



UWS Academic Portal

Translating the principle of beneficence into ethical participatory development research practice

Brear, Michelle R.; Gordon, Rebecca

Published in:
Journal of International Development

DOI:
[10.1002/JID.3514](https://doi.org/10.1002/JID.3514)

Published: 21/01/2021

Document Version
Peer reviewed version

[Link to publication on the UWS Academic Portal](#)

Citation for published version (APA):
Brear, M. R., & Gordon, R. (2021). Translating the principle of beneficence into ethical participatory development research practice. *Journal of International Development*, 33(1), 109-126. <https://doi.org/10.1002/JID.3514>

General rights

Copyright and moral rights for the publications made accessible in the UWS Academic Portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

Take down policy

If you believe that this document breaches copyright please contact pure@uws.ac.uk providing details, and we will remove access to the work immediately and investigate your claim.

"This is the peer reviewed version of the following article:

Brear, M. R., & Gordon, R. (2021). Translating the principle of beneficence into ethical participatory development research. *Journal of International Development*, 33(1), 109–126. <https://doi.org/10.1002/jid.3514>

This article may be used for non-commercial purposes in accordance with Wiley Terms and Conditions for Use of Self-Archived Versions."

<https://authorservices.wiley.com/author-resources/Journal-Authors/licensing/self-archiving.html>

TITLE

Translating the principle of beneficence into ethical participatory development research practice

AUTHORS

Michelle R. Brear^{1,2,3} Rebecca Gordon^{4,5}

AFFILIATIONS

1. Global and Women's Health, Monash University (Australia), School of Public Health and Preventive Medicine
2. Afromontane Research Unit, University of the Free State- Qwaqwa campus (South Africa)
3. African Academy of Sciences (Kenya).
4. Faculty of Education, University of Cambridge (UK)
5. University of Birmingham (UK)

CORRESPONDING AUTHOR

Michelle Brear; Global and Women's Health, Monash University (Australia), School of Public Health and Preventive Medicine. 553 St Kilda Rd, Melbourne, Australia, 3004. +268 7634 3947.

ACKNOWLEDGMENTS

We greatly appreciate the time, knowledge and energy that participants contributed to this research and to the reviewer for their constructive feedback. During the fieldwork and preparation of this article MB was supported by an Australian Postgraduate Award (Monash University) and a Postdoctoral Research Fellowship (University of the Free State). We also owe a debt of gratitude to those who have been at the forefront of calling for more ethical and reflexive research practice, particularly Indigenous and Feminist scholars.

KEYWORDS (2-8)

Research ethics, beneficence, community participation, capabilities approach

TITLE

Translating the principle of beneficence into ethical participatory development research practice

ABSTRACT

Conceptualising and operationalising ethical principles like beneficence (maximise benefits, minimise risks) is complex. We contribute to understanding beneficence by critically analysing data documenting participatory international development research processes in Eswatini and India, informed by capabilities theory. Our results problematise (1) conceptualising beneficence solely in relation to either local or academic norms and (2) offsetting economic, social and cognitive, or individual, group and societal, benefits and/or harms, as either practice risks perpetuating unjust economic and/or epistemological hierarchies. Our results suggest that beneficence will be optimally achieved if it is conceptualised and operationalised considering diverse stakeholder perspectives and social justice theory.

KEYWORDS (2-8)

Research ethics, beneficence, community participation, capabilities approach

INTRODUCTION

Benevolence is a core research ethics principle, capturing researchers' commitment to assess the potential impacts of their research and develop strategies to minimise risks and maximise benefits (Pieper & Thomson, 2016). However, benevolence is challenging to operationalise in international development research, which occurs in resource-constrained and often cross-cultural settings. Challenges may arise because the benefits of development research are often unpredictable and typically occur, if at all, in the relatively long term. Further, perceptions of what constitutes "fair" risk or benefit are culturally specific (Lairumbi, Parker, Fitzpatrick, & English, 2012; Shore, 2006). In this article we (two white women from high income countries) respond to the call for research about the role of values, ethics and morals in (re-)producing inequalities in international development (Fischer & Kothari, 2011). We do this through a theoretically-informed, critically-reflexive analysis of our experiences attempting to translate the principle of benevolence into ethical development research practice in Eswatini and India.

What is benevolence?

Benevolence was first formalised in, and is thus grounded in the values of, Western biomedical ethics guidelines that were intended to inform positivist, experimental research involving participants as individuals. Benevolence has since been applied, essentially unchanged, to post-positivist, observational research, often involving participants as groups (Emmerich, 2017; Hébert et al., 2015). It is typically operationalised in two stages: conducting a risk-benefit assessment, which considers plausible physical, psychosocial, cognitive and/or economic impacts of research at individual-, community- and societal-level (Pieper & Thomson, 2016) and designing the research to minimise the risks, maximise the benefits, and ensure they are fairly distributed (Shore, 2006).

Minimising physical, social and economic risks to research participants is also referred to as non-malevolence (Hébert et al., 2015). Physical risks (e.g. side effects of experimental drugs) are the traditional focus of medical ethics guidelines (Dingwall, Iphofen, Lewis, Oates, & Emmerich, 2017). They are typically justified by the societal-level benefit of generalisable knowledge (e.g. a drug proven to cure a disease). In social (including development) research, neither physical harms nor generalisable knowledge are expected. Risks are typically economic and/or psychosocial (Emmerich, 2017). Economic harms include both direct (e.g. cost of research-related travel) and indirect (e.g. diversion of time from economically productive activities) research-related costs (Pieper & Thomson, 2016). Psychosocial harms include stigmatisation (Pieper & Thomson, 2016) and the establishment or reinforcement of social

hierarchies (Brear, 2018a; Molyneux, Mulupi, Mbaabu, & Marsh, 2012). Although often assumed to be less significant than physical risks (Emmerich, 2017), economic and/or psychosocial harms are potentially long term and/or serious.

