Reflexively Conducting Research with Ethnically Diverse Children with Disabilities

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Abstract
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Keywords
Children with Disabilities, Participatory Research, Qualitative Research, Narrative Research, Voice, Co-Researchers

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This reflexive paper explores the process of engaging ethnically diverse children with disabilities within participatory and narrative research concerning their school life via a multi-method qualitative approach. It contemplates the use of participatory research methods, involving children with disabilities as co-researchers, establishing relaxed research environments, and maintaining qualitative rigour while supporting children’s voice and agency. This paper addresses possibilities of qualitative research to access and amplify voices and differing social experiences of children with disabilities, whilst underscoring their capacity and right to contribute to research regarding their lives. The author advocates re-envisioning ways to conduct ethical research with children with disabilities. Keywords: Children with Disabilities, Participatory Research, Qualitative Research, Narrative Research, Voice, Co-Researchers

The Rights of Children with Disabilities in Research

The United Nations Convention on the Rights of Persons with Disabilities (2006) is a human rights treaty promoting and protecting equitable rights, freedoms, and respect of those with disabilities. Recognizing those with disabilities often face barriers to mainstream societal participation, the Convention aims to ensure they have opportunities to engage, enjoy, and live to their fullest potential, with societal rights and freedoms respected as any other person. This includes a right to freely share personal understandings and opinions on issues important to their lives. Article 7 of the Convention emphasizes “children with disabilities have the right to express their views freely on all matters affecting them … and to be provided with disability and age-appropriate assistance to realize that right” (United Nations, 2006, #3). While children with disabilities have a right to express views, this right neither guarantees they will be asked to share these views (e.g., due perhaps to assumptions regarding the child's communication abilities, or individuals may lack clarity and confidence approaching and engaging the child, etc.) nor does it guarantee they will be heard. In supporting the Convention's position toward young people with disabilities, I continuously seek ways as a researcher to break down barriers within research processes for involving children with disabilities, providing them opportunities to both speak and be heard on matters affecting their lives. As I invite children with disabilities to serve as participants, rendering possibilities for them to exercise their right in sharing personal understandings within research, I also appreciate the importance of establishing ethical safe-guards.

The 2013 International Charter for Ethical Research Involving Children (ICERIC) is a set of seven commitments addressing researchers’ obligations to uphold the rights, dignity, and well-being of all child participants, in all circumstances, while embarking upon ethical quality research (Graham, Powell, Taylor, Anderson, & Fitzgerald, 2013). In doing so the ICERIC highlights the rights of child research participants and specifically draws attention to the roles and responsibilities of commissioners and researchers. For instance, the Charter advocates challenging discriminatory barriers for research participation and providing
equitable opportunity for the involvement of all children (Graham et al., 2013). Another commitment focuses on reflexive processes, suggesting:

> Ethical research demands that researchers continually reflect on their practice, well beyond any formal ethical review requirements. This requires ongoing attention to the assumptions, values, beliefs and practices that influence the research process and impact on children. (Graham et al., p. 1)

According to the ICERIC it is imperative researchers engage in reflective inquiry and meaning-making throughout their engagement with children. This reflexivity becomes even more critical when engaging children with disabilities, due to complexities in accessing voice (Ajodhia-Andrews, 2016). Reflexivity presents space for researchers to contemplate appropriate methods and mediums in accessing voices of children with disabilities, space to consider and reconsider techniques better suiting the children involved within the research. Steadily reflexivity supports managing of ethical issues that arise when researching with children with disabilities (e.g., ethical precautions, ongoing consent, participant voice and power, member-checking of data, disclosure of the research process, etc., Ajodhia-Andrews, 2016).

Children from traditionally marginalized groups, including those from diverse ethnic backgrounds and those with disabilities, maintain personal understandings about their lives, identities, and experiences. Yet, their voices and views often remain silent in school systems and research processes (Ajodhia-Andrews, 2016; Brown & Gilligan, 1991; Connors & Stalker, 2007; Engel, 2005; Wickenden, 2011). If they are consulted, it is generally related to their “problems” (as perceived by health professionals, parents, and researchers) and thus they are constructed as challenging, difficult, lacking something, needing help, and vulnerable, rather than having valuable opinions, goals, and aspirations. Connors and Stalker (2007) highlighted that to realize the diversities within children's lives, including those with disabilities, it is essential to listen to their versions and stories of personal experiences. In doing so, counter-narratives of those with disabilities transpire, narrated by those experiencing societal marginalization, while challenging dominant narratives, discourse, and assumptions about disability (Connors & Stalker, 2007). Recognizing the significance of including and deeply listening to the voices of children with disabilities, especially within research contexts, there is a need to better understand how to create ethical research milieus offering children with disabilities prospects to chronicle and converse about personal experiences and issues as experts of their own lives.

