questions were omitted to reduce the complexity of the questions asked.

The School Climate measure was generally found to be relevant and enjoyable by most children: the questions made 'sense' (KS2 child, Intervention school 1):

> the best questions was the school because I really like school and I like answering these.
>
> (KS1 Child, Comparison School 1)

Interestingly, these questions also succeeded in picking up some children's ambivalence about school:

> I kind of like it and I kind of do not like I … . I do not really want to give away that information, for all the school questions I pressed no or skip this question because I do not really like school, I kind of like it and I kind of do not, so I just put the red one in.
>
> (KS1 child, Comparison School 1)

Most children were positive about both the introductory screen and the images included in the survey. Some suggested including more colourful pictures, speech bubbles and emojis. Questionnaires for children often use emojis, however, as noted above, such images can be leading. The design and presentation of questionnaires needs careful consideration and the font size can be important for children whose reading skills are still developing: the font size used for the survey in the feasibility study was considered too small by children in the KS1 focus groups and by KS1 teachers. It was therefore enlarged for the full study. Overall, the feasibility study showed that sufficient KS2 children were adequately answering the questions to be confident about the reliability of the measures, although, for the younger group, the survey was often too long and complicated and required reducing.

FOCUS GROUPS

The feasibility study provided an opportunity to test the methods used for children's focus groups as well as capturing children's perceptions of completing the survey. Leeson (2014) argues that focus groups can be effective for discussing sensitive issues with children and suggests using prompt or props to make activities engaging. Children were positive about this element of the study and enjoyed participating. Their feedback suggested they that understood the purpose of the group and what they were being asked to do. In particular, they appeared to enjoy the bean bag activity where children placed a coloured bean bag with an emoji face on it into a hula hoop to indicate their response to statements:

> ...the bean bags were good and fun for me.
>
> (KS2 Child, Intervention School 4)

> ...using the bean bags, was really nice and clear and age appropriate for our children. Sitting in a nice small circle was nice for them.
>
> (KS1 Teacher, Intervention School 2)

Given the need to be cautious in the use of emojis, the researcher explained that the ☺ on the beanbag meant you agree, the ☹ meant you did not agree and the 😐 meant you were unsure or did not know. Thus, the emoji representation was aligned to the participant's opinion rather than a right or wrong answer. This method enabled children to respond to sensitive issues while providing a high degree of anonymity, as the mutual excitement of throwing the beanbag meant they were not observing each other's responses.

MANAGING CHILDREN'S DISCLOSURES OF ABUSE AND HARM

The SOSS programme aims to increase children's readiness to disclose abuse and harm to an appropriate adult and it was envisaged that the research itself might result in disclosures. While children were not asked directly about their own experiences of abuse, neglect or bullying, questions addressing these topics had the potential to provoke difficult memories concerning themselves or others. The study had developed a robust safeguarding procedure based on that of the NSPCC and building on an earlier small-scale SOSS process evaluation (Jackson-Hollis, 2019). Two concerns about child safety were identified during the feasibility phase and one arose subse-

quent to the feasibility study. In these cases, the study's safeguarding protocol was used and proved helpful with formal safeguarding referrals and procedures being triggered in conjunction with the participating schools in two of these cases.

However, we also found that safeguarding concerns can be raised without children making straightforward disclosures. In such cases, a child might exhibit distress or unusual behaviour during their participation in the research and researchers and teachers would then consult and decide whether the behaviour warranted informing the school's safeguarding lead. Safeguarding training for the researchers addressed the complexities of these decisions and the opportunity to discuss such questions as they arose with senior researchers proved helpful for fieldworkers. Consequently, an on-call rota of senior researchers was established to ensure such advice was available at short notice. Where a serious concern or disclosure did occur, children were told that the researcher was concerned about them and would be talking to their teacher. This possibility was flagged up in the information given to children beforehand which explained that the researcher would only disclose information a child had shared if there was a concern that either the child or someone else was being hurt or not cared for appropriately. If there was a concern, the researcher would tell the teacher after speaking to the child. As McNeilly et al. (2020) note, there is a need to explain the limits of confidentiality to children participating in research using language that children understand. Following the feasibility study, a question was added to the children's focus group schedule used in the full study asking about any harmful consequences arising from either the programme or from research participation.

