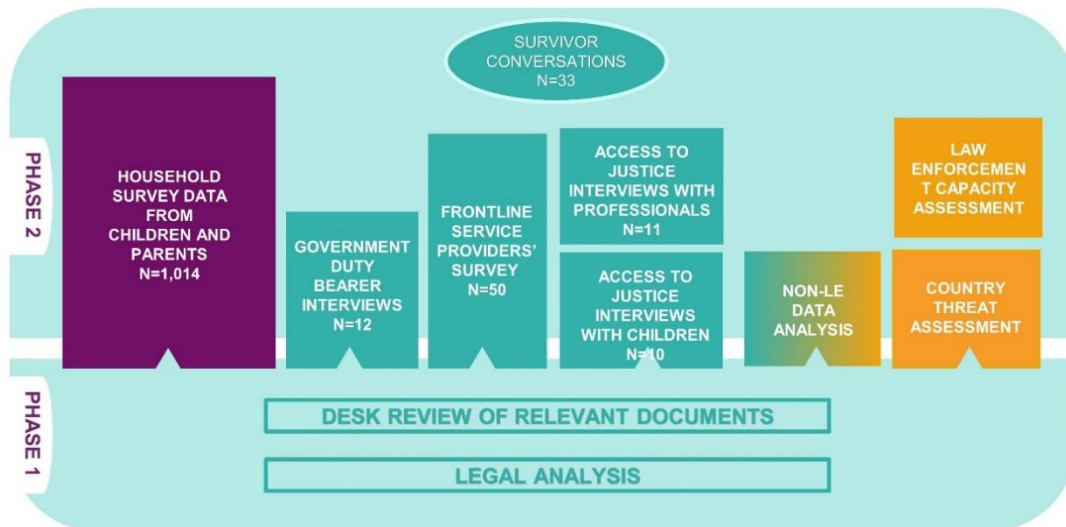


Methodology: Survivor Conversations

Background

Disrupting Harm is a large-scale multi-country research project delivered by three partnering organisations, and 14 local organisations in Southeast Asia and Southern and East Africa. The bold scale of the project provided an unprecedented and unique opportunity to gather and consolidate a truly comprehensive picture of OCSEA in each of the target countries. Planning and undertaking research on this enormous scale in the short timeframe required careful planning and delineation of tasks.

Disrupting Harm was therefore planned as a set of nine research activities (see diagram below) that are complementary and interconnected, and fit together to tell a complete story. They are not intended to be considered as stand-alone activities. The three partnering organisations focused on their strengths, networks and collaborations to divide the data collection within each target country. Together, the combined project team then embarked on an analysis phase where cross-comparisons and triangulation was undertaken together as a team to result in the final comprehensive country reports. Triangulating and cross-analysing the data points also reduced reliance on face validity of single activities that sometimes occurs in such research (e.g. taking informant interviews as objective fact with little chance to scrutinise/triangulate what’s reported in them).



UNICEF undertook large-scale, population representative surveys of internet-using children and their caregivers in each country. INTERPOL gathered and analysed existing law enforcement case data and conducted capacity analysis of the personnel making up the national law enforcement response to OCSEA. ECPAT’s role focused on describing the context in which OCSEA occurs, along with carefully and ethically consulting specialist samples of young people who had lived experiences of harm from OCSEA.

ECPAT conducted four primary research activities in phase two as depicted in green in the diagram (the access to justice activity was split into two parts during the course of the project).

This Activity

Thirty-three ‘conversations’ with young people who had been subjected to OCSEA were conducted in five of the *Disrupting Harm* target countries. Young people were aged between 16 and 24 years at the time of participation, but had experiences of OCSEA during childhood. These conversations were purposely not constructed as interviews, and were specifically designed to give the young person full control over what was discussed. The primary focus of conversations was to understand survivors’ experiences of OCSEA with emphasis on the pivotal turning points that resulted in the movement from abuse and exploitation to disclosure and recovery. Secondary aims included exploring their experiences of support services; justice mechanisms; social support from family and community; and socio-cultural and gender norms’ influences on responses to their OCSEA experiences.

Rationale

Engaging survivors of child sexual exploitation in research requires substantial care to accommodate a range of ethical considerations in any design¹. Yet, survivors also have a right to participate in discourse on this issue that impacts them so significantly: “Research involving children in these contexts can realise their right to participation by providing a way to amplify children’s voices, challenge the culture of silence in which abuse thrives – if it is done carefully to ensure that children don’t experience harm.”² This was an integral principle guiding this research activity – the team wanted to ensure that survivors perspectives were represented amongst the *Disrupting Harm* data, but to do so carefully and respectfully, by ensuring survivors had utmost control over their stories and participated on their terms.

