A critical review of methods for eliciting voice from children with speech, language and communication needs

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In this paper we discuss the need to find suitable methods for eliciting the voices of children with communication, speech and language needs in order to gain insights into their experiences of school, especially in the context of renewed legal requirements to involve children in decisions about their education. A critical review of existing methods for eliciting and facilitating communication from children with communication needs is presented, and an analysis of those approaches is offered. From this analysis we propose a framework for the characteristics needed in any new tool developed for this purpose.

Introduction

The idea of providing children with a voice represents a relatively recent shift in the way children are perceived socially, culturally and politically (Alderson, 2016; Cockburn, 2005; Kehily, 2009). There is an increasing expectation that children should participate in decisions that affect them (Franklin and Sloper, 2009). This has been partly driven by the UN Convention on the Rights of the Child (UNCRC) (1989), which proposed a number of Articles upholding the rights of children to be included. Other organisations have also put pressure on government bodies to ensure that service users are included in the planning and delivery of services, such as UNICEF. As a result, changes to legislation and policy documentation, especially within health, social and educational sectors, have emerged in the UK. The SEND code of practice (Department for Education and Department of Health, 2015) and the Children and Families Act (Department for Education, 2014) are prime examples of this, obligating services to consult children and their parents in decision-making processes. However, the participation of children with disabilities has been slow

and is far more complex than might first appear. In this paper we focus specifically on the way in which this impacts children with speech, language and communication needs, and we evaluate the suitability of methods that offer the potential to enable practitioners to involve these children in decisions impacting their education.

Speech, Language and Communication Needs (SLCN)
The Royal College of Speech and Language Therapists (2016) describe speech, language and communication needs (SLCN) as an umbrella term when someone has difficulties across one or more aspects of communication including:

- Problems with producing speech sounds accurately
- Stammering
- Voice problems, such as hoarseness and loss of voice
- Problems understanding language
- Problems using language
- Problems interacting with others

The Communication Trust (2017) contextualise these difficulties as follows:

> *Children and young people with SLCN have difficulty in communication with others. This may be because they have difficulty saying what they want to, understanding what is being said to them or they do not understand or use social rules of communication. The profile for every child with SLCN is different and their needs may change over time. They have difficulty with one, some or all of the different aspects of speech, language or social communication at different times of their lives.*

Such difficulties can impact a child's progression at school as a result of an interaction between within-child and contextual factors (Lindsay and Wedell, 1982). This places responsibility on schools to consider and adapt their environments because they are responsible for affecting the child's learning, communication and

socialisation (Plotnikoff and Woolfson, 2011; The Communication Trust, 2017). The rationale for this review emerged from the need to provide a method for a local outreach service in the UK to elicit how children felt about their school and educational support. This request illuminated a larger problem where services in the UK are obligated to include the voice of the child but are struggling to do so (Franklin, 2013). Government-led reports indicate that approximately 10% of all children in the UK (1.2 million) have long-term persistent SLCN (Law, Lee, Roulstone, et al., 2012) and up to 22% of all pupils identified with Special Educational Needs (SEN) support or with an Education, Health and Care (EHC) plan have SLCN as their primary need (Department for Education, 2017a, 2017b).

Conceptualising Children's Voice
The UN Convention on the Rights of the Child (UNCRC) (1989) was designed to establish the civil, political, economic, social and cultural rights that children are entitled to. The Convention aimed to help change 'the way children are viewed and treated – in other words, as human beings with a distinct set of rights instead of passive objects of care and charity'. Article 12 of the UNCRC (1989) specifically states two obligations that are particularly relevant to this paper:

1. That all children have the right to express their views regarding matters that affect them.
2. That all children should be provided with the opportunity to be listened to regarding matters that affect them.

A number of UK legislative proposals and government-backed initiatives have underpinned this vision, including the Children Act (2004) (2004), The Human Rights Act (Great Britain, 1998), Every Child Matters (Department for Education and Skills, 2006) and the Special Educational Needs Code of Practice (Department for Education and Skills, 2014). Among other aims, they sought to empower children by affording them the right to be consulted on, and participate in, decision-making processes regarding matters that affect them.

These policies made it clear that children cannot be assumed to be incapable of sharing in decision-making and that alternative provision must be made to establish their views. Article 2 of the UNCRC (1989) further states that there should be no discrimination for children who have a disability and, of specific importance for children with additional communicative needs, Article 13 asserts:

> *The child shall have the right to freedom of expression; this right shall include freedom to seek, receive and impart information and ideas of all kinds, regardless of frontiers, either orally, in writing or in print, in the form of art, or through any other media of the child's choice.*

It confers the promise that standard methods of communication are not a prerequisite for attaining the views of the child. Instead, it places the onus on the organisation to ensure that they are equipped to provide the necessary support to meet the needs of individuals in order that they are afforded the same opportunities as typically developing children.

