Developing a model for participation by children in research on decision making

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This paper outlines a three-year collaborative research project which aims to involve children and young people, as well as other stakeholders, in exploring strategies to meet the needs of children in care. In this paper we identify some research findings which indicate the importance of children participating in the defining of their needs in care, if these needs are to be responded to more effectively than has been the case in the past. We describe the aims of our three-year project and identify some of the methodological issues of implementing stage one of the project in terms of children's participation. A conceptual framework is developed to clarify issues related to children's participation in research and decision making and as a basis for deciding on appropriate research methods to employ in the first stage. Rather than merely outlining the work we have so far undertaken, we have instead focussed on reflecting on and analysing the theoretical and methodological challenges to researchers in implementing collaborative and participatory research in decision making with children.

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UnitingCare Burnside (Burnside) and the Childhood and Youth Policy Research Unit at the University of Western Sydney received funding from the Australian Research Council (ARC) to develop 'a model of substitute care to meet the needs of individual children, through participatory research which includes children'. This project has two major and interrelated objectives:

1. to explore strategies for identifying forms of substitute care which can effectively meet the needs of children;
2. to develop a model to involve children in decision making around identifying their needs in care.

EXPLORING STRATEGIES FOR IDENTIFYING FORMS OF SUBSTITUTE CARE TO EFFECTIVELY MEET THE NEEDS OF INDIVIDUAL CHILDREN

There is a considerable amount of research indicating that from the perspectives of children much of the decision making which occurs around meeting their needs in substitute care is ineffective. This research typically identifies that children feel they are treated as objects, with their needs being discounted. The traumas resulting from the way in which their needs and the contexts of their lives has been ignored by decision makers, have been documented (for example, in Australia: Bird, 1998; Owen, 1996; Mason, 1993; Cashmore & Paxman, 1996; Thorpe, 1994).

There is a lack of systematic research and theory to guide decision making in substitute care around the needs of individual children. Goddard and Carew have noted, 'there has not been enough research on what kind of care is suitable for different children' (1993:174). This reflects the criticism more generally of child welfare research, that it is often 'presented in a narrow, piecemeal manner that limits its applicability' (Smokowski & Wodarski, 1996: 505).

Decisions about the care of individual children, in particular their placement, tend to be made according to generalisations about children's needs. These generalisations are typically based on ideological and budgetary considerations (eg, Mason, 1996; Cashmore & Castell-McGregor, 1996; Frost & Stein, 1989; Beker, 1994). In these instances of decision making, it can be argued, the concept of children's needs is invoked to give authority to adult decisions about their care.

The authority for these decisions is typically based on definitions of universal needs of children. These definitions ignore a body of psychological and other knowledge which shows the extent to which there are individual differences between children and differences between different groups of children in terms of their needs (eg, Kagan, 1980; Woodhead, 1990; Hill, Laybourn & Borland, 1996).

Importantly, research in the recent *Remember Me* project in the United Kingdom (cited in Gilchrist, 1998), in which children's voices were heard, provided strong evidence that the 'real' needs of children in care would not be met until we, the adults making decisions about them, 'learn from what children themselves say' (Gilchrist, 1998: 14). Roberts has drawn attention to the fact that 'listening to children, hearing children, and acting on what children say are three very different activities, although they are frequently elided if they were not' (2000: 238).

Although there has been a growing emphasis on the importance of listening to children in recent decades, as the *Remember Me* project findings illustrate, listening to children in care does not necessarily mean that children are being heard and responded to in terms of the needs they articulate.

It is, however, willingness and ability by adult decision makers to respond to the needs of children as expressed by them which is required if we are to implement the principles of the United Nations Convention on the Rights of the Child as they relate to involving children in decision making around their welfare. These principles are increasingly supported by, and incorporated into, state legislation around children's welfare as a strategy for meeting their needs more satisfactorily – for example, the UK Children Act (1989) and the NSW Children and Young Persons (Care and Protection) Act (1998). However practice guidelines on how to effectively involve children in such decision making are minimal. While we have the principles which say listening to and hearing children is a good thing, we do not have the techniques for putting these in place on the ground.

Both English (Sinclair, 1998) and Australian (New South Wales Child Protection Council, 1998; NSW Community Services Commission, 2000) research on children has found that, while there is currently more awareness of the importance of involving children in planning their care, this is not occurring through the strategies that are currently in use.

The recently published New South Wales research findings *Voices of Children and Young People in Foster Care* has shown that from children's points of view the mechanics of participation are not working. It highlighted that:

> ... most children and young people involved in the consultations knew they had a right to complain if they were abused in care. However many had little or no idea about how decisions were made, their rights to participate in decision making and why things happened to them in care. (Community Services Commission, 2000:6)

The findings of the 1998 New South Wales *Having A Say* research acknowledged children's willingness and competence to contribute to decision making for more positive outcomes for them. However, it emphasised that in order for young people to be involved in decision making, they 'must be actively involved in the design and development of the processes and structures intended to hear their contribution' (NSW Child Protection Council, 1998:9).