This activity was therefore purposely planned as ‘survivor conversations’ rather than a traditional form of research interview. Significant time and effort was put into developing a careful, participant-centred, and trauma-informed approach for the ‘survivor conversations’ by a team of experts in academic and practice of working with survivors of child sexual exploitation and abuse. The model was designed as a ‘gold standard’ example of this work and it is hoped that the model is replicated in future research, to ensure that survivors perspectives are ethically and safely incorporated, and can inform solutions to child sexual exploitation and abuse around the world.

Sample

Initially, up to 80 survivor conversations with young people aged 16 to 24 who had been subjected to OCSEA during childhood were planned in eight of the *Disrupting Harm* target countries.³ Countries were selected based on a number of factors, including the type of work that ECPAT member organisations in the target countries was engaged in, and their connection to organisations in which potential participants could be practically identified. The legal circumstances surrounding OCSEA were also carefully considered, in particular, the inclusion of male survivors was restricted to countries where homosexual sex was not illegal, as boys disclosing abuse by a male perpetrator in our research could have faced prosecution for such a disclosure, even as victims (this excluded us seeking male samples in Tanzania, Kenya, Uganda,

¹ ECPAT International. (2019). [Guidelines for Ethical Research on Sexual Exploitation Involving Children](#). Bangkok: ECPAT International.

² *ibid.* p. 6.

³ Kenya, South Africa, Namibia, Rwanda, Mozambique, Cambodia, Malaysia, Philippines.

Namibia, Ethiopia and Malaysia). While the design stipulated that gender non-binary young people could certainly participate, none were identified in the sampling process for inclusion.

The final sample for this activity totalled 33 conversations with young people across five countries as per the table below:

Country	Males	Females
Kenya	0	9
South Africa	1	0
Namibia	0	7
Malaysia	0	4
Cambodia	5	7

The reduced sample was a result of a number of limitations. The COVID-19 pandemic forced a substantial reorganisation of most *Disrupting Harm* activities, including this one. Two Survivor Engagement Consultants with specialised skills in working with boys and girls were recruited, with the intention that they would co-facilitate all interviews with local social workers in the target countries. When the pandemic restricted global travel, we instead recruited additional local researchers in the target countries who would work closely with the Survivor Engagement Consultants to deliver the planned methodology. These local Facilitators were identified in Cambodia, Malaysia, South Africa, Kenya and Namibia. They included psychologists and social workers experienced in working with survivors of sexual exploitation and abuse.

In Mozambique, the ethical clearance process took more than 12 months (impacted by COVID-19) which meant permissions to proceed were secured too late to be feasible to collect data in the country. In Rwanda we did not receive government permission to proceed with *Disrupting Harm*. In the Philippines, while we had received ethical clearance, movement restrictions prevented face-to-face engagements through the data collection period. We strongly felt that for these sensitive conversations, virtual engagement was not appropriate and did not proceed with this activity in the Philippines.

Movement restrictions in South Africa, Kenya, Malaysia and Cambodia also impacted logistics as countries strengthened and eased restrictions through the data collection period however, we are pleased to have been able to gather the data we did, and to ensure survivor voices were included in the *Disrupting Harm* dataset.

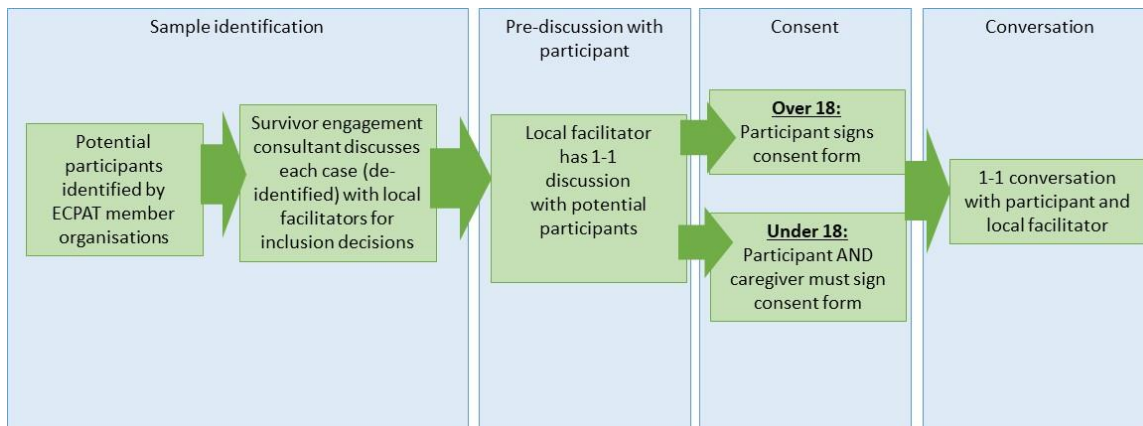
Once local Facilitators were identified, they worked with the two Survivor Engagement Consultants to learn the methodology and tools. The Facilitators then worked with the ECPAT member organisations to identify potential participants both within their own client lists, and through networks with other social service providing organisations in the target countries.