To fulfil the principle of beneficence, researchers must further ensure that their research generates cognitive, psychosocial and/or economic benefits (Hébert et al., 2015). Cognitive benefits include the creation of knowledge with (albeit abstract) societal-level impacts (Emmerich, 2017) and development of knowledge skills and/or or critical thinking abilities that enable individuals or communities to better control their development (Shore, 2006). Psychosocial benefits include enhanced self-worth associated with having a voice (Hoeyer & Hogle, 2014), meeting new, potentially influential people (Brear, 2018b) and/or altruistic feelings (Pieper & Thomson, 2016). Finally, material benefits include tokens of appreciation, access to free services (Molyneux et al., 2012) and/or payments for participation (but not reimbursement of research-related expenses which achieves only non-maleficence) (Pieper & Thomson, 2016). It is widely accepted that different types and levels of risks and benefits can be offset and that beneficence cannot be separated from understanding the values of participants (Pieper & Thomson, 2016). However, research ethics guidelines provide limited advice about how to consider participants' values in balancing risks or benefits in international development research (Pieper & Thomson, 2016). Development ethics theory provides some insights.

Translating beneficence into ethical development research practice

Sen's (1990) "capabilities" approach is widely recognised as seminal in conceptualising "development as freedom" of human agency to plan and enact a good life (Sen, 1990). It situates freedom and agency as having material, cognitive and psychosocial bases which are non-commensurable (e.g. more learning cannot replace food or friendship) (Nussbaum, 2000). The capabilities approach is congruent with the widely accepted notion in international development research that cognitive benefits, although important, cannot substitute for formal recognition (e.g. co-authorship) of indigenous knowledge holders and related economic rewards (Smith, 2013). However, ethics committees in high-income contexts tend to discourage economic benefits for research participants because of concerns that they coerce participation (Largent & Lynch, 2017). Paradoxically, incorporating material benefits into the research design may be particularly necessary to avoid exploitation of participants in development research who value economic benefits, including conveniences (e.g. food and drink) and/or compensation for time contributed (Molyneux et al., 2012). These values are

enshrined in several ethical guidelines from low- and middle-income countries. For example, the South African Medical Research Council mandates payment for time contributions of HIV drug trial participants (NHREC, 2012). Alternatively the Kenyan Medical Research Institute provides participants with refreshments and free medical care received as part of trial participation (Molyneux et al., 2012). These examples demonstrate the complexities of trading-off different types (economic, cognitive, psychosocial) and levels (individual, community, social) of risks and benefits. They also highlight the potential mismatch between researchers' and research participants' conceptualisations of beneficence.

Participatory risk-benefit assessment

Mismatches between researchers and participants' conceptualisations may be addressed through involving research participants, or those in their community, in conceptualising fair risk and benefit (Pieper & Thomson, 2016). However, relativism, (i.e. assuming whatever locals value is "best" for people of that context) must be avoided (Gasper, 1996), because people deprived of material resources often moderate their expectations to cope with deprivations (Nussbaum, 2000). They may expect and demand inadequate benefits for participating in research (Tam et al., 2015). Further, there are social hierarchies within and between communities and academics that influence whose voices are heard and/or heeded in risk-benefit assessment (Cornwall, 2003). Community "representatives" invited to participate in development research are often relatively powerful people who might act in the interest of elites (Brear, 2018a; Cornwall, 2003; Gasper, 1996; Nussbaum, 2000). Academic researchers may control decision making even when community members are invited to contribute their perspectives (Brear, 2018b).

A capabilities-based conceptualisation of risks and benefits

Taken together, the mismatches in conceptualisations of beneficence, tendency for people to moderate preferences and community-academic heterogeneity and hierarchies, make equitably conceptualising beneficence in development research complex. Thus, capability theorist Martha Nussbaum (2000) extended Sen's (1990, 1999) seminal work in conceptualising development as freedom, by articulating a universalist definition of the capabilities which constitute human agency (Box 1).

Box 1: Central Human Capabilities (Nussbaum 2000)

1. Full length and quality life.
2. Bodily health and the material bases (e.g. food, healthcare and shelter) to achieve that.
3. Bodily integrity and the material, cognitive and social bases to choose pleasurable and avoid unwanted bodily experiences.
4. Truly human use of the senses, imagination and thoughts, cultivated by adequate formal and informal education.
5. Fully human emotional experiences and attachments, including pleasurable emotions like love and trust but not overwhelmingly negative emotions like grief, anxiety and anger.
6. Practical reason to conceptualise and reflect upon what constitutes a good life.
7. Mutually respectful affiliations, based on concern, recognition, dignity, justice and self respect and treating each other as dignified beings of equal worth.
8. Respectful co-existence with other species.
9. Recreation.
10. Political and material control over one's environment, including participation and ownership.

Nussbaum's (2000) capabilities encompass people's social, political, economic and material functionings and the (social, political, economic and material) bases for achieving them. While potentially imperfect, this conceptualisation of universal values is based on extensive philosophical and empirical research across different cultures (Gasper, 1996) and is intended to be modified in response to new empirical findings (Nussbaum, 2000). The central capabilities are broad enough to be realised in plural ways depending on the culture and context (Nussbaum, 2000), yet specific enough to guard against the 'anything goes' logic of relativism by which capability deprivations may be justified by local values and norms (Gasper, 1996). The central human capabilities are situated within the broader body of capability theory, according to which each person is a rights-bearer (Nussbaum, 2000). This theoretical perspective situates the norm of non-payment for research participation as an extension of broader social norms which structure and justify highly unequal economic rewards. It

conceptualises: (1) economic benefit as having a particular and non-substitutable (e.g. with cognitive or social benefits) place in enabling human agency; and (2) each individual as an important “end” rather than a means to others’ (including researchers’ or society’s) desirable ends. These features make Nussbaum’s articulation of capabilities an insightful framework for conceptualising and analysing beneficence in development research contexts.

Aims

There is limited evidence regarding how beneficence is conceptualised by community stakeholders nor how the process of engaging stakeholders to operationalise beneficence occurs in international development research contexts. Given the complexity and cultural specificity of values related to risk and benefit, such empirical evidence is needed to optimise ethical guidance, review and practice. We therefore aim to (1) detail how we engaged community members and other stakeholders in attempting to translate the principle of beneficence into ethical development research practice, and (2) analyse the strengths and limitations of our practice guided by Nussbaum’s capability theory.

STUDY DESIGN

We address this aim by analysing data detailing participatory development research processes in Eswatini and India.