DISCUSSION

This feasibility study raised some interesting issues regarding the context and timing of school-based sensitive research with younger children. Research with children in schools offers the opportunity to undertake large-scale studies with a cohort that is accessible and can be easily described and followed up. When the research addresses violence and abuse, the school setting may free children from some of the constraints that may operate in the family home (Radford et al., 2011). However, although children may feel comfortable in the familiar setting of the classroom, they may also experience group and institutional pressure to participate. As the majority of classroom activities are compulsory, children may feel compelled to take part in research. They may also view a survey as 'schoolwork' with right or wrong answers which might cause distress if they feel that they do not know the 'correct' response. Furthermore, children may see researchers as teachers, and so it is important to ensure that children are aware of the different roles. Given these potential constraints, it was imperative that children were aware of their rights to decline participation and to miss out any questions they chose.

The need to give children sufficient time to consider participation in the research and prepare for participation is important, particularly given the sensitive nature of the research topics, and the issues raised above regarding the effects of processing information with an emotional content. For the full study, we gave teaching staff a script to explain the study a week prior to data collection, and this allowed children time to consider their participation and to ask questions. We also provided children with example questions on the whiteboard prior to their participation in the survey to inform understanding about what they were being asked to do.

A second point concerns the timing of the delivery of the survey. Given the sensitive nature of the materials, it was felt that it was not appropriate to carry out this research prior to a weekend. If children wanted to talk to their teacher about any issues that their inclusion in the study had

raised for them, they needed to have the opportunity to do so in the period immediately following their participation in the study.

The language and length of research tools also emerged as key findings from this feasibility study. Although clear and explicit language was used to avoid confusion, for some children, the concepts and experiences evoked, particularly in respect of sexual abuse, discomfort or even disgust. These feelings were not widely reported but such responses highlight variations in children's readiness to name and explore experiences traditionally judged to impugn notions of childhood innocence (Farrelly et al., 2022; Meyer, 2007; Robinson et al., 2017). These variations are shaped by culture as well as experience, and the child's family, school, local community and religion will contribute to their strength and pervasiveness. While discourses of childhood innocence should not be used to exclude children from research on sensitive issues relevant to their lives such as bullying, violence and abuse, researchers also need to acknowledge the social norms that govern children's daily experience and development.

Developmental issues were also relevant to considering the length of the survey: it was apparent from the feasibility study that KS1 children aged 6–7 years required the survey to be much shorter than KS2 children aged 9–11 years. This was in part a question of literacy, but comprehension and concentration also differed for these two groups. Such issues make piloting essential and children's advisory groups may also be helpful in this respect. The YPAG convened for this study did contribute some helpful reflections on what would have worked for them when they were in primary school but, on reflection, it might have been more useful, although more challenging, to recruit an advisory group that included younger children.

The feasibility study also highlighted a tension for researchers between the imperative to use validated measures, some of which may have been designed and tested some time ago in different contexts, and the opportunities afforded when research tools are bespoke and designed to address specific research questions asked of a particular population in a distinctive setting. Incorporating a bespoke measure into our survey enabled considerable adjustments and refinements to be introduced subsequent to the feasibility stage and allowed the research design to better reflect the needs of the groups and settings we were researching. However, we were also able to include measures that were known to be valid and reliable and which afforded comparison with other similar research studies.

CONCLUSIONS

This study demonstrates the value of feasibility work when undertaking large-scale research with younger children. The value and importance of having a young people's advisory group was central to ensuing the appropriateness of the research methods. There has been little research on school-based violence prevention programmes for children under 12 years (Stanley et al., 2015; Farrelly et al., 2022) and the imperative to test and refine research methods when embarking on such work is therefore strong. The study also confirmed the feasibility of research on sensitive issues with younger children on a large scale (see also Radford et al., 2011) while highlighting the importance of attending to matters such as recruitment and consent, survey design, content and length as well as children's rights, confidentiality and safety. It ensured that the design and implementation of the full study, which has involved over 3000 children across the UK, has been informed by the views and experiences of children themselves, thus increasing the face validity of the instruments used.