The social model of disability. The social model of disability distinguishes between impairment and disability; 'impairment' is seen as a person's physical, cognitive, behavioural, emotional, sensory or communicative limitations, while 'disability' can be seen as the oppression or restriction experienced by those with the impairment (Woolfson, 2011). The United Nations Convention on the Rights of Persons with Disabilities (United Nations (UNCRPD), 2006) aptly summarises this interpretation as:

> *…the interaction between persons with impairments and attitudinal and environmental barriers that hinder their full and effective participation in society on an equal basis with others.*

For schools and children with disabilities, this relocates the concept of the deficit being located within the child and places it as a responsibility for schools and local services to overcome. Ideally, this means services work together to assess the impact of the impairment on the child's ability to access education while ensuring appropriate provision (Woolfson, 2011).

Person-Centred approaches. The person-centred paradigm emerged to ensure that the needs of the child are placed centre stage, rather than becoming lost in the systems that seek to serve them (Holburn, 1997). Person-centred approaches to education attempt to shift power from the professionals to the users. Educators are urged to consider a holistic picture of the child, paying particular attention to their interests, experiences, skills and relationships as opposed to focusing on their deficits (Merry, 1995). Adults are urged to look at the world from the child's perspective and accept it for what they see. For those with disabilities, person-centred approaches are particularly enabling and are increasingly reflected in government policy. For example, 'Aiming High for Disabled Children: Better support for families' (HM Treasury and Department for Education and Skills, 2017) describes those with disabilities as experts in their own lives and impairments and suggests that support designed alongside them will better meet their needs. Similarly, the SEN Code of Practice (Department for Education and Skills, 2014) highlights the importance of eliciting and understanding the views of children in order to encourage the feeling that they are valued at school.

Person-centred approaches have been adopted into school planning processes, including annual reviews, target

setting, one-page profiles, transition planning, individual education plans and more recently the Education, Health and Care plans (Children and Families Act, 2014) which replaced the SEN Statementing process as a way of providing a more child-centric approach to assessment.

Despite an increase in political and social policy around ensuring the rights of children are respected, evidence demonstrates that children's consultation rights are not respected equally (Woods, Parkinson, and Lewis, 2010). Specific groups of children, typically those considered the most vulnerable such as those with disabilities, and therefore most likely to access local authority services, are less likely to be consulted about those services (Curtis, Grier, and Hunley, 2004; McLeod, 2007). Where children have communicative or cognitive impairments, consultation is further restricted (Morris, 2003).

However, as legal requirement catches up with social justice, Local Authority services are increasingly being held to account. For example, the schools regulatory body OFSTED (2013) began monitoring the capacity of schools to take pupil's views into consideration during the inspection process. And, the SEN Code of Practice (2015) has updated several of its policies from recommending pupil involvement with planning and review processes to mandating it, 'Local Authorities **must** ensure that children, their parents and young people are involved in discussions and decisions about their individual support and about local provision' (Department for Education and Department of Health, 2015).

The importance of children's voice to those with disabilities goes beyond an ideological model of social change, morality and political agenda. Evidence demonstrates that where children are given a platform for their voice to be heard effectively, a host of benefits to the child, the services and the wider community follow. Listening to children helps to raise the confidence, motivation and aspirations of children while also positioning children in society alongside adults more equally (Cheminais, 2008). It has also been found to increase empathy, communication skills, and cognitive skills, encourage responsibility, allow resources to be better targeted and enable the child to take control of their own lives (Badham and Wade, 2010; Robinson, 2014).

The challenges of eliciting voice from children with SLCN

Despite a growing body of research on the importance of recognising children's voice in decisions that affect them, there is still a significant gap between discourse and reality (Robinson, 2014). This is particularly the case in terms of enabling and permitting children with disabilities the opportunity to share their views in order to actively shape the support available to them (Aubrey and Dahl, 2005; Franklin, 2013). The gap widens when children struggle to communicate verbally, or are perceived to have cognitive needs (Morris, 2003). Yet, this group are more often

subject to intervention through assessment, planning and review processes than other children are (Marchant and Jones, 2003). Certainly, many local authorities have struggled to meet their duties to ensure that the views and feelings of children with complex needs are heard (Franklin, 2013). This was a sentiment mirrored by a government initiated SEN and Disabilities green paper (Department for Education, 2012) demonstrating that children with disabilities feel frustrated by a lack of the right help at school. In practice, the capacity for services to recognise and follow the principles of children's voice is restricted and obstructed by a number of underlying barriers.

