Auto-driven photo elicitation interviews in research with children: ethical and practical considerations

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Children can sometimes find it difficult to articulate their experiences if they have to rely solely on words. Giving children the opportunity to use arts-based research approaches can support their participation in research and create a bridge that enables them to express their perspectives and feelings.

This paper focuses on the ethical and practical considerations when using photo elicitation interviews (PEI) in research with children. The discussion and examples provided are drawn from an international study that used auto-driven PEI, where photographs are taken by children themselves, to explore children’s experiences of living with a chronic condition and the impact condition management may have on their everyday lives.

In this paper we critically explore the issues arising from our use of PEI including children’s participation and engagement, balancing power and control, and keeping children safe. The main areas of focus for the paper are how the PEI provided a means of shifting control; how setting photographic boundaries influenced our PEI study with children; and how we addressed risks associated with the method. Our experience shows that PEI is an engaging and valuable research method, providing a powerful medium for obtaining rich data with children. However, PEI is challenging and it requires researchers to conscientiously address ethical and practical aspects that extend beyond those inherent to standard (words-alone) interviews.
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Introduction

When considering the landscape of children’s engagement in research there are many areas of broad agreement such as the right of a child to have their voice heard about matters that are of importance to them. Yet, even within these areas of agreement, there are points of tension and uncertainty, for example, how researchers enact children’s engagement and how children are kept safe whilst participating in research. To a greater or lesser extent, these points of tension create troublesome questions that researchers need to think through when planning, designing, undertaking and reporting research that aims to explore children’s perspectives.

The key points of tension broadly relate to the positioning of children in society. Typically the proxy perspectives of adults (parents and professionals) have been privileged within research with or about children, even though they may not reflect children’s perspectives (Lansdown, 2010). Another tension is that research with children as participants is seen by some as ‘risky’, troubled with ethical and practical hurdles (Carter, 2009), due to perceived issues in relation to their vulnerability and lack of competence. However, we argue that not including children’s perspectives in matters that affect their lives makes children more vulnerable and disregards their agency and their rights to participation in things that matter to them. Positioning children as vulnerable hides individual children’s abilities and competencies (Campbell, 2008), whereas providing opportunities for participation fosters autonomy, competence and resilience in all areas of children’s lives (Landsdown, 2005). Our responsibility as researchers is to consider these concerns and carefully select methods that promote the inclusion of children (Graham, Powell & Taylor, 2013) in a way that is developmentally appropriate and acknowledges children’s unique abilities and perspectives.
In this paper we present an overview of engaging children in research through using arts-based methods and propose how these, in general, can support children’s participation in research. Then, using a study we undertook using auto-driven photo-elicitation interviews as a starting point, we reflect on our experiences of using this method and some of the issues we needed to consider in both the design and the undertaking of the research. Whilst some of these issues will resonate with other research approaches with children, we found that PEI presents particularly nuanced challenges and opportunities.

**Engaging with children using arts based methods**

Our previous experience is that participatory, child-centered, visual-based approaches can facilitate the generation of quality data with children in a way that liberates their ability to express their views and perspectives (Carter & Ford, 2013). Conventional methods of collecting data such as focus groups and interviews may limit the depth of inquiry due to various factors including the child’s reliance on verbal skills, answering questions posed from an adult point of reference and their need to respond fairly immediately (Rapport, Wainwright & Elwyn, 2005). Visual methodologies, such as drawings and photographs can provide artifacts that assist recall, and stimulate reflection and conversation, at the same time empowering children in the research process (Epstein, Stevens, McKeever & Baruchel, 2006; Radley & Taylor, 2003). Children can engage readily with visual-based methods because for many children these methods are fun, can be easily mastered and can be a useful way of representing children’s thoughts, understandings and constructs in a way that is accessible to adults (Cook & Hess, 2007; Nic Gabhainn & Sixsmith, 2006).
Photo elicitation interviews (PEI)