Organisations were then approached to talk about the research activity and were asked to consider if they knew of potential participants who could be invited to consider taking part. As with other activities, the inclusion criteria around OCSEA were sometimes quite complex to clarify, particularly ensuring that digital, internet and communication technologies interacted with the young person’s experience at some point of the abuse. A range of different such circumstances are represented in the survivors’ stories.

De-identified details about possible participants were shared by the Facilitators with the Survivor Engagement Consultants to assess appropriateness for inclusion. A key element of this assessment also included reviewing the ‘psychological readiness’ of potential participants through considering the time that had passed since the abuse ended, their stage in therapeutic care, and the support systems they were engaged with.

Potential participants were expected to have existing relationships with support services and were receiving/ had received support. In most cases, they continued to be in contact with organisations following previous engagement as direct service-users. Young people who had completed their therapeutic care were prioritised as participants as they were expected to be more psychologically ready to engage in a conversation related to their exploitation or abuse.

Once approved for inclusion, potential participants were contacted by the Facilitator in a two-step process of engagement. A pre-discussion was held, where both consent processes were explained, and the circumstances in which the young person wanted the conversation to take place were discussed (such as location, support people present, any no-go areas of discussion). A key aim of these pre-meeting engagements was also to begin to establish trust by engaging in ways that clearly demonstrated the young person was in control. If the young person then agreed to participate, written consent was sought using translations of the forms (see Annex A for English versions) and a time for the conversation was then arranged.



Tools

As previously described, the survivor conversations are framed as person-centred discussions that were only loosely structured in order to ensure the young person held control over what was shared. In this sense, there is certainly not a traditional interview schedule with pre-determined questions. Instead, the model and a set of resources were developed by the Survivor Engagement Consultants and shared with the Facilitators who then had the autonomy to adapt tools to the specific context and facilitate the conversations.

A narrative methodology was chosen to frame the model because it allows an analysis of participant's identity through the stories they construct in relation to their experiences.^{4 5 6} A focus on both the content and the process⁷ of participant storytelling allows an exploration of how their narrative has developed *temporally* through moments or 'turning points' in the narrative,⁸ and *contextually* in relation to the meaning this holds for them in key areas of their lives. By examining personal stories, we can access 'snapshots' of how these interpretive filters come to bear on the rehabilitation process. Winskell et al. have suggested that narratives offer researchers opportunity to explore normative issues in a way that approximates the complexities with which they are surrounded in reality.⁹ Narrative inquiry has been used with adolescent populations to explore sensitive issues and participants often describe the process as an uplifting and engaging experience.¹⁰

Narrative interviewing is a tool used to develop detailed accounts rather than brief answers or general statements¹¹ and involves emotionally attentive listening to attempt to enter the world as experienced by another. Narrative approaches facilitate rapport building as they allow participants to tell stories in their own way and focus on key issues that are important to them.¹² Questions occur in the natural flow of the story being told. Foster presents a qualitative analysis of boys' narratives about sexual abuse in terms of how boys describe their life prior to, during and after CSA.^{13 14}

The two Survivor Engagement Consultants worked extensively over a number of months with the Facilitators to sensitise them to the model, resources and key issues in working with OCSEA survivors. The process initially involved meeting online, to explore Facilitators' knowledge and experiences of working with girls and boys affected by sexual abuse and exploitation, particularly online and within their specific context. The Survivor Engagement Consultants then collaborated to develop a participatory training curriculum, which was facilitated online through several workshops with each Facilitator.

⁴ Bruner, J. (1990) [*Acts of Meaning*](#). Cambridge, MA: Harvard University Press.

⁵ Kirmayer, L. (1992). [*The Body's Insistence on Meaning: Metaphor as Presentation and Representation in Illness Experience*](#). *Medical Anthropology Quarterly*, 6(4), 323-346.

⁶ Mattingly, C., Garro, L. (2000). [*Narrative and the Cultural Construction of Illness and Healing*](#). Berkeley, CA, and London, UK: University of California Press.