Franklin (2013) outlines a number of key barriers that emerged from the evidence base, highlighting: negative perceived capabilities (Willow, Marchant, Kirby, et al., 2004); a lack of communication methods, information and time (Marchant and Jones, 2003); and a lack of opportunities and experience to develop the skills for both children and practitioners (Burke, 2010). These barriers are not restricted to particular fields either; health, education and social worker professionals report similar difficulties (Davey, Shaw, and Burke, 2010).

Negative perceived capabilities. In a series of studies, Morris (2003) sought the views of disabled children, including those with communication and cognitive impairments, and identified the barriers she encountered. They included: the primary contact's (Teacher/SENCo/ Teaching Assistant) lack of knowledge of the child's communicative needs; the assumption that the researcher would only seek information from a parent or staff member as opposed to seeking knowledge from the child; and the concept that the child would be unable to provide any useful information.

Within schools, adults make most of the choices. A child's level of participation is decided by the adult's perceptions of the child's ability to participate. Where children are disabled, they are still often portrayed according to the medical model of disability; that is, by what they cannot do as opposed to what they can do (Rabiee, Sloper and Beresford, 2005). This view perpetuates the concept of the disabled child as incapable and can be reflected in the attitudes that professionals display, which in turn restricts the children's access to opportunities to engage in participatory activities (Franklin, 2013). As a result, instead of communicating directly with children, the voice of the disabled child is often represented by professionals or the children's parents (Armstrong, 2007).

Those who are very young are also caught within this remit and subject to the same process of disempowerment. Noble, (2003) indicates that the opinions of young children with SEN are rarely requested, and even when they are, the process is often tokenistic and their views ignored. Those who have both a disability and are young are doubly disadvantaged (Dickins, 2011). These

perceptions have some grounding in the evidence base with studies showing a child's capacity to engage in decision-making requires the ability to reflect (e.g. Quicke, 2003). Quicke (2003) asserts that before children reach years 5 or 6 (aged 9–11) there is little point asking for the child's viewpoint about how they learn because they are unable to reflect upon the question. Others question the very legitimacy of the idea of the child as an expert in their own learning development and point towards the notion as an 'urban legend' (Kirschner and Merrienboer, 2013). Kirschner and Merrienboer (2016) show how the relationship between what people say about how they learn and how they actually learn is weak and argue that the individually preferred way of learning is often a bad predictor of the way people learn most effectively. Evidence supports the supposition, noting that in a meta-analysis of studies learners who reported preferring particular instructional techniques, for example visual over audio methods, typically did not derive any instructional benefit from experiencing it. The article is provocative and challenges the reader to consider that a 'moral panic' (Cohen, 1973) is gripping proponents of children's voice fuelled by rumour and belief rather than empirical evidence. There is certainly a cautionary tale to tell about the importance of respecting research rigour over ideology. However, denying the fundamental rights of children as citizens, or forbidding them from experiencing expertise within decision-making processes acts to treat them as largely incomplete or, worse still, incompetent and as such irrelevant in matters that affect them (Borgne and Tisdall, 2017). Taken to its logical conclusion, this perception gives legitimacy to exclusion policy (Woolfson, 2011).

Notwithstanding these rights-based criticisms, the perception that some children may be considered unable to reflect upon their learning experiences is valid. The problem lies in power differentials that result from assuming this viewpoint and it represents a substantial barrier to participation (Cockburn, 2005). Social justice must be based on a solid empirical grounding if it is to gain universal acceptance. Research is beginning to demonstrate that even very young children are capable of giving their views in areas of their learning provided they are supported with the properly adapted tools (Day, 2010).

Lack of opportunities and experience of decision-making. Children with disabilities report that being supported to communicate is vital to start making choices and gain independence from an early age (Bignall and Butt, 2000; Franklin, 2013). Children's experience of being listened to, their involvement in making decisions and the context within which that takes place affects their ability to participate. Lansdown (2006) asserts that restricting the opportunities for children to experience decision-making will result in a lack of capacity to do so which is used to further justify the reason not to include the child. Children then come to internalise the belief that

they are incapable rather than assume it is because they have been denied the opportunity (Willow, 2002). She asserts this is particularly pertinent to those who have disabilities, because often they have been socially excluded and as such regularly have their capabilities underestimated. Limited life experiences restrict the child's understanding and from this disempowered position it is more challenging for children to take part in participatory processes.