It is towards this recommendation that our research is oriented. Hence, our second objective is to develop a model to involve children in decision making around identifying their needs in care.

DEVELOPING A METHODOLOGY TO FACILITATE CHILDREN'S PARTICIPATION IN RESEARCH AND IN DECISION-MAKING

In implementing the research a crucial task has been to decide on the specific techniques we should employ to ensure that our research processes are consistent with our objectives. How do we as researchers begin a process of developing a model whereby children

Table 1 Models of children's participation

	Adultist	Children's Rights	Children's Movements
Initiation of participation strategy	Agency/external statutory agency	Agency/external statutory agency	Children (eg, children's labour movements)
Ideological framework	Positivist/market forces, consumer involvement	Phenomenological / constructivist	Minority rights, groups struggle
Children viewed as	Passive, incompetent, developmentally incomplete 'becomings'	Actors, competent, 'beings' oppressed	Actors, competent, human beings
Locus of power	Adults through governance and 'best interests', asymmetrical	Questions the generational order, symmetrical	Children, empowered
Needs identification	Normative from psychological literature	Individualised, from listening to children	Asserted both as a group and individually
Method of decision making	Adults structure procedures	Negotiation between stakeholders	Children dominated
Knowledge	Adult authority	Opportunity for children to shape and contribute	Children experts on own lives, recognises and challenges adults' power over children
Professionals	Superiority of expertise used for empowering	Facilitate through alliances	Provide resources
Children's voices	Filtered	Reflexivity by adults and children facilitates children's voices being heard	Challenge and unsettle adults

have input to the process of identifying children's needs in care? How do we not only listen to children, but also hear them, and act on what we hear, within the research process?

In examining some of the increasing amount of writing on and examples of children's participation in research, and some of the parallel writing on children's participation in decision making in the child welfare context, we sought to identify the major approaches to participation. An analysis of models of participation is a fundamental step towards identifying the appropriate research methods to employ in the research. Much of the literature and many of the presentations on participation at the World Forum 2000 held in Sydney discussed children's participation in terms of Roger Hart's (1992) adaptation of Arnstein's (1969) ladder of participation. Use of this ladder enables participation by children to be described in terms of degrees of participation related to the amount of power redistributed to children in the participation process. John (1996) highlights the problems in using Hart's ladder as a metaphor for children's participation in that it implies a hierarchical relationship and the bestowing of rights to participate on children by adults. Furthermore, this ladder tends to be used in a descriptive way to define the form of participation occurring, eg, tokenistic, and as John (1996) notes, this model does not help in the conceptualisation of the dynamics of the politics which are evident when children are understood as a minority rights group.

We have developed a diagram that represents an analysis of the issues of power, which are integral to explaining the forms of participation that characterise current child protection and child welfare developments (see Table 1).

The table shows that participation by children is a complex concept, which can mean very different things, depending on the context in which it is used. We have identified three different models of children's participation currently operating in the child welfare arena and described them in terms of a number of key dimensions. These key dimensions include the initiation of the strategy for participation and the locus of power in this process. Crucial to the way in which participation is implemented are the values and assumptions which underlie the construction of childhood and of knowledge within each of the models.

In any one example of participation by children in decision-making and or research, elements of more than one model are likely to be present. However conceptualising the different approaches to participation in terms of which model is dominant provides for some clarity and hopefully consistency in developing strategies for research in which children are seen as participants.

PARTICIPATION IN CHILD WELFARE PRACTICE AND RESEARCH

The 'adult-centric' (or 'adultist')[1] model of participation is at one end of the continuum of participation. It is probably the model dominating in much of the contemporary trend towards participation in child welfare. In this model, based on concepts of consumer involvement, the boundaries for participation are established by adults. As a consequence, while children may have opportunities to speak, the extent to which children are heard and their contributions acted on is limited from the beginning of the process by adult decisions about what they think is appropriate for children to make comment on.

Within this model it is often the case that adults only hear what they want to hear. For example, the UK Children Act (1989) emphasises the participation of children in decision making about them, yet research indicates that in its implementation:

> ... so far as the voice of the child is concerned, the philosophy of the Act is clearly tempered by a degree of judicial paternalism. (Sherwin, 1996:25)

This means that the question of what is in the child's best interests remains a matter for decision by an adult – in this case the judge.