Research setting and participants

Eswatini

The Swazi case study was approved by the Monash University Human Research Ethics Committee (CF13/994–2013000486) and the Swaziland Scientific and Ethics Committee (MH599C). The setting was a rural community of approximately 700 residents, marginalised due to difficulty accessing essential services, economic poverty, health problems and geographic isolation (Brear et al., 2018). The study was conducted in partnership with a community- and women- led early childhood development (ECD) organisation which ran a preschool and nutrition program. The community was selected purposively because MB had been participating independently (i.e. unpaid and not attached to an institution) in the ECD intervention in for over five years. She was thus familiar and had some overlapping interests with community members, despite many differences, including being positioned by her educational and economic status, ethnicity and Western upbringing and values.

The multiple method study had two overarching aims: (1) to use participatory research to characterise health capability in the community, and (2) to document the process and outcomes of the participatory research process. The participants were ten community members who participated as co-researchers in all aspects of the process (as reported in Brear, Hammarberg, & Fisher, 2020), including development of ethical procedures. They were selected purposively for age and sex diversity, by MB and ECD intervention staff and volunteers, from among 12 people who responded to locally-placed advertisements. They received a stipend commensurate with hours spent participating in their dual co-researcher-participant role and perceived they also benefited cognitively and psycho-socially from co-learning aspects of their participation (as reported in Brear, 2018b).

India

The research in India was approved by the Cambridge University Ethics Committee and as part of the Indian Government visa application process for RG¹. The partner organisation was a grassroots, community-led organisation providing microfinance services to approximately 20,000 women in self-help groups (SHGs) in rural Bihar. More than ninety percent of its members were from scheduled castes or tribes or other disadvantaged castes², who experienced constrained access to financial services (Desai & Joshi, 2012). The organisation was selected purposively because RG had been working with them for nearly four years. Despite having a strong working relationship with the organisation RG was positioned by her age, ethnicity and educational status in particular, and also by being British in a country subjected to British colonialism; this is particularly relevant given the history of exploitation broadly and related to knowledge extraction (Smith, 2013). The primary focus of the study was to explore the impacts of being a member of the organisation on women and their daughters' education.

There were two groups of participants: (1) the organisation's 31 staff (including five men) and (2) members of 30 SHGs (comprised of ten women on average) selected randomly (for fairness), including two women who were also staff. Most women staff in the organisation had been recruited from and continued to participate in SHGs, and were from the communities in which they worked. The male staff predominantly fulfilled support roles including community outreach and opening bank accounts. Both male and female staff participated in some aspects (including discussing ethical procedures) of the research (as defined by Brear et al., 2020),

¹ The ethical approvals did not come with a reference number.

² Scheduled Castes (SCs) and Scheduled Tribes (STs) are officially designated groups of historically disadvantaged people in India.

which was guided by participatory principles of cultural sensitivity and collaboration. This collaboration was important, in line with the researchers' positionality, so as to ensure that methods and practicalities of the research were culturally sensitive and appropriate.

Data collection methods

Core method- field diaries

In both settings, data about collaborating with co-researchers (Eswatini) and organisation staff (India) to conceptualise and operationalise beneficence were detailed in research diaries (RDs). Handwritten notes were collected and expanded at the end of each day. Research diaries were intended to be reflexive (i.e. facilitate our critical thinking) and to document our experiences.

In Eswatini the co-researcher participants attended a series of experiential learning workshops and co-designed a mixed-methods study to assess health capability, in which members of the broader community were respondents in a demographic and health survey (DHS). The DHS was implemented as a household census with the person in charge of domestic work, typically a woman, responding. MB's RD documented (1) workshop activities in which the co-researchers (a) deliberated and selected procedures for operationalising ethical principles (including beneficence), and (b) reflected on their experiences collecting survey data and providing tokens of appreciation to participants, and (2) direct observation of DHS interviews at 14 households.

In India, RD data documented meetings and informal talks during the research (including discussions about beneficence) and post-fieldwork discussions in which staff reflected on the study's ethical procedures and beneficence-related outcomes, to discuss RG's proposed writing of this article with staff, and to inform this analysis. These were conducted in Maghi/Hindi and translated as they occurred by a male staff member. He was selected by RG after a pilot discussion because of his involvement in founding the organisation, he had greater contextual knowledge and trust than others with the necessary linguistic skills.

Supplementary methods

In Eswatini the co-researchers also participated in audio-recorded English-language focus group discussions (FGDs), in which they periodically shared their experiences designing and implementing the research. In India, SHG members were asked in FGDs (audio recorded in Maghi/Hindi and transcribed in English) about the benefits and harms related to being members of the organisation. In some groups this prompted reflection on beneficence in the research.

Analytical approach

We conducted sequential analysis (Simons, Lathlean, & Squire, 2008) of all data related to beneficence, for each case. This technique involves the researcher using a second analytical approach to generate further insights from a qualitative dataset (Simons et al., 2008), in this case insights about beneficence, a topic that we did not purposively collect data about. Rather, the focus of our sequential analysis was inductively determined by reflecting on our experiences (including discussing beneficence with co-researchers and participants, writing this article).

Our analysis was an iterative, abductive (i.e. inductive-deductive) process. It involved repeated readings of data, in which we combined the typical ethnographic approach of identifying, comparing and contrasting to reveal patterns and recurring ideas (Madden, 2017), with the alternative approach of theoretically deconstructing significant one-off events to reveal their meanings (Denzin, 2001). Our analyses were theoretically informed by Nussbaum's (2000) articulation of the capabilities approach (outlined above) and research ethics guidelines. Inductively, our analyses were informed by our complex lived experiences attempting to translate the principle of beneficence into ethical research practice, from our position as academic researchers, attached to institutions in high income countries, which expected us to adhere to (and did not encourage us to scrutinise) ethical guidelines formulated from Western biomedical principles.

RESULTS

Conceptualising beneficence

The Swazi case occurred in a context where the co-researchers reported community members, “can say, ‘yes, I’ll participate [in a survey] because... I don’t have a soap in my house’”. They also reported being asked about research-related benefits, which for community members did not include knowledge. For example, one co-researcher reported (FGD:13/12/2012):

Co-researcher: I tell them that the only benefit that I’m sure of [is] more information ...

MB: And they don’t... think getting more information is really a benefit?

Co-researcher 1: Yeah ... they want something that they can carry by their hand...