Lack of information, skills and time. One of the central obstacles that challenge children's voice is that professionals lack an understanding of the child's rights (Lundy, 2007). In a large-scale research project evaluating the impact of rights on the children's experiences, Kilkelly, Kilpatrick, Lundy, et al. (2005) found that there was limited awareness of the rights of children across services, including implementation of Article 12 (the right to have a voice). Lundy (2007) argues that respecting children's views is not just a model for good pedagogical practice but a legally binding obligation, although this latter point is questionable. Certainly, with the introduction of the new SEN Code of Practice (2015, p. 22), the legality of listening to children has been made paramount by obligating Local Authorities to include children, and crucially note that they 'must **not** use the views of parents as a proxy for young people's views'.

This increases the pressure on services to establish the methods of eliciting voice. Yet, there has been minimal help for practitioners, leaving them unsure how to carry out the requirements, especially for children who have communication or cognitive disabilities (Norwich and Kelly, 2006). Morris (1998) showed that in a study of children with limited verbal communication living in residential homes and schools, minimal effort was made to find alternative methods of communication. Within the field of social work, Franklin and Sloper (2009) demonstrated that a lack of skills, training, knowledge and experience in consulting and communicating with those with disabilities prevented children from having a voice.

More recently, there has been a growing number of guides that aim to support practitioners to understand children's communication difficulties and help organisations to include children in participatory practices (e.g. Chamberlain and Dalzell, 2006; Knight, Clark, Petrie, et al., 2006; Roulstone, Wren, Bakopoulou, et al., 2012). However, professionals consistently report that time with such children is restricted, and the processes involved to elicit the voice of a child with disabilities are complex, resulting in fewer opportunities to engage in participatory processes (Franklin, 2013; Morris, 2003).

Lack of communication methods. A central step in ensuring a child is able to participate within their own education is providing a way for children to express their

views. Yet there is a lack of research identifying the most effective methods that enable those with disabilities, and particularly those with communication or cognitive needs, to participate (Clark, 2005; Marchant and Jones, 2003; Morris, 2003).

It is important to be methodical and rigorous in our evaluation of research reporting methods for supporting communication, lest the he 'chicken soup' effect occurs, where children's voice is regarded as unquestionably good and to be adhered to and endorsed by all; a common by-product of children's rights discourse (Sloth-Nielsen, 1996). Lundy (2007) warns that children's rights research often generates goodwill but one of the side effects is it can dissipate when rhetoric is put into practice. She asserts this is particularly the case where the effect of the process challenges dominant thinking, generates controversy or costs money. Practicality is important.

With the above considerations in mind, a review of existing documented approaches for eliciting children's voice was conducted, with the aim of identifying a tool or tools capable of supporting children with speech, language and communication needs, to explore their school learning and support experiences.

Research Process

To enable a critical review of the existing communication methods, a quality assessment framework was compiled, based on the practical requirements articulated by outreach support services and similar practitioners who would be end users of any suitable tools, and the principles of children's voice that we would expect any approach to recognise as central values. This framework is summarised in Table 1.

A literature search was carried out using the databases PsychINFO and EBSCO Host. Search terms included 'Children's Voice methods', 'Listening tools', 'Participatory tools', 'Evidence based methods' and 'SEN communication tools'. Inclusion criteria included studies that utilised assessment tools or methods to listen to the voice of children with disabilities, and particular focus was given to participants with SLCN. Six elicitation techniques were selected for critical analysis against the quality assessment framework because they most closely matched the criteria. These were, *The Diamond Rank Sorting Task, Focus Group Elicitation, Talking Mats, The Mosaic Approach, The Ideal School Drawing Technique* and *In My Shoes*.