Much of the research involving children with disabilities is typically on children with disabilities, rather than with children with disabilities. Research on and about children with disabilities pertain to children’s deficiencies due to impairment (Cuskelly, 2005), concentrating on the child's weaknesses and needs, rather than on their strengths and abilities (Rabiee, Sloper, & Bereford, 2005). Furthermore, developmental assessments and standardized measurements are relied upon frequently in research on children, which assume child development is predictable and linear, falling within age appropriate norms (Hogan, 2005); ideals of normal development suggest diversity in development as deficiencies in development (Grieshaber, 2001). Whereas, research with children suggests a more collaborative research approach from a strength based perspective, focusing upon child participants’ abilities and what they can do rather than on their deficits (Cuskelly, 2005). Children are presented with choice and exploration of personal experiences through their own lens. Such research recognizes children with disabilities as capable conveyers of their experiences, and these experiences are valued and respected by researchers (Hill, 2005; Mishna, Antle, & Regehr, 2004; Rabiee et al., 2005). Researchers facilitating research with children pay attention to necessary adaptations and accommodations to suit the unique and different abilities of participants, ensuring relevancy of
the research experience and recognizing heterogeneity among children (Grieshaber, 2001; Hill, 2005; Rabiee et al.).

By facilitating research with children with disabilities and employing appropriate methodological tools and steadfast reflexivity, I hope to demonstrate throughout this paper that children with disabilities can and should actively engage in research concerning their lives. The following paper is a personal reflection on how I engaged children with disabilities from ethnoculturally diverse backgrounds within participatory and narrative research concerning their school life and personal experiences of inclusion and exclusion. This paper explores complicated questions encountered throughout the research process, as I muddled through unchartered territories in hopes of respectfully engaging children with disabilities in research to better understand their schooling experiences and sense of belonging.

Understanding Disability Frameworks and Child Participation in Research

Traditionally disability is understood as a personal tragedy, illness or impairment, and medical problem situated within an individual (Barnes, 2012; Barnes & Mercer, 1997; Oliver, 1990; Siebers, 2008). Perceiving disability as an individualized medical problem suggests it is caused by physical and/or psychological limitation(s) and impairments stemming from the disability; impairment is seen as the root cause of disability (Barnes & Mercer, 1997; Oliver, 1990). However, in distinguishing between disability and illness/impairment Oliver (1990) explained disability is a social state due to social circumstances, oppressions, and barriers separate from medical illness and impairments. For some people with disabilities impairments may not always impact physical and/or intellectual abilities, yet for others it may cause disabling challenges, or some may experience impairments later on in life due to disability (Barnes, 2012; Oliver, 1990).

Childhood disability is often regarded as an internalized medical defect with a focus on interventions to fix/cure impairment (physical, sensory, cognitive) (Rosenbaum & Gorter, 2011; Siebers, 2008). The medicalization of disability frequently attributes problems of impairments within the child, suggesting the child needs to be fixed with interventions so that s/he aligns closer to realms of the "ideal" non-disabled child. Oliver (1990) contended,

The whole medical and rehabilitation enterprise is founded upon an ideology of normality and this has far reaching implications for treatment. It's [sic] aim is to restore the disabled person to normality, whatever that may mean. Where that is not possible, the basic aim is not abandoned; the goal is to restore the disabled person to a state that is as near normality as possible...the ideology of normality rules. (pp. 4-5)

Consequently, children with disabilities are viewed as vulnerable victims due to impairments that set them apart from typically developing children; they become categorized as incapable, in need, and perhaps incomplete as they undergo a process of restoration to a normal child. Such a framework preserves deficit-based discourses and developmental notions of normalcy (Gabel & Connor, 2008; Rauscher & McClintock, 1996). It also perpetuates ableist assumptions. Ableism refers to deeply entrenched societal beliefs and attitudes regarding acceptable standards of able bodies, beauty, intelligence, health, etc. These societal standards operate as oppressive and discriminatory environments devaluing those with disabilities (Rauscher & McClintock, 1996). Within school settings for instance, ableism lingers hallways through implicit and unchallenged attitudes, affirming "...that it is better for a child to walk than roll, speak than sign, read print than read Braille, spell independently than use a spell-check, and hang out with nondisabled kids as opposed to other disabled kids, etc." (Hehir,
2002, p. 3). Society conveys messages that it is more desirable for those with disabilities to act and do things as close to, if not the same, as those without disabilities, nearing markers of normality.