Several activities were planned to discuss how beneficence would be operationalised in this context. First, two small groups of co-researchers independently discussed possible strategies. They broadly agreed that risks arising from responding to the survey were minimal [e.g. “a little bit of embarrassment” (FGD:13/12/2012)]. The co-researchers still thought it would be appropriate to provide a token of appreciation for time taken to complete the survey (approximately one hour) and knowledge contributed, but only “If you Michelle can afford it” (RD:14/01/2013). They suggested various possible tokens of appreciation. Through whole group discussions the co-researchers determined to give each survey respondent a “green bar” (RD:14/01/2013) (i.e. 1kg laundry soap) upon completion of the survey interview. They decided not to inform participants of this “benefit” beforehand, to avoid undue influence.

During ethical review, one committee rejected the application, requesting that the soaps be “done away with”, reasoning that giving “incentives... set a wrong precedent for future researchers” (Letter from ethics committee). Information about the types of researchers who might be affected or why the precedent was wrong was not provided in writing. However, MB understood from discussions with ethics committee members that the precedent applied to researchers conducting large scale surveys (e.g. national DHS) and was wrong because these researchers might not be able to afford to follow the precedent. This could reduce response rates if participants came to expect soap (or similar tokens) for research participation (RD:25/06/2013).

MB discussed the ethics committee’s recommendation with the co-researchers, including their labelling of the soaps as “incentives” (RD:08/07/2013). The co-researchers, following reflexive small group discussions, maintained that giving “tokens of appreciation” was the most ethical approach. They requested MB write to ask the ethics committee to reconsider the recommendation and permit them to give soaps. MB indicated her interest in writing an academic article about negotiating beneficence, as part of her study of the process and outcomes of participatory research (RD:08/07/2013). She wrote to the ethics committee, reasoning that the soaps were not intended to be “incentives” but a way of respectfully recognising participant contributions and suggesting this was a positive precedent. The ethics committee reconsidered and approved giving participants soap. The commencement of data collection was delayed by eight weeks by these negotiations.

In India, deliberations about how to minimise risk for SHG member participants, led to organisation staff, who participated in the research process as part of their work for the

organisation and did not receive economic benefits specific to the research, recommending that FGDs should take place within SHG meetings. This strategy was intended to minimise inconveniences that attending additional meetings might cause (e.g. economic harms associated with absence from agricultural work) and link the FGDs to meetings from which the participants were already perceived to benefit as SHG members. Staff also recommended limiting FGDs to 45 minutes and following SHG norms, including that attendance was not mandatory (as in some microfinance organisations) nor was it paid. Meetings often included wide ranging discussion and problem-solving, as well as information sharing: “We talk more in our group... a lot on almost every topic” (FGD:02/11/17).

Staff recommendations not to provide material benefits to SHG participants, were firstly due to concerns that material benefits may be perceived as bribes intended to encourage positive comments. Staff also expressed concerns that material benefits might make participants “feel compelled to join” (RD:21/10/17) the FGDs. Further, staff were concerned that providing material benefits would be unfair, because only the members of randomly selected SHGs would receive them. Other groups might feel less valued (RD:21/10/17).

Cognitive changes for SHG members, which staff perceived would arise from participating in FGDs, were considered adequate benefits. Specifically, the FGDs were expected to increase knowledge about the organisation’s impact (framed as an organisational-level benefit) and how they could improve the work they were doing for members. RG accepted and implemented these recommendations (RD:21/10/17 and 22/10/17).

Operationalising and reflecting on beneficence

In Eswatini the co-researchers implemented their community DHS as a census by face-to-face interview at respondents’ households. They did not inform potential participants that they would receive a token of appreciation until interview completion. However, news of survey participants receiving soaps circulated rapidly in the community; people started joking with the co-researchers about the soaps. One reported that, “When you do the interview... they tell the neighbour ‘I am going to wash’... So even when you are moving [around the community doing surveys], they [the neighbours] call you, ‘hey, when are you going to come back, I am ready for you, I want a [green] bar soap?’” (FGD:30/09/2013). Many participants demonstrated their appreciation for the soap by requesting the co-researchers pass on their thanks to MB.

The co-researchers perceived that the soaps acted as tokens of appreciation rather than incentives. For example, one said, “[the soaps were] unexpected because we started [by

completing] the survey. After that we will say ‘oh, Michelle and we say thanks with this [soap],’ so they [participants] are very happy” (FGD:05/09/2013). MB’s observations of early survey interviews, which occurred before rumours about the soaps had started circulating, concurred. For example, at one household:

[The respondent] agreed unenthusiastically to complete the survey... She didn’t move from her position [making a grass mat, with her back to the co-researcher]... When the co-researcher... said that before going we wanted to give a thank you and handed her the soap... [The respondent] clapped her hands to receive it (the traditional Swazi way to receive with thanks). She got up from where she was sitting at the mat and said she wanted to walk us outside. (RD:03/09/13)

People seemed to enjoy participating in the research. For example, during the above-mentioned interview a group of neighbours arrived and listened to about 30 minutes of the interview (RD:03/09/2013). At another homestead the entire extended family joined in (RD:16/09/2013). An elderly man smiled throughout his interview and told the co-researcher he was happy to participate because he was home alone doing nothing (RD:19/09/2013). MB’s observations also concurred with the co-researcher’s perception that the risks were limited to a little bit of embarrassment or discomfort. For example, one participant in their 20s, whose mother had recently died, appeared uncomfortable when answering questions about his siblings’ parents (RD:19/09/2013). Others appeared uncomfortable reporting using the forest as a toilet (i.e. open defecation) and/or that themselves or other household members were living with HIV (RD:03/09/2019). No other risks were observed.

In India, staff perceived that avoiding material benefits effectively limited the organisation-level risks (i.e. social disruption, coercion and desirability bias) they were concerned about. They perceived SHG members actually benefited cognitively and socially due to opportunities the FGDs provided to reflect, provide feedback to the organisation, “discuss culture and practice” (RD:04/08/18). Staff perceived the individual risks of participating were minimal, limited to the minor economic harms of diverting time from subsistence agricultural work, which some SHG members reported they had done. For example, one said “We have left our work to attend this meeting so that we can meet some new people and talk to them” (FGD:19/11/17). Another mentioned that: “when we sit together... we will see what others are doing, and following them I can also start the same for my development” (FGD:10/11/17)

Another discussed participating in terms of sharing her knowledge noting that a “Woman like [RG] is being taught by us” (FGD:17/11/17).