Results

Diamond rank sorting task

Nock (2009) conducted a pilot study with children (aged 7–11, n = 4) with a range of children with moderate to severe learning difficulties to obtain their views about their preferred learning experiences. The study was built

Table 1: Quality assessment framework outlining outreach requirements, children's voice

Practitioner requirements
Adaptable for range of ages (4–18) with communication difficulties and disabilities
Seeks children's views of their experiences of school across social, emotional, behavioural and learning domains
Easy and well timed to administer
Fun and non-threatening
Evaluates how children feel about their interventions and support structures
Evaluates whether a child's enjoyment of school has increased as a result of support
Helps practitioners to understand what children think help them to learn
Children's voice
Respects children's rights
Promotes social inclusion
Personal centred approach
Underpinned by the social model of disability
Empowers the child
Enables active participation
Works towards benefits and overcoming challenges of implementation

upon an adapted version of Thomas and O'Kane's (2000) diamond ranked sorting task and involved asking children to sort activities into what they felt was most important to their learning. Nine activities were written on post it notes by the teachers who administered the method. The children arranged the post it notes according to which activities they liked most at the top, and disliked at the bottom, forming them into a diamond shape. The study did not address how much help the children required when ordering the preferences, however, data revealed interesting insights into the activities that the children showed a preference for which challenged the status quo. For example, several of the children were not experiencing their preferred learning activities. In one case the author reported about being unsure whether the child was reporting on enjoyment or an effective learning experience. There is a danger of disparity between what a child enjoys and what helps them to learn (Kirschner and Merriënboer, 2013). Utilising parallel alternative methods to try to confirm the child's responses, or re-administering the task at a later date might have established whether a child's preference affected his learning experience.

Overall, Nock reported that the children were enthusiastic and enjoyed the kinaesthetic nature of the task. This agrees with O'Kane's (2008) assessment of the technique stating that 'active' forms of communication requiring

sorting activities are more effective and engaging for children rather than the 'passive' communication that takes place during typical interviews. Despite the relative success of the study, the author reported that the task was too time consuming, a fairly common complaint for practitioners seeking the voice of the child (Franklin, 2013).

An additional concern about this study arises because the adults conducting the sorting task constructed the categories that the children were allowed to make preferences about. It has been established that adults and children perceive experiences differently, which may have restricted this study to an adult prioritised account. With that said, some of the children had severe communication and learning difficulties, and the categories appeared to provide assistance and structure, enabling the children to have a voice where otherwise they might not have had one. Therefore, it represents a significant step forward towards achieving children's voice. Ultimately, although Nock's findings were unpublished and restricted to a single setting, it provided a nuanced account of the dilemmas that arise when seeking the voice of children with communicative and learning disabilities.

The Diamond Rank Sorting Task appears to require a high degree of reasoning ability; children must be able to reflect upon an activity and then rank its importance against other experiences all presented to them at the same time. This might restrict those who have more severe cognitive needs. An interesting alternative to the above study is to incorporate photographs instead of statements of pieces of paper. The visual nature of the photographs may be preferable to those with cognitive difficulties because, among other benefits, it does not exclude those who find reading and writing difficult (Woolner, Clark, Hall, et al., 2010).

Focus groups

Focus groups are a type of group elicitation that provides an alternative to the one to one interview method that many elicitation methods are based upon. Some authors argue that focus groups offer a dynamic that is less threatening because they reduce the adult–child power relationship, lessen the influence of social desirability, provide more anonymity due to the group which encourages involvement, and promote a sense of self-value through diverse responses (Boyden and Ennew, 1997; Vaughn, Schumm, Jallad, et al., 1996). For children with learning difficulties it is argued they are particularly enabling because they offer validation through peer support (Cambridge and McCarthy, 2001). Others argue that focus groups may be more prone to social desirability effects because children are pressured into expressing ideas in front of peers, that a false consensus can be reached due to the dominance of a few, and that there is often a restriction of subject matter due to issues of confidentiality (Beresford, 1997; Wood, Giles and Percy, 2009).

Tobias (2009) explored how a mainstream secondary school supported children with autism spectrum conditions (ASC) to inform future school policy through the use of focus groups. Two groups of children with ASC (n = 12, aged 14–16), and one group of parents (n = 5) took part in the study. Separate focus groups were held between the parties. Parents were engaged with interview questions about challenges and support mechanisms they felt their children experienced at school. For the children's group, elicitation about their views of school were sought by contributing and drawing on imaginary students with the descriptions 'successful, unsuccessful and with ASD'. The sessions were video recorded which gives weight to the authors findings as it permits 'retrospective analysis' (Edwards and Westgate, 1987) and helps to overcome audible inconsistencies (Coates and Vickerman, 2013). It was concluded that support was most useful when it addressed transitions, provided mentoring and met the needs of the individual (Tobias, 2009).

Including parental input in this study helped to triangulate the children's responses. The central difficulty with focus groups, and especially those made up with children with additional needs such as SLCN, is that groups cannot be represented evenly. Children have histories that impact the group dynamic and place restrictions on its members. As one group of authors put it 'focus groups are inherently unpredictable' (Wood, Giles and Percy, 2009, p. 62).