In much research in which children participate, where the scope and nature of their involvement is limited by adults, the rationale for limiting their participation is based on theories of development, where the assumptions are that:

> ... children's minds develop like their bodies through one universal pattern of ascending growth marked out by 'milestones' from zero to adult maturity. (Alderson, 2000:52)

Alderson points out that while these theories have contributed positives to children's lives, they have also been influential in discouraging adults from trusting and consulting with children. She highlights how concepts of the child as 'becoming' and 'developing' persons in contrast with adults as having become and developed, ie, as 'mature', convey a dichotomisation of (or clear cut difference between) adulthood and childhood which is incorrect. Further these conceptions contribute to a discounting of children's knowledge and opinions and to the use of coercion to control and oppress children. In other words, by only looking at one part of childhood – where children may be heading in the future and what we think they might need to get there – we don't appreciate the importance of children as beings in the present – what's happening right now in their world and how we might respond to that in a way that respects their immediate wishes and aspirations.

At the other end of the continuum of participation by children, the 'children's movements' model refers to participation initiated by children in the tradition of civil rights movements for other oppressed and minority groups. One example of such a movement is that of Underground Power, formed during the early 1990s by young people 'to campaign for young people's rights in line with the United Nations Convention on the Rights of the Child' (Bird & Ibidun, 1996:124). This group has asserted 'we are not 'kids' or 'children' but young people' who are involved in a movement for liberation to remove the basis for oppression of themselves and others who are denied power and respect (Bird & Ibidun, 1996:121).

[1] The term 'adult-centric' is used by Goode (in Waksler, 1991). The term 'adultist' is used by Hedrick (2000:55). The term 'adultism' was coined by Alanen (1992:59). She derived the latter from 'chauvinism'.

Other examples of movements where young people are asserting their rights are the organisations of working children formed by children in countries in the majority world, such as that of the street children in Brazil and domestic servants in French West Africa. These organisations have both confronted adult agendas designed to end child labour and developed a manifesto asserting their right to work, but in non-exploitative conditions (New Internationalist, July 1997: 7-10).

In the child-initiated organisations, as stated by the young people writing about the Underground Power movement, the adults' role is crucial in 'assisting young people to take themselves seriously', assisting with 'the transfer of resources and skills into the hands of young people' and in being able to 'trust young people to work out how best to use them' (Bird & Ibidun, 1996:122).

The Networks of Young People in Care in Australia and elsewhere have shared some aspects of this model, in that they have recognised children as experts in their own lives. They have frequently challenged the power of, and have made uneasy, adults with an interest in child protection issues. The basis for this uneasiness of adults when confronted by young people's assertion of their rights is reflected in a statement by the young people writing about the Underground Power movement, that when young people realise the power to challenge adult oppression 'then we are going to kick ass, and sort this world out' (Bird & Ibidun, 1996:128).

Mid-way on this continuum of participation is the collaborative model. Here adults take a leadership role in extending to children rights that are their due as human beings having standpoint(s), which must be taken into account. In this model children are acknowledged as social actors who are competent to contribute to research and decision making. Competence is understood in relation to experience, rather than age, and therefore as necessarily varying between children and according to the area of their lives which is being examined. Crucial to applying this model is a questioning of the existing generational order, by recognising the vulnerability of children both economically and politically compared to groups at other ages, such as working-age adults (Qvortrup, 2000:91). It requires of researchers the development of strategies which seek to establish symmetry or a balancing of power between themselves and the children who participate in the research.

... how do we achieve anything near a framework which balances the power of children and researchers when we ... are seeking to involve children in a project for which we ... have already had to develop the parameters?

This model resembles John's 'bridge of participation' model (John, 1996: 20). It acknowledges the dominance of adult power and seeks to question and reflect on this power and ways of using it to assist children to contribute to decision making and research from their standpoint(s). The major challenge in using this model is for adults and children involved to develop strategies whereby a balance of power is negotiated. Adults require the skills and the courage to facilitate a forum in which this negotiation can occur. These skills are based on reflexivity. Reflexivity in this context has been defined as opening 'the way to a more radical consciousness of self' and 'a mode of self-analysis and political awareness' (Davis, Watson & Cunningham-Burley, 2000:201 citing Dalaway). In practice this means that when facilitating and interpreting the contributions made by children to policy or research, adults must question the language and processes they use as bureaucrats or academics and also as members of the culture of adulthood. In other words, the assumptions about adulthood and childhood must be continually questioned when we work with children in this mode. When used effectively for this purpose, reflexivity should enable adults to limit the use of their power and to facilitate children's reflexivity as they participate in ways which enable them to be heard.

It is the 'collaborative' model, mid-way on the continuum, which we are attempting to implement in our research. The major obstacle we have so far faced as we begin to implement the project is how do we achieve anything near a framework which balances the power of children and researchers when we, the adult researchers, are seeking to involve children in a project for which we, of necessity in applying for funding, have already had to develop the parameters?