Staff who participated in the research process reported feeling that they had also benefited cognitively. For example, one said, “[Participating in research] gives us learning” and others perceived they benefited from gaining experience facilitating FGDs and talking about their work “to the outside world” (RD:04/08/18). Staff also perceived that the “findings from the research” would help them improve the organisation’s microfinance work (RD:04/08/18) and that they would gain recognition for the work they were doing. For example, one said “in this process there are at least two people who work elsewhere who are impressed with the work of [the organisation]” (RD:04/08/18). The research did connect the organisation “to the outside world” in some ways. Staff were invited to talk about their work at a local research institution to which RG was affiliated. A story about this meeting was published in a local newspaper. Finally, staff conceptualised as beneficial money contributed to the organisation by RG as a token of appreciation and to cover specific research-related costs that also enabled their ordinary work (e.g. travel to SHG FGDs, before and after which organisation staff would conduct their own work).

During writing this article RG referred to this later analysis of the data with staff to discuss with staff to discuss whether material benefits could be given whilst mitigating the risks they shared. They suggested that she could donate money to the savings accounts of SHGs that contributed and a smaller amount to SHGs that did not participate. They perceived this would benefit without creating any post-research risks associated with giving individual economic benefits (RD:14/05/19;29/06/19). RG accepted and implemented these recommendations.

DISCUSSION

We now discuss the implications of our results for translating the principle of beneficence into ethical development research practice from a capability perspective. Our discussion is organised according to three themes. These are: (1) replacing relativist and imperialist approaches with social justice perspectives; (2) equitably balancing types and levels of risk and benefit; and (3) broadening community participation in beneficence deliberations.

Strengths and limitations

Our results and their implications must be interpreted with cognisance of the strengths and limitations of our studies. Working with co-researchers and translators meant that we effectively privileged the voices of select community members with biases and self-interests.

In the Indian case a single man translated all information. Although trusted and critically-reflexive, he held power and interests due to his position. Although ten in number and lay-community members, the Swazi participants developed vested interests as co-researchers who wanted to perform and present themselves as having performed their roles well, to MB who held power in the research group due, for example, to her education and economic status. While we consider close collaboration the great strength of our research approaches, we realise working in partnership with community members diversifies, and potentially balances, but does not eradicate bias.

As noted above, we did not purposively collect data about beneficence. This comes with the limitation that we did not directly ask participants to discuss the concept, rather we captured the spontaneous thoughts and opinions of people trying to balance risks and benefits in ways they perceived fair, according to their values and real-world contexts. Our results are intended to provoke critical thinking and highlight nuances and complexities related to specific settings, rather than be generalisable. Given the longstanding call for empirical research on values, morals and ethics in international development (Fischer & Kothari, 2011) and lack of ethical guidance and empirical evidence to inform the adaptation of ethical guidelines for development contexts, we believe our theoretically transferrable results make an important contribution.

Avoiding relativism and imperialism to achieve capabilities

Our results highlight the need for development researchers to avoid relativism (following community norms uncritically) (Gasper, 1996) and imperialism (imposition of academic norms) (Bourdieu & Wacquant, 1999) as they attempt to operationalise beneficence. The relativist approach is problematic in international development contexts where slavery in the colonial era (Smith, 2013) has been followed by the proliferation of unpaid participation models within development programs (Closser et al., 2019). Both have denied people opportunities to develop the economic/material bases needed to achieve the *capabilities* that constitute ‘development’ from our theoretical perspective (Nussbaum, 2000). These material bases will remain unchanged (i.e. no good will be done), or at worst be undermined (i.e. harm will be caused), when economically poor people divert their productive time to research participation from which they do not benefit materially (Pieper & Thomson, 2016).

Observations and/or reports of participants leaving agricultural work (India) or continuing to make handicrafts during survey interviews (Eswatini) show that participating in research diverted participants’ time from economically productive work. Such economic harm must

(theoretically) be offset with proportionate gains, to achieve non-maleficence (Pieper & Thomson, 2016), regardless of whether the participants actually earned income (Largent & Lynch, 2017). The possibility that economic benefits might unduly influence people to participate (Largent & Lynch, 2017) does not (at least in theory) diminish researchers' minimum obligation to achieve non-maleficence (i.e. do no harm) (Pieper & Thomson, 2016).

The obligation to balance economic risks and benefits is recognised and operationalised as an obligation to individual study participants in ethical guidelines in some international development research contexts [e.g. South Africa (NHREC, 2012) and Kenya (Molyneux et al., 2012)]. However, both relativist and imperialist thinking distracted from the achievement of beneficence in our research, which was informed primarily by Western ethics guidelines. In Eswatini, the ethics committee concern that giving soaps would set a precedent, was rationalised drawing on both relativist and imperialist arguments. Following the academic norm of giving nothing back to research participants, as recommended by one ethics committee, would have denied economically poor individuals a (material) benefit they valued. The recommendation was justified in order to protect the interests of well-funded research institutions and the social-level benefit of the generalisable knowledge they might produce. Perhaps inadvertently and probably related to RG's focus on risk (related to positionality, including education and upbringing), a similar dynamic was observed in the Indian case, where staff who were typically also community members, recommended against individual-level economic benefits justifying this in terms of organisation-level benefits. In both cases a focus on collective risk rather than individual benefit detracted from treating the participants in the research as important "ends" in their own right, which is the only ethical option from the capability perspective (Nussbaum, 2000). This is unsurprising given the overwhelming focus of the Western ethical guidelines we were required to follow on minimising risk rather than maximising benefits (Largent & Lynch, 2017).

Concerns about undue influence to participate were raised in India but not Eswatini. They were shown through our analysis to be unfounded because in both cases people did not object to, and often reported they enjoyed, participating. Notably, people cannot be unduly influenced to do something they would reasonably decide to do anyway (Largent & Lynch, 2017). Situating risks which are not plausible as justification for denying research participants benefits could also be considered academic imperialism. Imposing the academic notion that entitlements cannot be benefits (Pieper & Thomson, 2016) would also have equated to imperialism in our research contexts. The results of our study indicate that participants in development contexts

value and may be able to enhance their capabilities (albeit in minimal and insufficient ways) by receiving economic/material (e.g. soap), cognitive (e.g. knowledge) and/or psychosocial (e.g. respect) “goods” that they are entitled to.