Talking Mats

Talking Mats is a 'low tech' visual tool kit that can be used as a way to express the views of people with communication or learning difficulties (Murphy, 1998). The process typically involves placing a mat in front of a person and introducing a single topic (e.g. activities). Open-ended questions are asked and the participant chooses symbols that might represent an array of activities and places them on the mat as a record of the response. Children place the representations under a symbol (thumbs up, neutral or thumbs down). Talking Mats has had some commercial success and has been used in a variety of contexts, such as defining outcomes, mental health assessments, out of school activities and transitions (Cameron and Murphy, 2002; Germain, 2004; Macleman, 2010).

Rabiee et al. (2005) used an adapted version of Talking Mats to determine the views of 18 children (aged 6–18 years) with communicative, cognitive and physical disabilities in order to evaluate the outcomes of social care and support services. Before the authors interviewed the children, they obtained background information from carers about the children's abilities. This led them to include questions on eight themes within areas such as looking after the child. In addition, they also learnt that some of the children used familiar communication devices, which were then made available during the interview sessions with the children.

Interviews with the children were facilitated with laminated symbol cards. For example, for the statement 'How do I want my doctor to talk to me', the child could respond with any or all of the following responses: 'Wants his doctor to talk to him in a way he understands', 'Doesn't want his doctor to talk to him', 'Doesn't mind'. They also carried blank cards in case more symbols were needed.

The authors attempted to check for the children's understanding of the method through preliminary questioning. On the one hand, this helped improve the reliability of the method, but on the other, the process led to the exclusion of a child from the research, which reaffirms the notion of the child as incapable and restricts generalisations that the study can claim.

Overall, it was reported to be easy to administer, non-threatening and fun for the children. In addition, because the content was variable for children who had different cognitive abilities, it was reported as being inclusive and flexible; essential when meeting the needs of disabled children (Murphy, 1998). The authors assert that the method 'worked for all children' in relation to finding out their choices. Clearly, this does not mean the method will work for everyone, as those with disabilities are not a homogenous group and the level of communicative needs within the study was unclear. Indeed, one study found that Talking Mats was no more effective than individual interviews for children with moderate language delay, while for children with Attention Deficit Hyperactivity Disorder (ADHD), Autism and Social Emotional Behaviour Communication Difficulties (SEBCD) it was found to increase the elicitation of views, and increase attention and interaction of on-task behaviours (Coakes, 2006).

Talking Mats provides an excellent example of adaptability and potential to overcome children's communicative barriers. However, it has not been formally evaluated and the level of evidence is therefore only suggestive (Law et al., 2012).

The Mosaic approach
The Mosaic approach was originally designed to elicit the views of children under 5 years old (Clark and Moss, 2001). It combines visual methods such as cameras, tours and map making of the children's environment, as well as observation and interviews to provide a number of ways within which to explore a child's world. This makes it possible to triangulate qualitative data, which offers a more robust approach than any single elicitation method (Willig, 2014).

Beresford, Tozer, Rabiee, et al. (2004) adapted the technique for use with a group of five children (aged 6–14) with ASC. She was interested in finding out what aspects of their lives the children viewed positively and negatively. Interviews were conducted with parents, teachers and children, and informal observational data were recorded, which mirrored the triangulation effect of the original project. In order to alleviate social anxiety during the interview, the children's parents were provided with individualised social stories to rehearse with their children regarding the upcoming study. To prevent further distress caused by the face-to-face nature of the interview process, the research session was based around a craft activity that used photographs of activities and people, previously taken by the children in order to make a poster.

It was reported that the children enjoyed the activity and that the photographs helped to focus the research on the here and now (Beresford et al., 2004). In addition, the interviews were said to be mostly successful in eliciting the children's views and that these views differed from the perceptions of others which questioned the status quo. The study promotes the importance of representing items concretely through the use of photographs as opposed to symbolically, as symbols may mean different things to different people. It also utilises methods for keeping participants calm during the interview process, which is important to ease anxiety. However, elements of the method are unclear, for instance the manner by which the authors were able to encourage and measure the impact of the use of social stories at home. Furthermore, asking the children to photograph what matters to them is beneficial in terms of more accurately representing the child's voice, but might be impractical in terms of providing usable information upon which practitioners can act; the study did not outline how the information would be used upon completion. In addition, the elicitation method was only carried out on one occasion, showing only a snapshot of that child's views. The authors suggest that repeat visits with the children would have allowed for further, more in depth-exploration.