Although fields of medicine offer forms of rehabilitation, there is often the assumption that everybody desires these interventions. For instance, cochlear implants promise to serve as a "medical cure" to severe deafness (see for example, Iliades, 2013; Kids Health, 2015; Labadie & Haynes, 2005), but in doing so undermine significant aspects of deaf culture, such as its language, values, traditions, norms, and identity (Cripps, n.d.). The advent of cochlear implants also assumes deaf persons aspire to be part of the hearing/speaking culture. This implies being deaf is to miss out in participating within the hearing world, rather than considering deafness as a desirable quality to one’s identity. The National Association of the Deaf (2000) is therefore at best cautious of such procedures.

Similarly, segregated special education learning is a form of educational intervention, and is often preferred for the comfort and security it provides some educators and families. Rather than mainstreaming (i.e., the child may be perceived as capable of meeting standards of the regular classroom, but are typically "pulled out" to attend a segregated special education classroom for particular academic subjects, receiving additional supports) or inclusion (i.e., the child attends a regular classroom with non-disabled children on a full-time basis and receives any additional supports, accommodations, or adaptations in the regular classroom), special education classrooms are segregated units consisting of extra learning supports with trained disability educators, disability specific learning materials and equipment, and filled with similar students (i.e., those with disabilities). The advantages of receiving extra adapted and accommodated educational resources for a child with disabilities are obvious, yet it also implicitly suggests the child does not fit within the institution's ideals of the normal student. As Ajodhia-Andrews (2016) explained,

> special education classrooms and other forms of academic streaming/tracking are employed to shape minoritized disabled children into able-bodied non-minoritized students as declared by dominant societal and school discursive practices and ideals. Once these children attain certain standards of student normalcy, academic achievement, and educational excellence, they are then authorized full inclusive participation within all facets of school life....these spaces are designed with goals of edifying disabled children in hopes of inclusion within mainstream classrooms and one day social inclusion as citizens, aligning inclusion with normalization of the non-disabled child and student. (pp. 265-266)

These examples of intervention are assumed to benefit those with disabilities, and for some this may be true, yet they also further perpetuate deficit-based notions of disability. There is no refuting the positive benefits from receiving extra supports and rehabilitation, as these interventions often expand possibilities to further the quality of life for people with disabilities, providing greater access and participation within society. However, in a society remaining fundamentally un-accepting of difference and disability, we cannot deny that these interventions may also serve to overcome and change disability, as such services primarily focus on changing or supporting a child in overcoming disability (e.g., rather than use sign language as a viable form of communication, a deaf child attends speech and language therapy during school hours) (Hehir, 2002). This further restricts and disempowers people with disabilities through ableist thinking:
The ideology of ability stands ready to attack any desire to know and to accept the disabled body in its current state. The more likely response to disability is to try and erase any signs of change, to wish to return the body magically to a past era of supposed perfection, to insist that the body has no value as human variation if it is not flawless. (Siebers, 2008, p. 26)

During the mid-twentieth century (1970's) the social model emerged as a response from those with disabilities, challenging traditional medicalized understandings of disability and generating a new found disability movement and sense of activism (Barnes, 2012). Despite maintaining a minimum of nine different versions (Mitra, 2006), the model in general perceives disability as a social construct stemming from attitudinal, institutional, and environmental barriers (Barnes, 2012; Watson, 2012); the model positions problems attributed to disability within society, rather than the individual (Oliver, 1990). Oliver (1990) argued a person's limitations become disabling when society fails to provide services and needs required for maximum societal participation; thus, disability is a form of social oppression. It is society and other institutional barriers that disable and limit accessibility and opportunity for children with disabilities, not impairments themselves (Watson, 2012). From a social model perspective contextual factors of social and physical environments exclude and restrict persons with disabilities, and thus these environments require intervention. Connors and Stalker (2007) maintained the social model is a counter-narrative to traditional notions of disability, yet thus far it currently lacks the inclusion of children with disabilities. The authors suggested creating a social model of childhood disability, which incorporates personal experiences and understandings from children with disabilities into the social model debate while also allowing children access to knowledge about the social model (Connors & Stalker, 2007).