PEI is based on the use of photographs, supplied either by the researcher or the participants, in the research interview context (Harper, 2002). PEI that uses photographs taken by the participant is also referred to as native, reflexive or autodriven photography (Epstein et al., 2006). The photographs can be used as visual inventories of objects, people and artifacts; a depiction of events as part of a collective or institution; and to portray an intimate dimension of a family, social group or person (Harper, 2002; Clark-Ibanez, 2004). The photographs in PEI can help to generate deeper understandings of the phenomenon under investigation, as the participant and researcher explore meanings generated through the photographs. Harper (2002) proposes that images can evoke deeper elements of human consciousness than words alone as the brain uses more of its capacity when processing images and words. This may account for PEI giving rise not just to more information, but also to a different kind of information than the traditional interview (Mandleco, 2013), resulting in a different way of telling as well as of knowing Photographs facilitate communication, aid recall resulting in more detailed discussion and bridge the gap between the two worlds of researcher and participant because understanding is anchored in the image (Harper, 2002) and participants can have more flexibility and freedom to discuss issues of importance to them (Wells, Ritchie & McPherson, 2013).

When undertaking research with children as participants, PEI allows the researcher to explore a child’s life world, examining those things that are of importance to the child, opening the study up to areas that could otherwise be overlooked if a purely adult perspective was driving the study (Clark-Ibanez, 2004). While the method presents real possibilities for research with children, potential challenges in using PEI with children can include gaining ethics and
research approvals to use visual methods with children, and the fact that PEI studies can be
more time consuming, expensive and demanding than traditional interviews (Meo, 2010;
Miller, 2015). The perceived difficulties associated with PEI appear to have limited the
widespread use of this research method (Miller, 2015). However, we would argue that whilst
these difficulties do exist, the control that PEI offers children and the immediacy of the
images are worth any effort required by researchers.

**An overview of our exemplar PEI study**

Our study used an auto-driven approach to PEI with 45 children aged 6 to 12 years with
chronic conditions (e.g., juvenile rheumatoid arthritis, haemophilia, Crohn’s disease) in
England, Australia and New Zealand (15 in each country). Following parental consent and
the child’s assent, the children used digital cameras to take photographs of their daily lives
(Figure 1). The photographs then formed the basis for an interview with a researcher to
explore children’s own perspectives and experiences of living with a chronic condition.

[Insert Figure 1 about here please]

We approached ethics review with a degree of trepidation due to reports that qualitative
research with children using visual methods can pose problems, obstacles and delays for
researchers attempting to gain ethical approval (Phelan & Kinsella, 2013; Miller, 2015),
particularly since review boards may have a limited understanding and knowledge of the
ethics associated with visual methods and feel more comfortable with more conventional
approaches to research (Miller, 2015). However, by providing strong justification for the
value of using photographs in our study alongside clear protocols regarding our actions if
any images suggested there was an issue about children’s safety we did not experience the obstacles and delays described by other authors.

Despite having to take the study through ethics review boards in three countries, our experiences were mainly positive, with only a small number of ethical queries raised. We experienced some variations in the different boards’ requirements for clarifications and revisions but in general, the approval processes were relatively straightforward and the requests we received from the ethics review boards helped to clarify our processes.

Within the next part of the paper we present an exploration of three key areas relating to the use of auto-driven PEI with children: shifting control; photographic boundaries; and mitigating risk.

Auto-driven PEI with children as a method of shifting control

A key tension in research with children is the power differential that exists between adults and children; PEI aims to shift that differential (Graham et al., 2013) through enabling personal control, and being empowering and participatory (Bareham, Locke & Yeandon-Lee, 2013). Reflecting on our study, PEI enabled children’s participation to be extended beyond the traditional role of an interviewee, and increased their active role and agency in the research project giving them control over the key aspects of data generation (for example, children determined what they took photographs of and which photographs they selected and talked about). However, we acknowledge that as researchers/adults we determined the research methods used for our study (the use of digital cameras for example) as well as the research question and largely what the children’s participation in the study entailed.
Children in control

However, we found that the children exerted control in different ways. The fact that children declined, withdrew, and flexed the guidance we had given them, reflects the level of control the children were able to exercise in the study. Some children declined to take part because the method did not appeal, others declined to participate as they ‘just wanted to be normal’ or did not want to focus on their condition. What we perceived to be an interesting project was at odds with the perceptions of some children who withdrew part way through; one child explained that the project was not as exciting as he thought it would be.