This feasibility study showed that younger children can contribute their views on sensitive matters such as violence, abuse and harm in ways that are measurable, replicable and reliable and can do so across a diverse sample of schools. More widely, this study confirms that younger children can enjoy participating in both quantitative and qualitative research on sensitive matters that affect their lives. The findings challenge suppositions that some topics are too sensitive to be explored with younger children. Children's experiences include those that we do not label 'childish' (James, 2007) and we need to have the courage, skills and tools to explore those aspects of their lives with them.

ACKNOWLEDGEMENTS

The authors thank all children, school staff, NSPCC staff and volunteers who contributed to this study. We also thank the members of the study's Young People's Advisory Group, Academic Advisory Group and the NSPCC for funding the study.

CONFLICT OF INTEREST

None declared.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

ORCID

Christine Barter https://orcid.org/0000-0001-5682-5333
David Hayes https://orcid.org/0000-0001-7053-9069

REFERENCES

Adler, K., Salanterä, S., & Zumstein-Shaha, M. (2019). Focus group interviews in child, youth, and parent research: an integrative literature review. *International Journal of Qualitative Methods*, *18*. https://doi.org/10.1177/1609406919887274

Alderson, P., & Morrow, V. (2020). *The ethics of research with children and young people: A practical handbook* (2nd ed.). SAGE Publications Ltd.

Arnott, L., Martinez-Lejarreta, L., Wall, K., Blaisdell, C., & Palaiologou, I. (2020). Reflecting on three creative approaches to informed consent with children under six. *British Educational Research Journal*, *46*(4), 786–810. https://doi.org/10.1002/berj.3619

Barter, C., & Renold, E. (2000). 'I wanna tell you a story': Exploring the application of vignettes in qualitative research with children and young people. *International Journal of Social Research Methodology: Theory & Practice*, *3*(4), 307–323. https://doi.org/10.1080/13645570050178594

Bergman, B. G. (2016). Assessing impacts of locally designed environmental education projects on students' environmental attitudes, awareness, and intention to act. *Environmental Education Research*, *22*(4), 480–503. https://doi.org/10.1080/13504622.2014.999225

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101.

Bright, M. A., Huq, M. S., Patel, S., Miller, M. D., & Finkelhor, D. (2020). Child safety matters: Randomized control trial of a school-based, child victimization prevention curriculum. *Journal of Interpersonal Violence*, *37*(1–2), 538–556. https://doi.org/10.1177/0886260520909185

Collings, S., Grace, R., & Llewellyn, G. (2016). Negotiating with gatekeepers in research with disadvantaged children: A case study of children of mothers with intellectual disability. *Children & Society*, *30*(6), 499–509. https://doi.org/10.1111/chso.12163

Cornell, D. (2016). *The authoritative school climate survey and the school climate bullying survey: Research summary*. Curry School of Education, University of Virginia. http://curry.virginia.edu/uploads/resourceLibrary/AuthoritativeSchoolClimateSurveyResearchSummaryJanuary2016.pdf

Dockett, S., & Perry, B. (2011). Researching with young children: Seeking assent. *Child Indicators Research*, *4*, 231–247. https://doi.org/10.1007/s12187-010-9084-0

Dorn, L. D., Susman, E. J., & Fletcher, J. C. (1995). Informed consent in children and adolescents: Age, maturation and psychological state. *Journal of Adolescent Health*, *16*, 185–190. https://doi.org/10.1016/1054-139X(94)00063-K

Einarsdóttir, J. (2007). Research with children: Methodological and ethical challenges. *European Early Childhood Education Research Journal*, *15*(2), 197–211. https://doi.org/10.1080/13502930701321477

Eschenbeck, H., Kohlmann, C.-W., Heim-Dreger, U., Koller, D., & Leser, M. (2004). Processing bias and anxiety in primary school children: A modified emotional Stroop colour-naming task using pictorial facial expressions. *Psychology Science*, *46*(4), 451–465.

Farrelly, N., Barter, C., & Stanley, N. (2022). *Ready for Relationships Education? Primary school children's responses to a healthy relationships programme in England*. Sex Education: Sexuality, Society and Learning.