The Ideal School Drawing Technique (DIST)
Williams and Hanke, (2007) used an adapted version of 'Drawing the Ideal Self Technique', (DIST) (Moran, 2001) to seek the views of 15 pupils (aged 6–14) with ASD to establish what they felt were the most important features of school provision. DIST is underpinned by the concept of Personal Construct Psychology (PCP) (Kelly, 1955) to gather pupils' constructs; believed to reflect how people think, make sense about the world and explain behaviour. The authors argue that PCP is useful at evaluating the hard to reach voice of children with disabilities because personal views cannot be rejected and therefore must be respected. This assertion can be equally applied to all children when adhering to the rights and principles of children's voice.

The original DIST required children to sketch two pictures; one of the sort of person they would not like to be and one of the sort of person they would like to be in order to explore how they perceived themselves (Moran, 2001). In the adapted version, pupils were asked to

consider the school's current and ideal provision (Williams and Hanke, 2007). This was supported with semi-structured questions, designed to elicit the children's experiences of school, the classroom, other children, adults and themselves. It was reported that children showed a sophisticated understanding of school ethos and the impact of this on their own well-being. However, Williams and Hanke (2007) conceded that some adult interpretation was necessary in order to identify 'the most relevant' features of school provision and their impact on their school experiences.

The DIST method appears to provide a structure that enables children to express their views using a combination of drawing, talking and writing. The authors reported that the technique was practical, time-efficient and popular with children and adults. However, it also reported that because of its PCP nature its use is limited to those who receive the appropriate training. In addition, it may be unsuitable for those with more severe learning difficulties (due to having to reproduce abstract images from memory), those with motor co-ordination difficulties (due not being able to draw their thoughts accurately), and those who struggle with language processing (as their drawings may be misinterpreted).

In My Shoes

In My Shoes (IMS) is a software package that was originally developed as a tool for interviewing in cases of suspected child abuse (Calam, Cox, Glasgow, et al., 2000). Recently, it has been trialled in a variety of contexts and is marketed as helping professionals to communicate with children or adults with disabilities about their experiences, views, wishes and feelings in a variety of contexts. An interviewer sits next to the child and guides them through a structured interview process choosing up to nine modules with accompanying symbols such as emotions, places and people. Two days training is required before using the programme.

Barrow and Hannah (2012) trialled IMS on eight children aged 9–15 years who had a diagnosis of ASC. All but one of the children attended mainstream schools. The authors sought to identify the children's views about help received in and outside of school as well as their participation in decision-making processes. Their rationale for using the programme included: its flexibility; a sequential nature to the modules; audio guide prompts; adaptability to the individual; use of the child's own vocabulary to label feelings, people and settings; and the facility to log the child's responses.

The authors reported that all children responded positively to the use of the computer programme, and note that it seemed to relax them. They assert this was due to the three-way interaction process between the child, interviewer and computer. In particular, they note the visual aspect of the method was useful in focussing the

children's attention. Provided transcripts demonstrate free-flowing conversation, and children were asked a variety of questions, such as, what clubs they were involved with and who helps them in school. However, audio or video recording was not used which makes it difficult to validate their findings. They also noted that some of the children found the voice of the computer distracting and found it difficult to relate to the representational symbols on the computer.

Discussion

Table 2 illustrates the suitability of each method for eliciting voice from children with SLCN. This review demonstrates that, although the tools identified provided methods of gaining insights about children's experiences, they failed to meet the requirements set out in the quality assessment framework criteria. Most notably, none of the tools offered a comprehensive way of exploring how children with SLCN are affected by school and support processes, which directly impacts their experiences of learning in the classroom. Furthermore, the studies offered only a single snapshot of the children's experiences at a particular point in time. This is a crucial consideration both in terms of validity of responses and creating a tool kit method that offers educational services a way to make informed decisions in regards to support in context. This review highlights a clear gap in the research in terms of suitably robust and transparent methods to elicit the voice of children with SLCN about their school learning and support experiences.

The need for the development of alternative approaches to eliciting views from children with SLCN is clear, but this process needs to be principled. Specifically, ensuring that tool design decisions draw upon theory is important to understand why it should work (Middleton, Gorad, Taylor, et al., 2006). Equally important is that the tool is practical for the educational professionals who wish to use it. However, this review revealed a paucity of tools across multiple fields and, given the political and social push towards inclusion, this research is likely to be helpful to other services that support children with SLCN.

Conclusions

We have argued that more work needs to be done to develop and evaluate approaches that enable children and young people with communication difficulties to communicate their educational experiences. In particular, we propose that initial design decisions for future tools need to be considered in relation to a quality assessment framework, such as the one used here. To support this, we have further updated the framework we used here to include factors that have emerged from this review (see Table 3).