Although a concern raised at an ethics committee was that children might take too many photographs, this was not the case and using a digital camera allowed the child to be able to take as many images as they wanted and to review, save or delete them as desired. Some children only took a few photographs and preferred to talk about their experiences during the interview, often augmented by showing the researcher ‘art work’, toys, or locations (bedrooms, playrooms) within their home. Clearly, whilst PEI had a lot to offer, it did not suit all of the children and we used a flexible approach to the way in which we worked with the children accepting that as Hill (2006) notes, a ‘one size fits all’ approach was unlikely to work.

Photographs as constructions shaped by control

Photographs are constructions. We were aware of this when we designed the study and therefore explored issues around the construction of the photograph in the interviews. We knew that the context of taking the photo can be just as important as the image itself (Prosser,
We knew that the images the children took, and hence our findings, would likely be shaped by gatekeepers (other adults who oversee children’s lives including parents, teachers, researchers, social services) (Prosser, 2012) who might influence by guiding or directing how the children represented themselves and/or their environment and by editing out or prioritizing the images the children shared with us.

So although parental direction was evident in some cases, for example, some children made statements such as ‘Mum took that one’ or ‘Dad said I should take a photo of my medicine’, the children exerted their own control during the interviews. The children provided either a superficial explanation of these parent-directed photos and moved on or chose not to talk about them. The children were comfortable about dismissing photographs that they felt no particular ownership of and were able to reject ones where they felt their parents had interfered. Several of the children were astute about how difficult it was for their parents to ‘hand over’ control to them; they were well aware that power was in play. However, like Drew, Duncan and Sawyer (2010) we did not find this parental ‘contribution’ detracted from the overall value of the data because the children were clear about what photographs were important to them and why.

Some photographs depicted activities where a child had acted as director of photography and asked their parent to ‘click the shutter’. For example, one child staged being asleep in bed as he wanted an image of him ‘sleeping in’ on the weekend, to convey how his condition adversely impacted on his life. Typically, other photographs taken by parents were of the child taking part in an activity such as playing sports or self-administering treatments. Unlike the situation described previously where parents influenced the taking of images, these child-
directed photographs were of aspects of their life the child wanted captured and to talk about at the interview.

Control within the interviews

Our experience was that PEI made a positive difference in the power differential during the interviews, not least because the children were able to use the task-based activity of sorting and discussing the photographs as a way of mediating the researcher’s gaze (Rollins, 2005). Holding and talking about the photographs meant that the children did not have to maintain direct eye contact or talk directly to the interviewer. The interview was child-led as it was based on the images they chose to discuss and in what order they did so. The child’s authority was enhanced by their ownership and knowledge of the photos and they were able to drive the conversation about the images that they were responsible for creating (Le Dantec & Poole, 2008). As with other researchers we found that PEI encouraged the child’s active participation and choice in self-representation (Bareham et al., 2013) and ensured that we acknowledged the child as the authority in their own life (Liebenberg, Unger & Theron, 2014; Harper, 2002). We also found that PEI encouraged children to have a ‘freer rein’ in their choice of what they wanted to talk about in the interview, or not talk about. It was not uncommon, for example, for a child to say something like, ‘I don’t want to speak about that one’; we respected this, regardless of whether we would really have liked the child to talk about the image. Our sense was that using photographs to shape the interviews meant that the child was more at ease to talk about their everyday experiences and their meanings and like Epstein et al (2006) and Meo (2010) we believe that the use of photographs helped us to elicit longer and more comprehensive interviews than a traditional oral interview would have achieved.
The children also exerted their authority and control within the interviews when they demonstrated their superior technological capability by showing the researchers shortcuts to display their photographs. During the interview the children were physically in control of the display device and were able to skip or delete images as well as to take time over ones they felt were particularly important. Some children chose to discuss particular images during the interviews, but then told us we could not have these as part of our final image dataset. It was clear to us that whilst we had set boundaries in the study, the children also shaped and stretched the boundaries.