Grootens-Wiegers, P., de Vries, M. C., & van den Broek, J. M. (2015). Research information for minors: Suitable formats and readability. A systematic review. *Journal of Paediatrics and Child Health*, *51*, 505–511. https://doi.org/10.1111/jpc.12762

Hayes, D., & Devaney, J. (2004). Accessing social work case files for research purposes: Some issues and problems. *Qualitative Social Work*, *3*(3), 313–333. https://doi.org/10.1177/1473325004045667

Isham, L. C., Bradbury-Jones, C., & Hewison, A. (2019). Reflections on engaging with an advisory network in the context of a 'sensitive' research study. *International Journal of Social Research Methodology*, *22*(1), 67–79. https://doi.org/10.1080/13645579.2018.1494971

Jackson-Hollis, V. (2019). Qualitative research with primary school-aged children: Ethical and practical considerations of evaluating a safeguarding programme in schools. *Journal of Children's Services*, *14*(3), 194–204.

James, A. (2007). Giving voice to children's voices: Practices and problems, pitfalls and potentials. *American Anthropologist*, *109*(2), 261–272. https://doi.org/10.1525/aa.2007.109.2.261

James, A., & Prout, A. (2003). *Constructing and reconstructing childhood: Contemporary issues in the sociological study of childhood*. Routledge.

Kay, L. (2019). Guardians of research: Negotiating the strata of gatekeepers in research with vulnerable participants. *Practice: Contemporary Issues in Practitioner Education*, *1*(1), 37–52. https://doi.org/10.1080/25783858.2019.1589988

Kellett, M. (2010). *Rethinking children and research: Attitudes in contemporary society*. Continuum International Publishing Group.

Kenny, M. C., Long, H., Billings, D., & Malik, F. (2022). School-based abuse prevention programming: Implementation of Child Safety Matters with minority youth. *Child Abuse Review*, *96*(2), e2742. https://doi.org/10.1002/car.2742

Kincaid, J. P., Fishburne, R. P., Jr., Rogers, R. L., & Chissom, B. S. (1975). *Derivation of new readability formulas (automated readability index, fog count and flesch reading ease formula) for navy enlisted personnel*. Naval Technical Training Command Millington TN Research Branch. https://apps.dtic.mil/sti/citations/ADA006655

Leeson, C. (2014). Asking difficult questions: Exploring research methods with children on painful issues. *International Journal of Research & Method in Education*, *37*(2), 206–222. https://doi.org/10.1080/1743727X.2013.820643

Lombard, N. (2015). *Young people's understandings of men's violence against women*. Surrey: Ashgate Publishing Company.

Malloy, L. C., & Stolzenberg, S. N. (2019). Questioning kids: Applying the lessons from developmentally-sensitive investigative interviewing to the research context. *Journal of Child Psychology and Psychiatry, and Allied Disciplines*, *60*(3), 325–327. https://doi.org/10.1111/jcpp.13005

Martins, P. C., Oliveira, V. H., & Tendais, I. (2018). Research with children and young people on sensitive topics—The case of poverty and delinquency. *Childhood*, *25*(4), 458–472. https://doi.org/10.1177/0907568218793931

McElearney, A., Murphy, C., Craig, L., Palmer, L., Monaghan, M., & Cunningham, C. (2021). *Children's views on being taught about abuse through the keeping safe education programme: Lessons from the process evaluation for teachers and policymakers*. NSPCC. https://learning.nspcc.org.uk/media/2665/keeping-safe-process-evaluation-children.pdf

McNeilly, P., Macdonald, G., & Kelly, B. (2020). Ethical considerations when conducting research with children and young people with disabilities in health and social care. *Nurse Researcher*, *28*(1), 9–15. https://doi.org/10.7748/nr.2020.e1645

Meyer, A. (2007). The moral rhetoric of childhood. *Childhood*, *14*(1), 85–104. https://doi.org/10.1177/0907568207072532

Øverlien, C., & Holt, S. (2018). Including children and adolescents in domestic violence research: When myths and misconceptions compromise participation. In S. Holt, C. Øverlien, & J. Devaney (Eds.), *Responding to domestic violence. Emerging challenges for policy, practice and research in Europe* (pp. 97–112). Jessica Kingsley Publishers.