⁷ Labov, W. (1972). The transformation of reality in narrative syntax. In Labov, W., [*Language in the Inner City*](#). Philadelphia: University of Pennsylvania Press, 354-396.

⁸ Lieblich, A., Tuval-Mashiach, R., & Zilber, T. (1998). [*Narrative research: Reading, analysis and interpretation*](#) (Applied social research methods series ; v. 47). Thousand Oaks, Calif.; London: Sage Publications.

⁹ Winskell, K., Singleton, R., & Sabben, G. (2018). [*Enabling Analysis of Big, Thick, Long, and Wide Data: Data Management for the Analysis of a Large Longitudinal and Cross-National Narrative Data Set*](#). *Qualitative Health Research*, 28(10), 1629–1639.

¹⁰ Nolan, S. et al. (2018). [*Using narrative inquiry to listen to the voices of adolescent mothers in relation to their use of social networking sites \(SNS\)*](#). *Journal of Advanced Nursing*, 74(3), 743-751.

¹¹ Riessman, C. K. (2008). [*Narrative methods for the human sciences*](#). Thousand Oaks, CA: Sage

¹² Ziebland, S. (2013). Narrative Interviewing. In Ziebland, S. et al. (Eds.) [*Understanding and Using Health Experiences: Improving patient care*](#). Oxford: Oxford University Press.

¹³ Foster, J. (2017). [*The Fears and Futures of Boy Victims of Sexual Abuse: An Analysis of Narratives*](#). *Journal of Child Sexual Abuse*. 26. 710-730.

¹⁴ Foster, J. (2017). [*It Happened to Me: A Qualitative Analysis of Boys' Narratives About Child Sexual Abuse*](#). *Journal of Child Sexual Abuse*. 26:7, 853-873.

The curriculum comprised several essential learning activities and topics, enabling Facilitators to conduct conversations utilising consistent approaches across countries. These topics included ethical research approaches; definitions and exploration of the parameters and dynamics of OCSEA; and gender and cultural norms and perspectives, designed to build a firm foundation for additional learning which focused on the methodology. The approach was based on narrative approaches¹⁵ and, supplementary visual representations and tools; strategic use of prompting questions; use of reflective journals in qualitative research; and data management processes. Ongoing support and debriefing was also provided throughout the duration of the field research by the Survivor Engagement Consultants to the Facilitators.

An outline of the training provided by the Survivor Engagement Consultants to the Facilitators is provided at Annex B. Brief outlines of the steps in the approach are provided below.

Pre-meeting

In the pre-meeting, a participant information sheet and consent form in local language (see Annex A for English versions) explaining the purpose of the project and the contents of the programme was given to the potential participants (and caregivers when potential participants were under 18) and then discussed in detail.

During the pre-meeting process, a counsellor with a well-established relationship with the young person was often also present with the Facilitator as a support and to help establish rapport for the ongoing engagement.

The pre-meeting was always planned for a different day preceding the main conversation to ensure the young person had time to reflect before providing their consent/assent to participate and did not feel pressured to sign in the moment. Given the COVID-19 situation, in a small number of instances, these pre-meetings were held virtually, but this was really a last resort and not preferred.

Main conversation

Guidance for the conversations was provided to the Facilitators by the Survivor Engagement Consultants, through the training provided, but all approaches strongly focused on control of the conversation resting with the young person.

Participants were essentially invited to speak freely about their personal experiences of OCSEA and their recovery and the facilitator sought to develop a visual timeline of events, using active listening to engage with the young person and understand their story – exploring particular gaps in understanding and drawing out the detail needed to represent young people’s perspectives of this issue. Probing questions were used sparingly to elicit narratives across their journey, prior to, during and after their experiences. Questions were largely responsive only and kept intentionally open with participants encouraged to tell their story from their own perspective.

Resources such as a visual representation of a ‘timeline’ were used to anchor and frame the story as it unfolded. The timeline was loosely divided into different periods (‘Past’, ‘Present’ and ‘Future’), to help place the narrative within its context, taking into account the varying dynamics and experiences of each

¹⁵ Lieblich, A., Tuval-Mashiach, R., & Zilber, T. (1998). *Narrative research : Reading, analysis and interpretation* (Applied social research methods series ; v. 47). Thousand Oaks, Calif.; London: Sage Publications.

young person. It was designed to enable other ways for participants to voluntarily tell their stories in ways other than verbally. It incorporated options for drawing, speech and thought bubbles, symbols and emojis and of course was also a tool that could guide the verbal conversation too.