This has two implications for international development research. Firstly, the recommendation that “participants should be compensated in the manner that would generally be expected in their locale for assuming similar burdens and time commitments” (Largent & Lynch, 2017), is in tension with achieving beneficence. Results from Eswatini suggest that economic benefits are valued by participants and considered appropriate forms of compensation for research contributions, even if providing such compensation is not the norm [as for the survey participants who were accustomed to doing unpaid “women’s work” in the community and at home (Brear, Shabangu, Hammarberg, Fisher, & Keleher, 2019)]. This is arguably true of all development research contexts, where poverty is widespread and socially unjust norms regarding economic (non-) compensation, established in the colonial era (Smith, 2013), detract from achieving development (whether defined in terms of economics or freedom) (Nussbaum, 2000). Based on our findings we suggest that compensation for research participants should be framed in terms of social justice not social norms. From a capabilities perspective this would shift the focus to forms of compensation that would best enable agency (Nussbaum, 2000; Sen, 1990).

Second, our results add to a growing body of predominantly biomedical research literature (Largent & Lynch, 2017; Molyneux et al., 2012), by showing that concerns about the coercive effects of economic benefits are also unfounded in social science research. Imposing concerns about coercion on research participants who want to participate in research and value personal material benefits, is a form of academic imperialism (Bourdieu & Wacquant, 1999). It privileges academic concerns over participant values and desires and follows the colonial-era paternalism of assuming academics know what is best for research participants (Smith, 2013). It undermines ethical research practice in international development by reinforcing non-payment as the norm. Perpetuating the norm of non-payment undermines capability expansion (Nussbaum, 2000), which our theoretically-informed analysis situates as the goal of beneficence. Providing economic/material benefits can contribute to research participants accessing the material bases they need to achieve capabilities (e.g. enable them to access soap which contributes to the bases for *bodily health*). It could also have positive effects on capabilities like use of the *senses imagination and thoughts, control over environment and respectful affiliations*, compared to the detrimental psychosocial effects on these capabilities,

that socialising people targeted with development research to accept non-payment could be expected to have (Nussbaum, 2000). For example, providing material benefits for research participation could contribute to people developing perceptions of themselves as deserving payment for their contributions (if not establish a precedent in which powerful institutions are expected to make such payments to economically-poor research participants).

Balancing types and levels of risk and benefit

From a capability perspective, enabling individuals to access “benefits” that contribute to their achievement of capabilities (Nussbaum, 2000; Sen, 1990), should be the focus of beneficence. Only individuals are rights-bearers according to capability theory (Nussbaum, 2000). Accordingly, different (cognitive, psychosocial and economic) risks and benefits for individual research participants cannot be traded-off with higher- (community-, organisational- or societal-) level risks and benefits. Capabilities theory suggests that people may benefit from things they do not explicitly desire (Nussbaum, 2000) (e.g. information/knowledge, which was not considered a benefit by Swazi participants). Alternatively, they may not benefit from things they value or perceive beneficial (e.g. information/knowledge, perceived as beneficial in the Indian case). Thus, achieving an ethical balance between different types and levels of benefit and risk must consider, but not essentialise, either local or other (e.g. academic) values.

The ethical idea that cognitive benefits may arise from participating implies that participants learn from researchers (and/or other participants). It is reminiscent of colonial-era assumptions about knowledge deficits of colonised people, and ironic given that international development research nowadays often aims to recognise and legitimise indigenous knowledge, which researchers benefit (economically and cognitively) from (Smith, 2013). Further, if the aim is to enhance capabilities, the focus on cognitive benefits implies that insufficient or inadequate knowledge (rather than, for example, lack of material resources) is the cause of underdevelopment (Closser et al., 2019). In India, staff focused on cognitive benefits for the organisation and their ability to better support SHG members. However, reflecting on RG’s positionality, it is important to emphasise the potential risks for participants associated with sharing their knowledge in relation to historical, and continuing power structures between countries [e.g. scientists stealing indigenous people’s knowledge and artefacts for their own social, economic and cultural benefit while giving nothing back to participants and potentially harming them through deficit representations (Smith, 2013)]. Given the history of non-recognition, and theft of indigenous knowledge and deficit representations of indigenous people, contributing knowledge to international development research could reasonably be

conceptualised as inherently risky (Smith, 2013). Conceptualising knowledge as a benefit that participants gain from research, but not as something that they potentially risk, is inequitable and another manifestation of academic imperialism.

From the capability perspective, knowledge is only beneficial to the extent that it provides a basis for expanding capabilities (Sen, 1999). In India, the critical thinking, learning from each other and helping outsiders learn that some SHG participants mentioned, likely had a minimal positive influence on the capability to use the *senses, imagination and thoughts* (e.g. to dream of more equitable social norms). However, discriminatory norms also have material bases, apparent for example in the gendered division of paid versus unpaid/underpaid work (Brear et al., 2019). More or better knowledge is unlikely to expand capabilities by actualising more equitable gendered norms (e.g. to the achievement of *respectful affiliations* and *political and material control of environments*) in the absence of material/economic changes. In Eswatini, participants were already acutely aware of health capability deprivations such as drinking dirty water and open defecation but were unable to enact practices that they valued because they lacked the material/economic resources [e.g. to build latrines or reticulated water systems (Brear et al., 2018)]. Imposing the notion that participants will benefit adequately from knowledge created through research when they also value and desire economic benefits, is unethical when considered in relation to capability theory.

These results have several important implications for balancing types and levels of risk and benefit in international development research. They indicate that recommendations to offset economic harms with cognitive benefits should be scrutinised. In the absence of economic/material benefits, the substantive effects of cognitive changes are likely to be (at best) minimal and/or long term (Nussbaum, 2000). The potential detriments of conceptualising knowledge gained from research participation as beneficial, transcend empty promises (i.e. if knowledge turns out to be non-beneficial). Such conceptualisations reinforce the epistemic hierarchies that international development research should aim to break down (Smith, 2013).