The disadvantages faced by many children with disabilities and their families due to societal barriers are nestled within a complex web of political, social, and cultural experiences (social model). Thomas (1999) classified these barriers as "barriers to doing," "barriers to being," and the "impairment effect." Barriers to doing refer to any physical, material, and/or economic hindrance for those with disabilities, preventing access and participation in doing an activity (e.g., lack of ramps to enter buildings, insufficient school bus transportation for children with disabilities, lack of communicative supports/devices to support children with autism in inclusive classrooms, etc.). Barriers to being refer to insensitive and inappropriate behaviours and attitudes toward those with disabilities, negatively impacting their self-esteem and internal being (e.g., bullying [verbal or physical], staring, condescending attitude when talking to those with disabilities, children with disabilities perceiving segregated classrooms as a space for "bad" students, etc.). Impairment effects result directly from living with the impairment, limiting participation of those with disabilities in an activity (e.g., a person with multiple sclerosis may not be able to engage in an activity due to excessive pain or fatigue). Although impairment effects also impose restrictions for those with disabilities, Thomas (1999) distinguished these from barriers to doing and being, contending barriers to doing and being are grounded in unjust and exclusionary social dynamics established by those without disabilities and institutional policies and practices.

Such societal barriers create disparities for many families with children with disabilities, limiting access to care, increased financial needs, etc., and these gaps widen among those from diverse ethnic backgrounds (Bricout, Porterfield, Tracey, & Howard, 2004). For instance, specifically examining barriers within school systems (which are reflections of barriers in society), ethnically diverse families experience challenges due to service providers lack of cultural knowledge regarding families' understandings and attitudes of disabilities, teacher versus parent expectations of their child, linguistic differences excluding parents from particular events or appointments, demanding work schedules preventing parents' regular
attendance at school meetings, etc. (Ajodhia-Andrews, 2016). Within school systems, children with disabilities often encounter blame for academic struggles, resulting in segregated classroom placement, educational streaming, and remedial programs (Ajodhia-Andrews, 2016). The social model of disability opens boundaries to consider discrimination among other marginalized groups, acknowledging the challenges ethnically diverse people with disabilities may face (Bricout et al., 2004). Moreover, one version of the social model, the minority model of disability, associates disability to other oppressed minority status groups, suggesting those with disabilities experience similar social inequities, discrimination, and prejudicial barriers (Bricout et al.; Hahn, 2002; Mitra, 2006). Thus, people with disabilities may face employment challenges, financial hardships, poverty, educational segregation, exclusion from certain facilities, etc., all of which may be common experiences of those from other traditionally marginalized groups (e.g., those from diverse ethnic/cultural/racial backgrounds) (Hahn, 2002). Positioning disabilities alongside other historically marginalized groups underscores parallel human rights challenges and concerns each of these groups experience due to barriers created by majority groups.

Disability frameworks continually change, undergoing amendments based on personal experiences, context, and historical time periods. Although the social model maintains a dominant presence today, shaping much of current legislation, policies, and practices for those with disabilities, Shakespeare and Watson (2002) asserted the model is no longer useful in the twenty-first century due to shifting of times. They reasoned for a more balanced paradigm, acknowledging disability cannot be reduced simply to impairment, medicalized diagnosis, or social, cultural, institutional, and environmental barriers. While realizing the significant injustices resulting from societal barriers (social model) it is also important to realize the significant corporeal/health barriers stemming from the body that cannot be ignored such as chronic pain (medical model). For many people with disabilities impairment is often part of their daily experience, and this cannot be ignored. Watson (2012) explained the multifaceted interaction of disability,

Disability cannot solely be described as a health problem residing in the individual, nor is it solely the result of oppressive practices, and neither can it be reduced solely to discourse…Rather, the disability arises from the complex interaction between the person with an impairment and the complete physical, human-built, attitudinal and social environment. (p. 198)