Follow-up calls

Phone calls were made the day after each conversation by the Facilitators to check in with the young people to ensure the experience had remained positive on reflection and whether they wanted to connect with support services.

It should also be noted that the Facilitators engaged in debriefing meetings with the Survivor Engagement Consultants, and in one case with a local therapist to reflect on the difficult material covered in some of the interviews.

Data Management

The survivor conversations were all conducted in languages preferred by participants, that were also spoken by the Facilitators. All conversations were audio-recorded and then transcribed (those in other languages first translated to English). The team held psychological debrief calls with all staff who transcribed interviews given the difficult nature of the content they were working on.

All data files were given a unique identification number and any identifying information removed from audio recordings, transcripts and visual images. Data was stored separate from consent forms and were transferred via a secure online password-protected platform that only the Facilitators, Survivor Engagement Consultants and the central research team had access to. Once stored on the server and analysis completed, all other copies of data files were deleted. All recordings will also be deleted from the ECPAT server six months after the release of national reports.

Analysis

Full transcripts were shared with the Senior Survivors Expert who completed the analysis of all data for the set of 33 conversations (no within-countries analysis was undertaken). Along with the transcripts we used photographs of visual materials that were created by participants during these conversations with the help of the Facilitator (drawings, words and the use of figures, emojis and other objects), along with a journal entry by the Facilitator that was completed immediately afterwards. These journals acted as field notes to inform the conversations but were not used to establish ‘the truth’ of what was being said. Our visual tool took the form of past, present and future with the young person deciding where they wanted to start, not only empowering participants to control the way that their life story was organised but to illustrate how their experiences unfolded.

There are different approaches to narrative analysis, and we used reflexive thematic analysis.¹⁶ Within this approach we collected the survivors’ stories and their visual representations from which we created conceptual groupings and used case studies or vignettes to provide an illustration. This approach allowed us to look for common thematic elements across the accounts as patterns of shared meaning underpinned

¹⁶ Braun, V., & Clarke, V. (2019). [Reflecting on reflexive thematic analysis](#). *Qualitative Research in Sport, Exercise and Health*, 11(4), 589–597.

or united by a core concept. The coding process required a continual questioning and querying of the assumptions being made in interpreting and coding the data. Themes were analytic outputs developed through and from the creative act of our coding and we looked for common thematic elements across our survivor stories and the events reported - but also noting differences. This included an examination of 'turning points', barriers, or shifts in perspective. Reflexive strategies were used to identify possible confounding influences of researcher and contextual factors such as the conversation itself, family dynamics and the wider systemic influences.¹⁷ This process served to enhance transparency in the research.^{18 19}

Each transcript was taken to be a discrete narrative, and attention given to the distinctive features of how each participant's experience of OCSEA changed over time. Seeming shifts within the cases were labelled as turning points. Within survivor stories we re-sequenced the narrative to examine the interlinked episodes in terms of context, interaction and continuity over time.

From this process individual participant narratives were developed representing the unique story of each participant's journey through the phases of OCSEA and their recovery. The analysis of each narrative was then examined across the whole group in order to develop and test theories that gave a predictive explanation of the stories as a whole.²⁰ Themes were conceptually linked without seeing the data as 'facts', rather as situated interpretations, seeking to enhancing reliability of interpretation, whilst patterns may also strengthen the internal validity of the research.²¹

The cross case analysis examined convergences and divergences, and the role and meaning of shared themes across all narratives.²² Themes which were evidenced across the narratives of the participants became the focus of the narrative-orientated enquiry and were synthesised, building a general interpretation grounded in the themes of each within-case analysis.²³

While the final results will be presented in a dedicated stand-alone report on the survivor conversations, insights from the data are also included in each of the *Disrupting Harm* national reports.

Limitations and Special Ethical Considerations

This research activity included engagement with children who had been subjected to OCSEA and therefore very strict ethical guidelines and ECPAT International's robust child safeguarding procedures were

¹⁷ Mishler, E.G. (1986) [Research Interviewing Context and Narrative](#). Harvard University Press, Cambridge.

¹⁸ Lieblich, A., Tuval-Mashiach, R., & Zilber, T. (1998). [Narrative research : Reading, analysis and interpretation](#) (Applied social research methods series ; v. 47). Thousand Oaks, Calif.; London: Sage Publications.

¹⁹ Riessman, C. K. (2008). [Narrative methods for the human sciences](#). Thousand Oaks, CA: Sage

²⁰ Miles, M. B., & Huberman, A. M. (1994). [Qualitative data analysis: An expanded sourcebook \(2nd ed.\)](#). Thousand Oaks, CA, US: Sage Publications, Inc.