Diversity of community participation beneficence deliberations

Our two cases demonstrate the potential for different academic and community stakeholders (lay-community members, organisational staff and ethics committee members) to conceptualise fair risk and benefit antithetically. The lay-community co-researchers in Eswatini focused on individual-level benefits (for research participants) and risks (for MB who paid for the soaps) rather than higher-level risks and benefits, which were the focus of the ethics

committee. In India, staff focused on more collective harms that could result from providing material benefits, rather than individual-level harms. Evidence from other development research contexts (Lairumbi et al., 2012; Molyneux et al., 2012), showing that participants value and expect direct, immediate and tangible benefits (as in the Swazi case) suggests that SHG participants probably would have valued such benefits. However, they also indicate that staff concerns regarding the potential social disruptions associated with providing material benefits to only some SHGs were very likely (Molyneux et al., 2012). In the real-world of development research, staff recommendations, likely informed by the local norms of non-payment and RG's focus on risk, were initially accepted by RG. The value of a theoretical analysis of these discussions for this article was evident when continuing the conversations about beneficence enabled RG and the organisation to find a route to providing material benefits for participating in research whilst mitigating potential risks (e.g. of social disruption). RG did not, nor would it have been feasible or appropriate [at least according to participatory research principles (Brear, 2018a)] for her to attempt to ask SHG members how they conceptualised fair risk and benefit without the support of staff. The Swazi case suggests that simply involving SHG members in the risk-benefit assessment would not have been a panacea for achieving beneficence.

Although the Swazi lay-co-researchers' approach of giving soaps disrupted the norm of non-payment, it did so in minimalist ways and remained subject to MB's control. She not only held the money which would pay for the soaps but also the knowledge needed to negotiate with the ethics committee for permission to give them. She unquestioningly accepted the co-researchers' recommendation to give green bar soaps, which cost approximately USD0.80 each. While conceptualised as beneficial by the economically marginalised co-researchers and participants who had adapted-down their expectations to cope with capability deprivations (Brear et al., 2018), they could equally be conceptualised as an exploitative form of under-payment.

Nonetheless, the Swazi case indicates that including lay-community members in beneficence deliberations can add value and diversity, because they focus on risk and benefits for others like them (i.e. fellow community members who are individual participants). This can balance the focus of organisation staff (whether or not they are also community members, as in the Indian study) and ethics committees. In our cases these groups focused respectively on collective and academic interests, that is, like the co-researchers they focused on the interests of others like them.

The key implication of these findings is that involving a broad range of stakeholders, with different perspectives, rooted in different social values and economic circumstances, will enhance risk-benefit assessment in international development research. Lay-people's desires may be used as evidence to balance or challenge the perceptions of gatekeepers and/or academic researchers as in the Swazi case. Academic researchers' ethical commitment and theoretical knowledge (e.g. of universalist conceptions of justice like capabilities) may be used to question relativism that results in non-payment or underpayment, and increase expectations amongst those who have adapted-down their preferences to cope with marginalisation (Nussbaum, 2000). For example, the Swazi co-researchers insisted on giving soap as benefit only to the extent that MB decided she could afford it. Although they clearly wanted to give and felt that participants deserved a token of appreciation, they were willing to adapt-down their expectations. Acceptance of the norm of non-payment for SHG meeting participation in the Indian case, probably also represented an adaptive preference, given that women would have joined the SHGs to improve their economic status. It is likely that if paid work or meeting attendance was a realisable possibility, the women might have adapted their preferences up, to expect (or at least value) payment. A further implication is that risk-benefit deliberations will be optimal if they are grounded in a commitment to critically-reflective research practice and ongoing deliberations through which community, academic and other expectations are considered in relation to social justice theory.

CONCLUSION

Our theoretically-reflexive analysis of observation data demonstrates the contributions that can be made by researchers who document, analyse and share their reflections on the value-laden, ethically complex nature of beneficence in development research. It suggests further research of this type is warranted. It also highlights the value, particularly in relation to avoiding relativism and imperialism, of grounding such research and practice in a socially-just theoretical conceptualisation of what development ideally constitutes.

Our study of real-world development research practice highlights the ways in which ethical norms and regulations can manifest as academic imperialism. Where people are denied the bases of human agency and freedom, achieving beneficence should focus on capability expansion (i.e. overall, doing some good) for individuals who contribute their time and knowledge to development research. Hence, establishing individual-level benefit should be obligatory in international development research, regardless of higher-level benefits.

Our study suggests a need to adapt ethical norms, principles and guidelines, to ensure they can be translated into ethical development research practice. Because participants in development research (unsurprisingly) conceptualise receiving things they are entitled to (but have been denied) as beneficial, the prevailing notion that entitlements cannot be benefits (Pieper & Thomson, 2016) must be problematised. Rather than avoiding pseudo-risks [e.g. coercion and undue influence (Largent & Lynch, 2017)], in development contexts risk assessment should focus on the perpetuation of actual harms including academics stealing indigenous knowledge (Smith, 2013) and the socialising effects of non-payment and under-payment (Nussbaum, 2000). Cognitive benefits should, in the absence of plausibly-related substantive changes, be considered minimal, offset by the knowledge that participants contribute and insufficient to offset economic harms that arise from research participation in contexts where economic deprivation is widespread. Development research will be optimally ethical if it avoids perpetuating unjust norms that reinforce adaptive preferences (e.g. acceptance of non-payment for contributions that others would be paid for). If international development research aims to expand freedom (and following Nussbaum and Sen we believe it should), ensuring the socialising effects of development research are positive, is essential.