Powell, M. A., Graham, A., McArthur, M., Moore, T., Chalmers, J., & Taplin, S. (2020). Children's participation in research on sensitive topics: Addressing concerns of decision-makers. *Children's Geographies*, *18*(3), 325–338. https://doi.org/10.1080/14733285.2019.1639623

Punch, S. (2002). Research with children: The same or different from research with adults? *Childhood*, *9*(3), 321–341. https://doi.org/10.1177/0907568202009003005

Rabiee, P., Sloper, P., & Beresford, B. (2005). Doing research with children and young people who do not use speech for communication. *Children & Society*, *19*(5), 385–396. https://doi.org/10.1002/chi.841

Radford, L., Corral, S., Bradley, C., Fisher, H., Bassett, C., Howat, N., & Collishaw, S. (2011). *Child abuse and neglect in the UK today*. NSPCC. http://www.nspcc.org.uk/childstudy

Radford, L., Lombard, N., Meinck, F., Katz, E., & Mahati, S. T. (2017). Researching violence with children: Experiences and lessons from the UK and South Africa. *Families, Relationships and Society*, *6*(2), 239–256. https://doi.org/10.1332/204674317X14861128190401

Renold, E. (2005). *Girls, boys and junior sexualities: Exploring children's gender and sexual relations in the primary school*. Routledge.

Robinson, K. H., Smith, E., & Davies, C. (2017). Responsibilities, tensions and ways forward: Parents' perspectives on children's sexuality education. *Sex Education*, *17*(3), 333–347. https://doi.org/10.1080/14681811.2017.1301904

Stanley, N., Barter, C., Batool, F., Farrelly, N., Kasperkiewicz, D., Radford, L., Tudor Edwards, R., Winrow, E., Charles, J., Devaney, J., & Kurdi, Z. (2021a). *Evaluation of the NSPCC speak out stay safe programme* [Final report]. Project report. https://learning.nspcc.org.uk/research-resources/2021/evaluating-speak-out-stay-safe-programme

Stanley, N., Barter, C., Batool, F., Farrelly, N., Kasperkiewicz, D., Radford, L., Tudor Edwards, R., Winrow, E., Charles, J., Devaney, J., Kurdi, Z., Ozdemir, U., Monks, C., Thompson, T., Hayes, D., Kelly, B., & Millar, A. (2021b) *Evaluation of the NSPCC speak out stay safe. Appendices: Appendix 1—Rapid evidence review*. https://learning.nspcc.org.uk/media/2693/evaluation-nspcc-speak-out-stay-safe-programme-appendices.pdf

Stanley, N., Ellis, J., Farrelly, N., Hollinghurst, S., & Downe, S. (2015). Preventing domestic abuse for children and young people: A review of School-based interventions. *Children and Youth Services Review*, *59*, 120–131.

Stevens, K. (2009). Developing a descriptive system for a new preference-based measure of health-related quality of life for children. *Quality of Life Research*, *18*(8), 1105–1113. https://doi.org/10.1007/s11136-009-9524-9

Thompson, E. L., Zhou, Z., Garg, A., Rohr, D., Ajoku, B., & Spence, E. E. (2022). (2022) evaluation of a school-based child physical and sexual abuse prevention program. *Health Education & Behavior*, *49*(4), 584–592. https://doi.org/10.1177/1090198120988252

Turtle, K., McElearney, A., & Scott, J. (2010). Involving children in the design and development of research instruments and data collection procedures: A case study in primary schools in Northern Ireland. *Child Care in Practice*, *16*(1), 57–82. https://doi.org/10.1080/13575270903378443

Tutty, L. M. (1995). The revised Children's Knowledge of Abuse Questionnaire: Development of a measure of children's understanding of sexual abuse prevention concepts. *Social Work Research*, *19*(2), 112–120. https://doi.org/10.1093/swr/19.2.112

Tutty, L. M., Aubry, D., & Valesquez, L. (2019). The "who do you tell?" child sexual abuse education program: Eight years of monitoring. *Journal of Child Sexual Abuse*, *29*(1), 2–21. https://doi.org/10.1080/10538712.2019.1663969

Wurtele, S. K., Owens, J. S., & Hughes, J. W. (1998). An examination of the reliability of the "what if" situations test: A brief report. *Journal of Child Sexual Abuse*, *7*(1), 41–52. https://doi.org/10.1300/J070v07n01_03

AUTHOR BIOGRAPHIES

Christine Barter is Professor of Interpersonal Violence Prevention and Co-Director of the Connect Center for International Research on Interpersonal Violence and Harm, School of Social Work, Care and Community, University of Central Lancashire, UK. Her research interests include children and young people's experiences of peer violence and abuse, domestic abuse, prevention and research ethics.