**Setting photographic boundaries in auto-driven PEI with children**

Boundaries limit freedom. So, although we wanted the children to have a ‘free rein’ to use their imagination and creativity to take photographs, we knew that we would have to create boundaries and that these boundaries (guidance notes) would potentially limit and shape the images that children could take of their activities and important parts of their life. All of the decisions we made in relation to the boundaries we imposed were discussed in detail and required our team to navigate the ethical/privacy requirements of our respective countries. There were two key reasons for creating boundaries.

The first related to providing some guidance about the nature of the study. As with other studies asking children to visually represent quite abstract ideas (Barker and Smith, 2013; Drew et al., 2010), our guidance aimed, in a non-prescriptive way, to help children, who ‘didn’t really know what to take photos of’. Our guidance also aimed to prevent the children from just taking lots of ‘happy snaps’ (Guillemin & Drew, 2010) and, like other studies such as Kaplan et al.’s (2007) study, we emphasised we were interested in all aspects of their
‘everyday’ lives, not just the ‘good bits’ or those directly related to the management of their condition.

[Insert Figure 2 about here please]

Our second boundary focused on our duty of care to keep the children and other people who were indirectly involved in the study safe; this involved careful consideration of many issues related to ethics and governance. This boundary is now discussed in more detail.

**Boundaries about who could appear in the photographs**

Although we were not specific about who the children should take photographs of, we had a duty of care to protect non-participants (for example, non-consented siblings, friends and family members) who might appear in photographs. Wiles et al. (2008) propose it is good ethical practice to try and gain verbal permission from identifiable individuals appearing in photographs, so we asked the children to check whether the people in their photographs, where practical and appropriate, were happy to have their photograph taken for the study. We did not expect the children to gain permission from every individual who might appear in the background of photos taken in public spaces e.g. in the park. For their safety, children were asked not to approach strangers for consent to be included in the background of a photograph.

However, many of the photographic situations were ones where agreement could be gained. Some other studies with children and young people have excluded images of people who did not provide written research consent (Holtby, Klein, Cook & Travers, 2015; Wells et al., 2013). We decided to devolve responsibility to the children and their parents for gaining verbal agreement from the people in their photographs. This was not a decision we took lightly; like Phelan and Kinsella (2013) we were aware that this agreement was outside of our
control as researchers. However, this devolved approach enabled them to take pictures of people who were important to them and gave them greater freedom to shape their data. When the children presented us with images with identifiable people in them, who had not provided direct consent for their on-going use in dissemination, we retained these as part of the data set but they will not be used in any publications or presentations.

**Boundaries about where to take photographs**

Our guidance highlighted the children should only take photographs in settings and situations that were part of their usual lives and where they felt safe (e.g., home and public settings such as parks). We did not want to prompt children to set out on their own to try and capture ‘exotic’ images and we stressed that the focus of the study was on their experiences of everyday life. Our guidance also reflected national laws or guidance that determine what and where it is permissible to take photographs. In all three countries it is permissible to take a photo of buildings, sites or people in a public place without asking permission. However, taking of photographs of children in public spaces without consent has been subject of concern, particularly in relation to the ease and accessibility of online publication (Australian Government, 2008). What constitutes public, semi-public and private spaces is not always clear, for example, hospitals are spaces where people have the right to expect privacy and yet are often deemed to be semi-public or public spaces (Clark, Prosser & Wiles, 2010). There are many places within a child’s world that fall within this rather grey area, for example, swimming pools, schools and hospitals. Although considered by many to be public spaces, there is specific regulation or guidance in most countries covering the use of cameras in these areas. Some children did take photographs in school and hospital settings, and in these instances our use of the photographs within the study adhered to the local rules.
Flexing boundaries