REFERENCES

- Bourdieu, P., & Wacquant, L. (1999). On the Cunning of Imperialist Reason. *Theory, Culture & Society*, 16(1), 41-58. doi:10.1177/026327699016001003
- Breiar, M. R. (2018a). Ethical Research Practice or Undue Influence? Symbolic Power in Community- and Individual-Level Informed Consent Processes in Community-Based Participatory Research in Swaziland. *Journal of Empirical Research on Human Research Ethics*, 13(4), 311-322. doi:10.1177/1556264618761268
- Breiar, M. R. (2018b). 'I was thinking we would be spoon-fed': Community co-researchers' perceptions of individual empowerment in participatory health research in Swaziland. *Global Public Health*, 13(10), 1441-1453. doi:10.1080/17441692.2017.1363901
- Breiar, M. R., Hammarberg, K., & Fisher, J. (2020). Community participation in health research: an ethnography from rural Swaziland. *Health Promotion International*, 35(1), e59-e69. doi:doi.org/10.1093/heapro/day121
- Breiar, M. R., Shabangu, P. N., Fisher, J. R., Hammarberg, K., Keleher, H. M., & Livingstone, C. (2018). Health Capability Deprivations in a Rural Swazi Community: Understanding Complexity With Theoretically Informed, Qualitatively Driven, Mixed-Method Design, Participatory Action Research. *Qualitative Health Research*, 28(12), 1897-1909. doi:10.1177/1049732318768236
- Breiar, M. R., Shabangu, P. N., Hammarberg, K., Fisher, J., & Keleher, H. (2019). Community-based care of children affected by AIDS in Swaziland: a gender-aware analysis. *Primary Health Care Research & Development*, 20, e15. doi:10.1017/S1463423618000774
- Closser, S., Napier, H., Maes, K., Abesha, R., Gebremariam, H., Backe, G., . . . Tesfaye, Y. (2019). Does volunteer community health work empower women? Evidence from Ethiopia's Women's Development Army. *Health Policy and Planning*.
- Cornwall, A. (2003). Whose voices? Whose choices? Reflections on gender and participatory development. *World Development*, 31(8), 1325-1342. doi:10.1016/S0305-750X(03)00086-X
- Denzin, N. K. (2001). Doing Interpretation. In *Interpretive Interactionism* (2 ed., pp. 119-142): Sage.
- Dingwall, R., Iphofen, R., Lewis, J., Oates, J., & Emmerich, N. (2017). Towards common principles for social science research ethics: A discussion document for the Academy of Social Sciences. In *Finding common ground: Consensus in research ethics across the social sciences* (pp. 111-123): Emerald Publishing Limited.
- Emmerich, N. (2017). Remaking research ethics in the social sciences: Anthropological reflections on a collaborative process. In *Finding Common Ground: Consensus in Research Ethics Across the Social Sciences* (pp. 125-148): Emerald Publishing Limited.
- Falconer Al-Hindi, K. & Kawabata, H. (2002). Toward a More Fully Reflexive Feminist Geography. in Moss, P. (Ed) *Feminist Geography in Practice: Research and Methods*, Oxford: Blackwell, pp.103-115
- Fischer, A. M., & Kothari, U. (2011). A challenge for research in development studies on values, ethics and morals. *Journal of International Development*, 23(6), 767-770.
- Gaspar, D. (1996). Culture and development ethics: Needs, women's rights, and Western theories. *Development and Change*, 27(4), 627-661.
- Hébert, J. R., Satariano, W. A., Friedman, D. B., Armstead, C. A., Greiner, A., Felder, T. M., . . . Braun, K. L. (2015). Fulfilling ethical responsibility: Moving beyond the minimal standards of protecting human subjects from research harm. *Progress in community health partnerships: research, education, and action*, 9, 41.
- Hoeyer, K., & Hogle, L. F. (2014). Informed consent: The politics of intent and practice in medical research ethics. *Annual Review of Anthropology*, 43, 347-362.
- Kovach, E. (2009). *Indigenous Methodologies: Characteristics, Conversations and Contexts*. University of Toronto Press.

- Lairumbi, G. M., Parker, M., Fitzpatrick, R., & English, M. C. (2012). Forms of benefit sharing in global health research undertaken in resource poor settings: a qualitative study of stakeholders' views in Kenya. *Philosophy, Ethics, and Humanities in Medicine*, 7(1), 7.
- Largent, E. A., & Lynch, H. F. (2017). Paying research participants: The outsized influence of "undue influence." *IRB*, 39(4), 1-9.
- Madden, R. (2017). *Being Ethnographic: A Guide to the Theory and Practice of Ethnography*: SAGE Publications.
- Mama, A. (2011). What does it mean to do feminist research in African contexts? *Feminist Review*, e4-e20.
- Molyneux, S., Mulupi, S., Mbaabu, L., & Marsh, V. (2012). Benefits and payments for research participants: Experiences and views from a research centre on the Kenyan coast. *BMC Medical Ethics*, 13(1), 13.
- NHREC, National Health Research Ethics Council (South Africa). (2012). Payment of trial participants in South Africa- Ethical Considerations for Research Ethics Committees. Retrieved from <http://www.nhrec.org.za/index.php/grids-preview?download=11:guidelines-for-payment>
- Nagar, R. & Farah, A. (2003). Collaboration across borders: Moving beyond positionality. *Singapore Journal of Tropical Geography*, 24(3), 356-372
- Nussbaum, M. C. (2000). *Women and human development: The capabilities approach* (Vol. 3). London, United Kingdom: Cambridge University Press.
- Pieper, I., & Thomson, C. J. (2016). Beneficence as a principle in human research. *Monash Bioethics Review*, 34(2), 117-135.
- Sen, A. (1990). *Development as capability expansion*. Paper presented at the University of Oxford] At.
- Sen, A. (1999). *Development as Freedom* (1st ed.). New York: Anchor Books, Random House.
- Shore, N. (2006). Re-conceptualizing the Belmont Report: A community-based participatory research perspective. *Journal of Community Practice*, 14(4), 5-26.
- Simons, L., Lathlean, J., & Squire, C. (2008). Shifting the Focus: Sequential Methods of Analysis With Qualitative Data. *Qualitative Health Research*, 18(1), 120-132. doi:10.1177/1049732307310264
- Smith, L. T. (2013). *Decolonizing methodologies: Research and indigenous peoples* (2 Ed.). London, United Kingdom: Zed Books Ltd.
- Sultana, F. (2007). Reflexivity, Positionality and Participatory Ethics: Negotiating Fieldwork Dilemmas in International Research. *ACME*, 6(3): 374-385
- Tam, N. T., Huy, N. T., Thoa, L. T. B., Long, N. P., Trang, N. T. H., Hirayama, K., & Karbwang, J. (2015). Participants' understanding of informed consent in clinical trials over three decades: systematic review and meta-analysis. *Bulletin of the World Health Organization*, 93, 186-198H.
- Wilson, S. (2008) *Research is Ceremony: Indigenous Research Methods*. Halifax and Winnipeg: Fernwood Publishing Co.