We argue that until we are able to provide educational practitioners with elicitation tools that have been rigorously developed and evaluated, the promise of progress

Table 2: Summary of tool kits reviewed and their considered suitability

Method	Details	Strengths	Weaknesses
Diamond Rank Sorting Task (Nock, 2009)	Children (aged 7–11) sorted activities into a diamond shape of what they felt helps them to learn.	Data revealed insights that can challenge the status quo	Limited experiences children can talk about
Focus Groups (Tobias, 2009)	Group elicitation task. Children (aged 14–16) were asked about their views of school and to draw interpretations.	Parental interviews helped compare children and parental views. Video recording enabled retrospective analysis.	Subject to inherent problems of focus groups
Talking Mats (Rabiee et al. 2005)	Physical visual tool that asked open-ended questions about children's (aged 6–18) ideas of successful outcomes. Symbols represent the conversation on a mat.	Background knowledge helped with the interview process	Preliminary questions can exclude children. Open-ended questions can be difficult for children with cognitive/communicative difficulties to answer
The Mosaic Approach (Beresford et al., 2004)	Combines variety of methods, for example, photos, tours, map making, observations and interviews. Sought to find out what aspects of their lives children (aged 6–14) viewed positively and negatively.	Triangulation of different data supported validity of the project. Interviews were based around a craft activity to relax children. Photographs helped focus the children and were more concrete than symbols. Views found differed from status quo	Practicality of asking children to take their own photos questionable
The Ideal school drawing technique (Williams and Hanke, 2007)	Based on PCP principles. Children (aged 6–14) asked to draw a picture of most important features of school provision.	PCP provides strong theoretical background for findings. Semi-structured interview questions supported the process. Children's drawings showed sophisticated understanding of school ethos and the impact of this on their own well-being	Adult interpretation necessary to interpret drawings. Requires several days training
In My Shoes (Barrow and Hannah, 2012)	Computer-based tool trialled on children (aged 9–15) to identify views about help received in and outside of school.	Software programme said to be flexible and adaptable to the individual. Uses emotional faces and symbols. Uses open-ended questions	Requires several days training. No audio or video recording taken.

towards participation of children with SLCN in their educational futures will continue to be unfulfilled. Our review indicates that care needs to be taken to avoid 'snapshot' based approaches to elicitation, or approaches that are unable to focus on specific elements of learning support. We have recently published an evaluation of a new approach to eliciting views of children with SLCN, which is based on scaffolding an emotion-based dialogue with them (Bloom, Critten, Johnson and Wood, 2020), and is informed by the quality assessment framework developed here. Although not suitable for all children, it has shown that many children with SLCN are able to explore their experiences of learning support in ways that extended and sometimes challenged educator or parental accounts of what they needed, given an appropriate communicative frame of reference. Work in this area needs to continue so that children with more severe challenges can access this same level of communicative exchange.

There are undoubtedly challenges to the development of communicative tools for children with SLCN. However, there is a legal, moral and educational need to do better in this domain. By failing to provide effective methods not only are we denying children's voice but also we are contributing to the construction of disabling learning environments, in which pupils have little or no opportunity to experience and rehearse essential reflection and communication skills. Without the opportunities to engage with such reflections, children with SCLN are

Table 3: Updated quality assessment framework

Practitioner requirements
Adaptable for range of ages (4–18) with communication difficulties and disabilities
Seeks children's views of their experiences of school across social, emotional, behavioural and learning domains
Easy and well timed to administer
Fun and non-threatening
Evaluates how children feel about their interventions and support structures
Evaluates whether a child's enjoyment of school has increased as a result of support
Helps practitioners to understand what children think help them to learn
Children's voice
Respects children's rights
Promotes social inclusion
Personal centred approach
Underpinned by the social model of disability
Empowers the child
Enables active participation
Works towards benefits and overcoming challenges of implementation
Literature review-based features
Flexible for the individual
Data aim to reveal insights that can challenge the status quo
Audio or Video recorded
Identify contextual background knowledge about the child
Interviews should involve manipulating items
Photographs to help focus children's memory and promote concrete ideas
Basic emotional faces are more easily recognised
Mixture of open and closed questions

unable to work towards improving their competence in this domain, which will likely impact their future educational experiences, and further marginalise them from engagement with conversations about what effective education looks like for them.

Data sharing is not applicable to this article as no new data were created or analysed in this study.

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