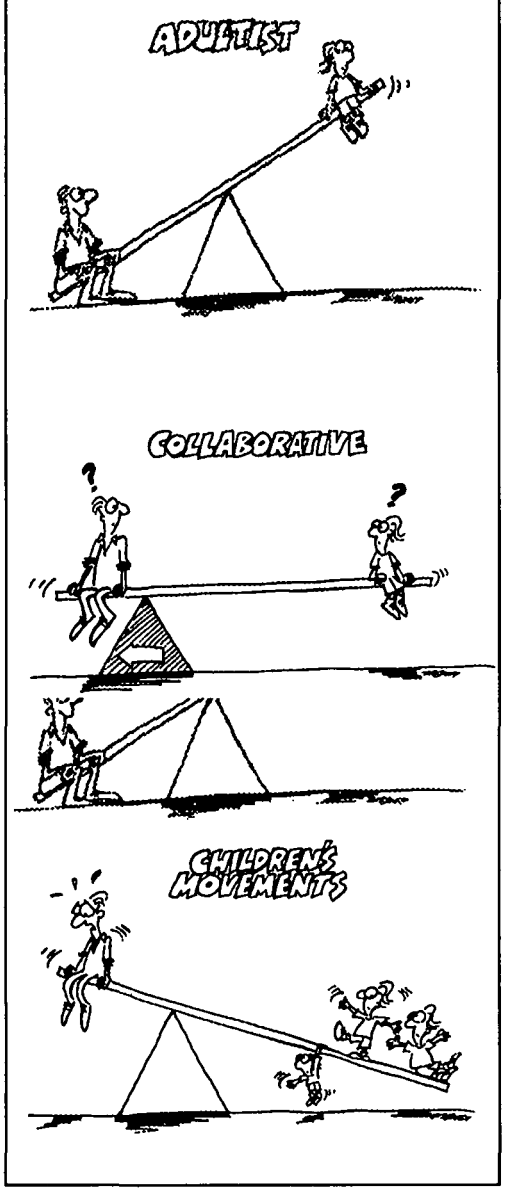
One way in which we have brought our reflexive skills to the fore in Stage 1 of our project is through reflecting carefully on our own personal and professional biases. Discussions with others in the research team and with persons known for their strong views on being inclusive of children helped us to decide on a design for the first stage, in which all children in care of the relevant Burnside programs will be invited to participate and inform us, the researchers, on the way in which we should proceed with the remainder of the project. They will be invited to attend what Thomas and O'Kane (1999) have referred to as 'activity days'.

On these days we will inform the children about the project and ask them to respond to three questions:

1. How should children contribute to the project?
2. Why should they contribute to the project?
3. What do children need in terms of support and assistance in order to be able to contribute?

In the presentation and engagement of children, we will use a variety of techniques to maximise their participation, bearing in mind that children are not all the same as a group, and are likely to prefer to participate in diverse ways. For example, children will be able to choose to join a focus group discussion, to create group or individual drawings, or to write group or individual narratives. At the conclusion of each activity day we will make a visual and oral presentation to the children who have been present, summarising what

Figure 1



we understand to have been their input and asking for their feedback on how the summary needs to be changed.

As the researchers of a funded project we realise there are some risks for us in this process. For example, the children could decide not to attend the activity days or, when they attend, they may give feedback which negates aspects of the project for which we have been funded. However, feeling uncomfortable should be the hallmark of this project if we are to be effective as researchers within the collaborative model. We have attempted to represent pictorially how adopting this position can be unsettling for adult researchers in both the collaborative and children's movements models (see Figure 1).

Another significant feature of the project (also reflected in this first stage) is a meeting with carers and parent groups. These meetings are designed to parallel those of the children. There will also be interviews with senior Burnside managers. The participation of these adults is regarded as essential to the project, recognising that children are participating in a context where adults are involved in major ways.

We recognise that both children and adults will participate in this project within contexts which are characterised by their own structural and cultural constraints and opportunities. These constraints and opportunities are an important part of decision making around the needs of children in substitute care. It is therefore essential that they be taken into account if a workable model for children's participation is to be identified and implemented.

CONCLUSION

The first stage of our research project is dictated by our attempts to achieve a collaborative approach to participation by children in the research process. This approach seeks to integrate the 'concerns' of this frequently silenced group – children in care – and of their carers, with the 'concerns' of those in authority positions in substitute care decision making, as well as the 'grand narratives' of social scientists who contribute to this area (see Lincoln, 1993: 44).

By focussing in the initial stage on establishing a process, which will ensure that there is an ongoing dialogue with children and all involved in the research, we are placing ourselves as researchers in a position characterised by ambiguity and discomfort. Lincoln (1993) describes the major reason for taking a collaborative approach to research as being the promotion of social justice. We believe it is crucial at this stage in substitute care policy making to strive to implement processes and strategies which have the potential to address social justice issues which will enable children's needs in substitute care to be responded to more effectively than has been the case in the past. □

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