Although we imposed adult-led boundaries the children did not seem constrained by these or say that they were restricting; they took images of a wide range of settings (home, parks, school, family events, holiday settings) and reflected activities and events they wanted to record and discuss. As identified by other researchers, where and when children took their photographs was influenced by more than the boundaries we set (Barker & Smith, 2012; Holloway & Valentine, 2000). These influences included where they went with their camera, the opportunities they had to take pictures of things important to them and the things they had not, for whatever reason, photographed. Wherever possible, if the child wanted to keep the camera for an extended period of time to cover a specific event such as a visit from a relative we accommodated this. During the interview we gave the children the opportunity to talk about aspects of their lives they could not capture in a photograph. For example, one child said ‘I wanted to take a photo of me surfing, because, I like going surfing with my friends’; however, because it was winter the water was too cold for surfing.

Mitigating the risks associated with auto-driven PEI with children

Our commitment to children having as much control over what aspects of their lives to share led us to use the auto-driven method of photo elicitation rather than us selecting a series of photographs to trigger the interviews. We spent considerable time reflecting on the issues associated with giving the children control over image generation and how we could mitigate these risks. We were aware we could not control or predict what images the children would take and, as Phelan and Kinsella (2013) note, we knew that we would need to be highly reflexive during the study in order to navigate any risks and disclosures.
**Risks associated with ‘inappropriate’ photographs**

Although our previous experience with children using cameras suggested that they took the task of taking photographs seriously (Carter, 2005) concern about the inappropriate use of cameras has been described in a PEI study (Miller, 2015). Indeed, a lay member of one of our ethics committees was particularly concerned that children might take inappropriate photos of their ‘private parts’. Although we could not say with complete confidence that the children would not do this, the safeguards in place (e.g., careful assent process, guidance on taking images, and the children and their parents being able to check the final set of images) reduced the likelihood of this occurring and clarified how we would deal with any image that raised concerns. **None of the images the children shared during the project were ‘inappropriate’ and all were relevant and had meaning to them and their lives.** However, whilst not ‘inappropriate’, there were images that we considered with particular care. One picture taken by a six year old girl was of the implanted infusion device on her chest used for administration of chemotherapy. This picture included her areola. With her permission, the picture was cropped to show the infusion device but not her areola. Another picture was of a child in a stage dressing room during a dance competition. This picture included another child – facing away from the camera - who was not fully dressed. Although innocuous, with agreement of the participating child and parent we cropped the other child out of the image saved for our data set. Importantly, when we edited these images with the permission/involvement of the children, these changes did not apparently change the meanings they were interested in conveying.
Risks associated with dissemination of photographs

It was important for children and parents to be fully informed not only about how the photographs would be stored but also how they might be used in the future. Clark et al (2010) notes the importance of participants being aware of the implications of future use of photographs. Key statements were included on the consent forms (Figure 3) to ensure that participation was based on an informed awareness of what would ‘happen to the study photos’ and we checked their understanding and ongoing consent to this on each research visit.

[Insert Figure 3 about here please]

Whilst future use is clearly an important factor in any study, it felt particularly important to us with respect to our child participants. Once in the public domain, these images are permanent. So even if a child and parent(s) had readily consented to an image being used, their perspective may change in the future. This shift in perspective may result from a photograph that depicts a vulnerable point in the child’s or family’s life or if an image is taken out of original context (Clark et al., 2010). We also considered that whilst a 7 year old, for example, might agree to an image of them self-administering part of their treatment, a few years later their ‘older self’ might be less happy with the photograph. One way of dealing with this was to offer to anonymise the images by blurring or pixelating faces or other identifying features. We did this with several images we have used in presentations. For example, one child had his name printed on his sports top and we blocked his name and in another we blurred the faces in a photo of a group of friends riding at a skate park. Other
children and their parents were happy for their images to be included in the study without
textcycl"idents being ‘blurred out’. Whilst we appreciated the importance of offering anonymity
we also recognised that children and young people do not always appreciate having their
identities ‘blanked out’ (Wiles et al., 2008; Barker & Smith, 2012). However, we wanted
children and their parents to fully think through the implications of their identifiable
photographs appearing in published findings. In this way we hoped to reach a balance
between ‘silencing’ (Walker, Schratz & Egg, 2008) or ‘othering’ children in the study by
blurring them out (Nutbrown, 2011; Clark et al., 2010) and giving them the choice to
participate and be represented in the reported study.