Similar to Shakespeare and Watson (2002), Siebers (2008) also advocated disability be regarded as complex embodiment, appreciating disability as a form of human diversity resting on a spectrum of differences. Conceptually, embodiment highlights that all people are impaired, regardless of disabilities, as impairment is an "inherent nature of humanity" (Shakespeare & Watson, 2002, p. 27), yet impairment impacts individuals' living experiences in distinct ways depending on the severity of impairment and context of environment. In highlighting disability as a construct deriving from the environment and also from bodily impairment, Siebers (2008) suggested social and medical models of disability work together through complex embodiment to “theorize the body” (p. 25). That is, neither perceiving the disabled body/mind as primarily deficit-based and defective in need of medical intervention nor perceiving the environment (physically constructed, social, institutional) as solely disabling the body/mind ignoring impairments in the body/mind. Complexly, both models influence one's experience of disability. To obtain a comprehensive account of disability we must appreciate the interrelationship between impairment, one's response to impairment, and the social environment, recognizing that together these contribute to the advantages and/or disadvantages experienced by people with disabilities. Gaining insight into how the
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interrelationship between these factors shape different experiences for children with disabilities requires seeking out children's personal understandings.

Children with Disabilities' Participation in School Research

Despite being the most impacted by educational policies, practices, and reform, children are typically presented the least opportunity to contribute opinions or ideas about how these influence their school life and learning (Cook-Sather, 2002; Nieto, 1994; Soo Hoo, 1993). Sharing schooling experiences and understandings about educational matters support young people in establishing personal agency and voice within schools, demonstrating their knowledge to shape what is considered education (Cook-Sather, 2002). Yet, children often remain in schools as silent participants with rare opportunities to engage in educational conversations empowering their student voice, and this is especially evident among children with disabilities, whose lives, views, and multiple identities remain hushed and hidden (Wickenden, 2011). To a great extent the research and literature pertaining to inclusive education, children with disabilities, issues of marginalization, diversity, and educational reform frequently refer to teachers’, administrators’, or policymakers’ understandings (e.g., Avramidis & Norwich, 2002; Frankel, 2006; Fullan 2001, 2003; Milner IV, 2010; Rose, 2001; Smith & Leonard, 2005). Although children with disabilities are primary stakeholders within education, there remains a lack of research highlighting their views, attitudes, and understandings of personal experiences of diversity and school life.

The voices of children with disabilities must be considered in developing an inclusive school community; considered partners on a team for school improvement. Saggers, Hwang, and Mercer (2011) described this team as consisting of both students and educators collaboratively working together to identify, plan, and negotiate students’ personal needs, strengths, and supports. Inviting students as partners into educational processes supports effective learning and teaching (Fletcher, 2011). In an initiative on student-voice research in schools (Consulting Students about Teaching and Learning, 2000–2003), Rudduck and Demetriou (2003) found that in discussing learning experiences with students they reported a stronger sense of (a) empowerment, (b) school belonging, (c) respect and esteem, (d) school agency, and (e) themselves as learners – thus, spanning “organizational,” “personal,” “pedagogic,” and “political” dimensions (p. 278). Children serve as credible reporters of knowledge in creating inclusive classrooms (Brooker & MacDonald, 1999; Howard, 2001; Keat, Strickland, & Marinak, 2009; Messiou, 2002, 2006; Nutbrown & Clough, 2009), and as such can inform understandings of diversity and inclusion in schools.

Educational researchers may also serve as key players on this collaborative team, co-researching with children with disabilities to further examine schooling experiences and conceptualizations of inclusion. With appropriate methodological tools children may actively engage in research concerning their lives (Christensen & Prout, 2005; Clark & Moss, 2001; Dockett & Perry, 2007; Freeman & Mathison, 2009; Greene & Hogan, 2005; Nutbrown & Clough, 2009). Every child with a disability uniquely experiences impairment depending on contexts, circumstances, and needs, often resulting in limitations to societal participation within their community, inclusive schooling, etc. (Watson, 2012), and I argue also research. Although these limitations to fully take part in activities may result from health challenges or lack of technology (Watson, 2012), children with disabilities should have a choice in whether they want to participate regardless of how much or how little their level of participation may be. Particularly, children with disabilities have a right to express their views, and in efforts to support accessing and understanding these views within research activities, researchers are encouraged to adapt and accommodate where necessary to facilitate maximum research participation. Researchers have a responsibility to offer suitable supports for children with...
disabilities to exercise their right of discussing issues impacting their lives, being involved and heard within the research (United Nations, 2006, Article 7). Recognizing the importance of inviting and valuing young people's voices in educational conversations (Brooker & Macdonald, 1999; Fielding, 2001; Hopkins, 2008; McCallum, Hargreaves, & Gipps, 2000; McIntyre, Pedder, & Rudduck, 2005), and in research processes (Greene & Hogan, 2005; Johnson, Hart, & Colwell, 2014a), this paper reflects on my journey of collaborating with a group of young people with disabilities in research examining their school life and insights of inclusion.