²¹ Wertz, F., Charmaz, K., McMullen, L. M., Josselson, R., & Anderson, R. (2011). [Five ways of doing qualitative analysis: Phenomenological psychology, grounded theory, discourse analysis, narrative research and intuitive inquiry](#). New York: Guildford Press.

²² Riessman, C. K. (2008). [Narrative methods for the human sciences](#). Thousand Oaks, CA: Sage

²³ Noblit, G. W., & Hare, R. D. (1988). [Qualitative Research Methods: Meta-ethnography](#). Thousand Oaks, CA: SAGE Publications, Inc.

followed carefully. The Guidelines for Ethical Research on Sexual Exploitation Involving Children²⁴ were closely used to inform design and implementation of this research activity.

There is always risk of causing distress when engaging young people who have had experiences of OCSEA in research. However, a range of careful mitigations were put in place for this activity. These young people were identified through their engagement with supportive agencies and the extent of the support available, and their psychological readiness was considered by a number of professionals, including staff who had worked with them and understood their circumstances, as well as the expert Survivor Engagement Consultants. This activity was carefully and ethically constructed from the relevant literature, and by social workers and psychologists with experience working with survivors – with a fundamental aim to empower survivors as controlling their narratives – rather than to explore particular research questions. The conversations themselves were conducted by local Facilitators with experience working with survivors in their country contexts.

Already noted in the sampling procedure above was the assessment of psychological readiness undertaken for each case by the Survivor Engagement Consultants and the Facilitators. This process was essential, and completed on a case-by-case basis to consider the unique circumstances of each case and individual. Factors like the resilience of the young person, support systems around them, and timing since the abuse were primarily considered.

A further ethical issue was that participants in this research activity were invited via existing relationships with service providers, so there was a risk that potential participants felt obliged to take part based on who was making the invitation. To mitigate this, both the initial invitation and the informed consent documentation explicitly named this risk of participants feeling coerced to take part and emphasised there was no obligation to do so. The Survivor Engagement Consultants also considered this risk as part of their assessment of each participant's readiness to participate. Furthermore, the participant information sheet emphasises the right to withdraw during or after the conversation. No withdrawals were requested.

One difficulty encountered in the process was finding the balance between being a 'helper' and a researcher. The Facilitators had counselling/therapeutic professional backgrounds and some found it very difficult to separate the role of counsellor from the role of researcher. We included training along this theme in the support from the Survivor Engagement Facilitators as a response to this difficulty along the way to try and ensure that Facilitators used referral rather than taking on a therapeutic role themselves during conversations.

Further to this point, there was a strong necessity for self-care for all those involved in this research activity. While all Facilitators were professionally experienced in working with these topics and with trauma, the nature of undertaking these conversations – which were deeply moving yet 'limited time' contacts – was difficult. Therapeutic relationships tend to be more long term and slower to build. Debriefing and coaching through research of this nature must therefore be mandatory for the psychological wellness of researchers.

²⁴ ECPAT International. (2019) [Guidelines for Ethical Research on Sexual Exploitation Involving Children](#). Bangkok: ECPAT International.



Finally, as explained carefully to potential participants in consent procedures, in the event that a child (under 18) disclosed a situation of further abuse or exploitation beyond the case being discussed in the conversation, ECPAT's child safeguarding policy and procedures would be followed, which required that national reporting procedures be followed, including connecting the child to support services arranged for the activity. This however did not apply to those participants over 18 years of age. No such instances were reported during the activity.

PARTICIPANT INFORMATION SHEET: CAREGIVER

(USED ONLY WHEN YOUNG PERSON IS UNDER 18, ADDITIONAL TO FORMS FOR YOUNG PERSON)

Disrupting Harm is a research project that aims to gather existing data and generate new evidence to understand online child sexual exploitation and abuse in 14 countries. It will inform and motivate effective action to prevent and respond to this problem.

We believe that any research about the sexual exploitation or abuse of children needs to include opportunities for young survivors to contribute to the conversation, and to have a say in the recommendations for the response. For that reason a young person in your care has been invited to participate in an interview where they will be encouraged to tell us in their own words, the story of their experience of online child sexual exploitation or abuse, and the keys to their survival and recovery.

There are risks in talking about such experiences, but we believe that we have created the circumstances where young people are supported and able to share their stories in ways that are empowering and that they don't experience harm.

This form seeks your permission as caregiver but young people will also be informed about the project and asked to decide for themselves if they want to participate as well. We encourage that this decision is made together.