Conclusion

The use of images in research has been seen as being untrustworthy and open to distortion
and manipulation (Prosser, 1998), yet this might be said of all research methods. The ethical,
methodological and practical challenges inherent to the method were present within our own
study. However, we were able to overcome these challenges and developed an auto-driven
approach to PEI that provided a way of engaging with the children in meaningful ways that
helped to illuminate our understanding of their lives. The interactive and flexible features of
auto-driven PEI gave rise to rich data that enabled ‘coming to know’ how children living with
a chronic condition make sense of the condition and how the condition impacts on their life-
world.

In our experience, the use of images changed the dynamic of our conversations with the
children, and as others have found the pictures the children shared at interview gave rise to
information that might not otherwise have emerged (Clark-Ibanez, 2004; Miller, 2015). PEI
enabled the children to engage in the study and speak up about their lives. Using digital
cameras gave control to the children over the images they took and shared. This level of control and ownership would not have been achieved if we had not used the auto-driven method of PEI but had instead used images supplied by the researchers.

As well as contributing unique visual data to our study the method also enabled the dissemination of the research data in a distinct way. In presentations of the research findings, the children’s photos have captured the attention of audiences; the images have provided an authenticity that is sometimes difficult to capture with words (Miller, 2015).

In PEI as in any research with children, researcher reflexivity is essential in all points of the research process. Issues of safety, respectful representation of participants in research findings and how images are used are all important considerations. There must be awareness that the limits and boundaries imposed by adults will shape the data collected by children and hence the findings but we propose that PEI shifted the control towards the children and allowed them to authentically report aspects of their lives that were important to them.

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Figure 1: Children’s photos

254x190mm (72 x 72 DPI)
International Children’s Illness & Symptoms Study

Information about taking the photos

Thank you for agreeing to take some photos so we can understand about how having a chronic illness makes you feel and how it affects your life.

Please take photos of you think is important, we want to know what YOU think!

Some things you could take photographs of

- Things you have to do because you have a chronic illness
- Things that seem different because of your illness
- People who help and things that help you
- Anything or anyone else you think we need to know about

Things to remember

- We are looking forward to seeing your photos but please make sure that anyone you take a photograph of (who isn’t part of our project and who hasn’t given us written consent) knows you are taking their photo. If you are not sure about whether you should take a photo, check with your mum or dad.
- Only take photos of things you want to share with us.
- You can delete any photos you don’t like or don’t want to share with us before you give back the camera.

If you have any questions or if you are worried about anything to do with the photos, then please contact [name] via the details on the information Sheet

Figure 2: Information to children

189x264mm (72 x 72 DPI)
Parental consent form
I understand that I will have the opportunity to look at the photographs my child has taken and that we will be able to decide which, if any, photographs can be used in the findings, report, publications and presentations. I understand that the researchers will destroy any photographs (prints and digital originals) that I do not give consent to be retained as part of the research study.

I understand that some of the things my child has said and some of their photos may be used in the final report and any publications. I understand that I may choose to have the photographs anonymised by having faces/identifying features blurred or choose to allow the team to use non-anonymised photographs. I understand that the research team will discuss and agree anonymisation and the use of photographs with me and my child.

Child assent form
I know I will be able to make a decision about which photos might go into the report and that my mum or dad will help with this.
I understand that if I decide that the researchers can use a picture of me in their report that people will know I was in the study.

Figure 3: Consent and assent