**Research Questions and Researcher Relationship to the Inquiry**

Throughout this reflective paper, I ask the following:

1) What are participatory and inclusive qualitative research mediums to access voices of children with disabilities?
2) How can children with disabilities serve as co-researchers?
3) What are ways to create a safe research environment for children with disabilities?
4) How do I uphold qualitative rigor while supporting agency and voice among children with disabilities?

In exploring these questions, I aim to guide readers through my experience of researching with ethnically diverse young people with disabilities. I also intend to demonstrate possibilities of participatory qualitative research in actively engaging participants as co-researchers.

This inquiry is influenced by my clinical experience as a behavioural therapist for children and youth with developmental disabilities, particularly those with Autism Spectrum Disorder (ASD) and those who communicate through different means (e.g., not always through speech, but through gestures, pictures/visuals, behaviours, etc...). Many of these children were from diverse ethnic and racial backgrounds, practiced various religions, spoke multiple languages, and sometimes lived in lower socio-economic contexts. From working alongside these young people and conversing with their families and extended families, I became aware that these students were often placed in full-time segregated special education classrooms or mainstreamed. Over my many years as a therapist, I never worked with a child receiving inclusive education within an inclusive classroom on a full-time basis. I frequently wondered how these children felt about their schooling experiences, especially those from diverse ethnic backgrounds. I questioned whether these children experienced opportunities to voice personal perspectives, feeling a sense of equitable participation and belonging within their school. With a deep interest in further investigating the schooling experiences of young people with disabilities, I sought out their personal narratives of diversity and inclusion within a research context. As the research progressed I encountered many questions, dilemmas, and ethical considerations in positioning participants as co-researchers while supporting approaches to accessing and amplifying their voices through the use of agency-driven qualitative methods.

**Methods**

This paper reflects upon the process of conducting a qualitative study exploring the narratives of 6 Canadian children with disabilities (ages 10-13). The narratives examined their schooling experiences and understandings of differences and school belonging. Gem, Alice, Simon, Mew, Edward, and William (participant pseudonyms) attend a non-profit centre for individuals with disabilities. All participants are from Chinese and/or Vietnamese ethnic
heritages, and are bilingual in Mandarin and/or Cantonese and English. Participants’ disability diagnosis includes ASD, attention deficit disorder, hyperactivity, global developmental delay, cerebral palsy, and speech and language delays. Some participants have multiple disability diagnoses, however five out of the six children have an ASD diagnosis. All participants are placed within special education segregated classrooms within mainstream public schools. The five children with an ASD diagnosis also receive partial integration into the general education classroom during the school week. This study was informed and influenced by both participatory and narrative methods.

**Participatory Methods**

Participatory approaches seek to balance power relations between researcher and participant in so that both parties mutually contribute and challenge knowledge in the research process, becoming co-researchers and co-learners (Bergold & Thomas, 2012; Hart, 1992; Veale, 2005; Williams, James, Barclay, Stalker, Watson, & Hudson, 2012). Although participation is defined differently by many scholars, the goal of maximizing decision making opportunities is central to all. In the context of working with children Lansdown (2002) noted, “Participation can be defined as children taking part in and influencing processes, decisions, and activities that affect them, in order to achieve greater respect for their rights” (p. 273). Beyond prospects of voicing personal insights, being heard and listened to, children wish for their views to be respectfully discussed, feeling a sense of involvement in decision making (Williams et al., 2012). Supporting children with disabilities as co-researchers involves establishing a space of safety, whereby participants freely express experiences and opinions while also maintaining some degree of decision making (Bergold & Thomas, 2012).