Young people will be encouraged to discuss their experiences with a qualified trauma-informed therapist. We think the conversations will go for about 45 minutes to 1 hour. We would like to record the conversation but will delete this once it has been transcribed. Participation in the study is voluntary at all times (i.e. they may choose not to answer a question or to stop participating at any time).

ANONYMITY AND CONFIDENTIALITY

Participation in the study is confidential. An identification number will be used in place of names and these numbers will be kept separately from the data. All data will be kept securely and it will need a password to access. Only the research team will be able to access it. Once we have written up the interview, we will delete the recording and our notes will be destroyed no longer than six months after the end of the project. Most of the information will be kept confidential, unless you tell us about new or ongoing experiences of abuse that we must report (See reporting section below).

CARE AND SUPPORT

The conversation is on a very sensitive and personal topic. It is expected that it will have an emotional impact on the participants. We have put in place a number of strategies to minimise the emotional impacts, including:

- The conversations will be facilitated by a trauma-informed therapist. This person has years of experience in speaking with young people about sensitive topics like child sexual exploitation and abuse.
- We have worked with organisations in [country] to ensure support and care is available to the participants during and after the conversations.

- The work we do to analyse the conversations will be shared directly with the participants.
- The young people participating are in control of the conversation at all times. This is not a lot of questions that they answer, they are encouraged to tell us the story in their own words.
- Participants have the right to withdraw from the research project at any time and we will delete the tape if requested.

REPORTING

While details of past abuse will be discussed, please note that if it becomes clear that new, ongoing or unreported abuse is raised, then the research team will be required to share this information with authorities. The first point of contact will be a local organisation that we partner with for this research who can provide support and if you decide to, can support reporting the case to the authorities.

BENEFITS AND COMPENSATION

The study is unable to provide any financial benefit for the participants. However, we will ensure that the interview is conducted at a time and place of your convenience.

Research has also shown that there can be benefits to discussing such experiences, particularly when there is a focus on recovery and the process is careful and supported. We can discuss this more with you if you would like.

ETHICAL APPROVAL

This research project has been granted ethical approval by [insert] in [country].

CONCERNS OR COMPLAINTS

If you have any concerns or complaints about the research, or would like to request support, you can directly contact the lead researcher at ECPAT International:

Email: DH@ecpat.net

Phone: +66 2 215 3388

Whatsapp: +66 82 515 0242

CONSENT FORM: CAREGIVER

Please indicate your response to the questions below:

I have been clearly informed about the <i>Disrupting Harm</i> project	Yes	No
Any questions that I have were answered by the researcher	Yes	No
I understand how data I provide will be used by the project	Yes	No
I understand how to contact the lead researcher with concerns or complaints	Yes	No
I agree for this conversation to be recorded	Yes	No

I hereby give my consent for the named child to participate in the *Disrupting Harm* survivor interview.

Child name:.....

Caregiver name:.....



Relationship to the child:.....

Signature.....

Date

If using the thumbprint, verify that consent was given by the caregiver for the young person to participate:

Witness signature.....

Date

PARTICIPANT INFORMATION SHEET: YOUNG PEOPLE (USED FOR ALL YOUNG PEOPLE)

Disrupting Harm is a research project that aims to gather existing data and generate new evidence to understand online child sexual exploitation and abuse in 14 countries. It will inform and motivate effective action to prevent and respond to this problem.

We believe that any research about the sexual exploitation or abuse of children needs to include opportunities for young survivors to contribute to the conversation, and to have a say in the recommendations for the response. For that reason, you have been invited to participate in an interview where you will be encouraged to tell us in their own words, the story of your experience of online child sexual exploitation or abuse, and the keys to your survival and recovery.

There are risks in talking about such experiences, but we believe that we have created the circumstances where you will feel supported and able to share your story in a way that will be empowering and that you won't experience harm.

This form seeks your permission to participate. We encourage you to think carefully and to make this decision with the support of a trusted person.

If you agree, you will be encouraged to discuss your experiences with a qualified trauma-informed therapist. We think the conversations will go for about 45 minutes to 1 hour. We would like to record the conversation and the recording will be erased once it has been downloaded and transcribed. Participation in the study is voluntary at all times (i.e. you may choose not to answer a question or to stop participating at any time).

ANONYMITY AND CONFIDENTIALITY

Participation in the study is confidential. An identification number will be used in place of names and these numbers will be kept separately from the data. All data will be kept securely and it will need a password to access. Only the research team will be able to access it. Once we have written up the interview, we will delete the recording and our notes will be destroyed no longer than six months after the end of the project. Most of the information will be kept confidential, unless you tell us about new or ongoing experiences of abuse that we must report (See reporting section below).