Farwa Batool is a research assistant at the Manchester Metropolitan University. Farwa has an interest in child wellbeing and research with young people. She is currently part of several research projects that focus on this topic, including the Horizon 2020 funded project Migrant children and communities in a transforming Europe.

Joanna Charles is a health economist at Bangor University. She has an interest in public health interventions aimed at improving the health and wellbeing of children and parents. She is also interested in costing methodologies and how these can be adapted and applied in research.

John Devaney is Dean and Head of the School of Social and Political Science, and Centenary Chair of Social Work at the University of Edinburgh. His research focuses mainly on the broad area of family violence, with a particular focus on child homicide, child maltreatment, child welfare policy, domestic violence, and the impact of adversity in childhood across the lifecourse.

Nicola Farrelly is a Research Associate in the Connect Centre for International Research on Interpersonal Violence and Harm, School of Social Work, Care and Community, University of Central Lancashire, UK. Nicola's research focuses on creating positive change for marginalised groups of children and young people, with a recent focus on interventions for children through school-based programmes.

David Hayes is Professor of Child Protection and Safeguarding in the School of Social Sciences, Education and Social Work, Queen's University Belfast. His research focuses on service user experiences of the child protection and criminal justice systems, the involvement of family members in child protection and child welfare processes, the practice and experiences of professionals who operate the child protection system.

Zain Kurdi is based in the School of Social and Political Science at the University of Edinburgh. She has worked in violence prevention and child protection for 13 years. Zain is a PhD candidate at the University of Edinburgh exploring ways in which Adverse Childhood Experiences can be measured and how these can be operationalised using the Millennium Cohort Study.

Annemarie Millar is a registered charted psychologist with the British Psychological Society with 10 years' experience of working primarily with children and young people. Her research covers areas such as domestic and sexual violence and abuse, children and policing and child rights.

Claire Monks is a Professor of Developmental Psychology. She leads the Centre of Vulnerable Children, Young People and Families at the University of Greenwich. Claire's research interest is developmental psychology, particularly on aggressive behavior among young children.

Helen Richardson Foster is a Research Fellow in the Connect Centre for International Research on Interpersonal Violence and Harm, School of Social Work, Care and Community, University of Central Lancashire, UK. Her research interests are domestic abuse, children's social care and family support.

Lorraine Radford is Emeritus Professor of Social Policy & Social Work at the Connect Centre for International Research on Interpersonal Violence and Harm, School of Social Work, Care and Community, University of Central Lancashire, UK. Her research specialism is the prevention of gender-based violence, abuse and sexual exploitation towards women, children and young people.

Rhiannon Tudor Edwards is Professor of Health Economics and the founding Director of health economics research and Co-Director of the Centre for Health Economics and Medicines Evaluation (CHEME) at Bangor University. Rhiannon leads the Public Health Economics Research Group (PHERG) at CHEME which takes a life-course approach to the methodology and conduct of economic evaluation of public health interventions. She is particularly interested in system-level change.

Eira Winrow is a research officer in the School of Medical and Health Sciences at Bangor University. She has an interest in Social Return on Investment (SROI) evaluations, particularly in community-based interventions, domestic violence, housing, and rare dementias.

Nicky Stanley is Professor of Social Work and Co-Director of the Connect Centre for International Research on Interpersonal Violence and Harm at the University of Central Lancashire, UK. Her research addresses domestic abuse, child protection and young people's and mothers' mental health. She has published widely on domestic abuse and child protection, health and social care inquiries and mothers' mental health needs.

How to cite this article: Barter, C., Batool, F., Charles, J., Devaney, J., Farrelly, N., Hayes, D., Kurdi, Z., Millar, A., Monks, C., Richardson Foster, H., Radford, L., Edwards, R. T., Winrow, E., & Stanley, N. (2022). Conducting large-scale mixed-method research on harm and abuse prevention with children under 12: Learning from a UK feasibility study. *Children & Society*, *00*, 1–18. https://doi.org/10.1111/chso.12658