![Figure 1. Ladder of young people's participation in research (Hart, 1992)](image)
There are, however, varying levels of participation and decision making depending on context, access, and what is in the best interest or benefit to participants. Hart (1992) developed a well-known model conveying the degrees of participation between young people and researchers. Hart’s (1992) “Ladder of Participation” consists of eight levels of young people participation in research projects (see Figure 1). The lower three steps of the ladder represent no child participation, whereas steps four to eight represent degrees of child participation. Hart’s (1992) Ladder is often criticized for implying progression up the ladder is linear and all research with children should be facilitated at the highest step (Tisdall & Liebel, 2008; Williams et al., 2012). Yet, degrees of participation vary, existing in a state of ebb and flow, as participation highly depends on children’s circumstances, interests, abilities, mood, etc. I locate my research on the sixth step (i.e., adult initiated, shared decisions with children), because although participants shared views, made decisions, and served as co-researchers, I initiated many aspects of the research (e.g., research purpose and goals, set of research activities, data collection tools, research venue, etc.). Climbing to this level of the participation ladder is not necessarily a problem, as sometimes it is in the best interest of participants to remain on lower levels of the ladder. In the best interest of this group of children with disabilities, I felt it was critical I initiate and direct certain aspects of the study to maximize individual participation and retain a high level of research engagement.

Narrative Methods

Using a narrative approach places stories within a systematic, methodological, and social scientific realm, in which they may be studied (Polkinghorne, 1988; Randall, 1995). Narrative research methods work well in accessing children’s views, as children make sense of who they are through telling and re-telling their experiences and stories (Ahn & Filipenko, 2007; Bruner, 1996; Engel, 2005). Narratives employ stories as a method to explore others’ lived experiences and to examine their understandings of these experiences (Patton, 2002). Narrative research is described as a less exploitative research method to access silenced schooling experiences of children from minority status groups (He, Chan, & Phillion, 2008; Hendry, 2007). Creswell (2005) and Lyons and LaBoskey (2002) suggested narrative research is a reflective process accessing first-person accounts of experiences, it is socially and contextually positioned, and a practice of examining and re-storying provocative and veiled educational matters. These authors also contended narrative research is a journey where individuals’ identities shift and are reconsidered, a method emphasizing construction of meaning and knowledge, as well as collaboration and negotiation of data between researcher and participants (Creswell, 2005; Lyons & LaBoskey, 2002). In keeping with these principles, narratives serve as essential tools to providing insights into what and how ethnically diverse children with disabilities feel about their school life.

Participants’ narratives were developed orally (dialogue, interviews, storygames), textually (written activities), and visually (drawings, photography); research procedures and methods for gathering narratives will be discussed throughout the paper. The narrative data was analyzed, establishing patterns and tensions, identifying codes and thematic categories, organizing text, and most critically searching for meaning and making sense of the data (Denzin, 2004; Gray, 2003). To make sense of the children’s stories and experiences, I explored their narratives highlighting contexts, characters, key events, and conclusions (Creswell, 2005). Riessman (1993) classified this as “scrutinizing” (p. 57) the data or drafts of texts, for surfacing meaningful patterns, tensions, discourses, and positioning of the narrator as self and with others. Through open coding I segmented the data into categories and subcategories, establishing larger themes related to the purpose of the study (Creswell, 2005). This paper,
however, does not discuss details of the findings from the study (codes - categories, subcategories, and themes), but rather is a reflexive paper on the research process of conducting this particular narrative study with ethnically diverse children with disabilities.

After coding and searching for emerging themes and patterns, participants and I collaboratively told, re-told, wrote, and re-wrote their narratives, negotiating which pieces of stories to include, what they thought of surfacing themes and interpretations, where to position texts, and the organization and editing of each narrative (Chase, 2005; Creswell, 2005). Through this dialogue and debate participants and I co-constructed narratives together, whereby I also became part of the conversations, responding to their stories and experiences, thus shaping and re-storying their narratives. These narratives become unique to the interaction between myself and participants; if participants shared their stories and understandings with any other person/researcher, the narratives would never be conveyed and told in the same way (Trahar, 2009). This co-construction complicates ownership of the narratives, begging the question of who truly owns the narrative (Trahar, 2009)? I cannot answer this with certainty, as I also surfaced as a storyteller among the children in the telling and re-telling, writing and re-writing, and interpreting and organizing of their narratives. However, I sought ways to ensure the children’s voices resonated as predominant narrators of their stories, aligning with their beliefs, experiences, and essence of themselves. As I return to my research questions in the following sections, I anticipate readers will recognize that I strove to position participants' voices as narrators and original storytellers at the centre of each narrative.

What Are Participatory and Inclusive Qualitative Research Mediums to Access Voices of Children with Disabilities?