CARE AND SUPPORT

The conversation is on a very sensitive and personal topic. It is expected that it will have an emotional impact on the participants. We have put in place a number of strategies to minimise the emotional impacts on you including:

- The conversations will be facilitated by a trauma-informed therapist. This person has years of experience in speaking with young people about sensitive topics like child sexual exploitation and abuse.
- We have worked with organisations in [country] to ensure support and care is available to you during and after the conversations.

- The work we do to analyse the conversations will be shared directly with you.
- You are in control of the conversation at all times. There is not a lot of questions that you must answer, you are encouraged to tell us your story in your own words.
- You have the right to withdraw from the research project at any time and we will delete the tape if requested.

REPORTING

While details of past abuse will be discussed, please note that if it becomes clear that new, ongoing or unreported abuse is raised, then the research team will be required to share this information with authorities. The first point of contact will be a local organisation that we partner with for this research who can provide support and if you decide to, can support reporting the case to the authorities.

BENEFITS AND COMPENSATION

The study is unable to provide any financial benefit for the participants. However, we will ensure that the interview is conducted at a time and place of your convenience.

Research has also shown that there can be benefits to discussing such experiences, particularly when there is a focus on recovery and the process is careful and supported. We can discuss this more with you if you would like.

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Email: DH@ecpat.net

Phone: +66 2 215 3388

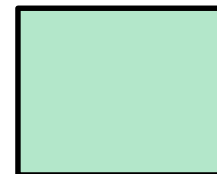
Whatsapp: +66 82 515 0242

DO YOU UNDERSTAND?

Questions	Yes I understand	No I don't understand
You can stop at any time	✓	✗
If you get upset you can talk to us	✓	✗
We will keep your answers secret	✓	✗
We will give you a fake name	✓	✗
The discussion will be recorded	✓	✗

If you would like to answer our questions

Write your name or use your thumb to make a print



:

Young person's name:.....

Caregiver name:.....

Relationship to the young person:.....

Date

If using the thumbprint, verify assent to participant was given by the young person:

Witness signature.....

Date

Training Outline

The Survivor Engagement Consultants were actively engaged in the process of recruiting local Facilitators, and this process included an assessment via interview of the relevant skills, knowledge and capacity for undertaking research activities on sensitive topics, including OCSEA. The Consultants then developed a tailor-made orientation and learning curriculum, designed to prepare local Facilitators for the research activities. The participatory style learning was provided online to each Facilitator individually, during four two-hour virtual meetings, coaching calls and debriefs after pre-meetings and after each interview throughout data collection.

Core topics covered in the training were:

Introduction and Methodology

- Overview of ECPAT’s definition of OCSEA and of the *Disrupting Harm* project and its objectives, with particular focus on the Survivor Conversations;
- Detailed information and discussion about the methodology to be used, including before, during and after the conversations;
- Identification and selection of participants;
- Conducting pre-meetings, establishing safe relationships, promoting choice;
- Conducting the conversations with focus on survivor-led engagement;
- Key skills to be used including active listening and minimal questioning of a non-intrusive or directive manner;
- How to indirectly use the guiding research questions plus suggested strategic questions, to prompt when necessary;
- Use of visual representation and the tools that could be used with this e.g. past/present/future timeline; symbols, drawing, emojis, thought and speech bubbles;
- Finishing the conversation and making referrals where needed;

Gender and Cultural Considerations

- Exploring gender and cultural perspectives in relation to OCSEA;
- Social responses to, and impacts of abuse and exploitation on girls/young women, boys/young men;
- Exploration of effective and appropriate methodologies for engaging and working with boys and girls;

Ethical issues

- Ensuring principles of ‘do no harm’ within research activities;
- Consent and assent – principles and practice;
- Separating role of counsellor from role of researcher;
- Potential for re-traumatisation and appropriate responses, including grounding techniques;
- Facilitating referrals to support services if required;
- Working with translators/transcribers;
- Vicarious traumatisation;

Reflection and Debriefing

- Use of reflective practice and journaling in research;

- Debriefing with colleagues and survivor engagement consultant following each conversation;

Practice conversations and role plays

- Followed by discussion and de-brief with Survivor Engagement Consultants;

Data management

- Coding, anonymising and safe storage of all data (transcripts, visual images, photographs etc.);
- Processes for arranging translation of transcripts and visual materials;
- Uploading data sets using the secure platform;
- Deletion of transcripts and safe disposal of original visual materials;

Ongoing support and closure

- Preparation for follow up meetings with Senior Survivors Expert (who conducted the analysis);
- Joint reflection meeting with all Facilitators and Survivor Engagement Consultants.