Inclusive research approaches offer children with disabilities prospects of maximizing participation and engagement within the research process. As Williams et al. (2012) suggested, participative activities should be appealing and exciting, offering a variety of research methods to include children with disabilities and those from diverse ethnic groups. Incorporating various creative and engaging methods may complement each other rather than replicate, prevent participant boredom, support triangulation of data, and attempts to manage the amount of power imbalance between researcher and child (Carrington, Allen, & Osmolowski, 2007; Darbyshire, MacDougall, & Schiller, 2005; Freeman & Mathison, 2009; Moss, Deppeler, Astley, & Pattison, 2007; Punch, 2002). I employed a multi-method data collection approach combining semi-structured interviews with open-ended questions and personal researcher memos, alongside creative mediums to further engage participants in exploring schooling experiences.

Creative Mediums

Utilizing creative approaches when conducting research with children with disabilities may foster a more comprehensive understanding of their experiences, allowing researcher and participants to explore emerging themes from creative mediums to guide discussions. Within the study I included creative mediums, such as artistic writing activities, drawings, storytelling/storygames, and visual narratives through photography; methods which entail “…inventive and imaginative processes…” (Veale, 2005, p. 254). These particular creative mediums supported the children's differing abilities (e.g., not all of the children communicated with speech), and accessed information difficult to share via interviews (e.g., bullying experiences). Mediums involving writing, images (i.e., drawings, photographs), and imaginative stories present children with disabilities with other engaging ways to contribute to research and communicate understandings; ways in which traditional approaches may not
offer. These mediums encouraged children with disabilities to create personal forms of their expression and communication, demonstrating that they are well-informed individuals capable of contributing knowledge about their lives and socio-cultural contexts. Through these mediums participants explored pre-selected topics related to school belonging, learning, and diversity.

**Artistic writing activities** can often effectively provide accounts of children’s experiences through writing. Participants engaged in journal writing, brainstorm bubble mapping, and a “Thoughts about Me” booklet. Within each activity, I requested participants reflect and record their feelings, experiences, ideas, and stories (see Figure 2).

![Figure 2. Simon’s journal writing about personal bullying victimization and exclusion at school.](image)

To further examine participants’ personal insights they completed a booklet I developed entitled “Thoughts about Me.” The booklet served as a tool to learn more about participants’ schooling experiences, and to reinforce ideas discussed through interviews (see Figure 3).

![Figure 3. Edward’s response in his “Thoughts about Me” booklet, indicating his efforts at school.](image)
As some of the children preferred not to write I offered choices of typing responses on the computer or scribing (i.e., participants dictated responses aloud and I wrote them down), to support participation in the writing activities.

Through writing activities, the children expressed thoughts and experiences regarding issues that they may not necessarily feel comfortable discussing (e.g., skin colour, disability, etc.). It also presents young people with time in the research process to reflect on topics, forming their own opinions and ideas, and extending beyond the researcher's understanding of the topic (Noble-Carr, 2006); thus, balancing the time pressures of providing rushed responses that some young people may endure during interviews. Free writing about personal experiences may also support accurate recall of events, compared to asking children to remember and verbally re-tell particular details of experiences (Noble-Carr, 2006). However, this medium can be quite time intensive depending on the children's literacy and fine motor abilities.

**Drawings** can be powerful visual representations of children’s understanding of their worlds, serving as a form of communication (Veale, 2005). However, as Veale (2005) noted, for drawings to serve as research data verbal interpretations conveying meanings should accompany the drawings. Asking children to explain their drawings and reasons behind images in the drawings also prevents adult/researcher interpretations of the data (Punch, 2002), as well as enhances the quality and richness of the data, presenting insights which may not have been accessed from only drawings or discussions (Noble-Carr, 2006). As such, participants shared and discussed their drawings in the group (see Figures 4 and 5).

![Figure 4](image.png)

**School sometimes makes me feel embarrassed and of course, scared. I often feel scared because people keep looking at me...I don't know why.**

*Figure 4.* Mew’s drawing with accompanying verbal interpretation regarding his feelings about school.
Figure 5. Alice’s drawing with accompanying verbal interpretation regarding her favorite activity to participate in when at school.

Drawings more easily convey emotional connections of experiences that may be difficult to express through verbal and/or textual speech (Derry, 2005). Mew and Alice’s drawing and explanation of their schooling experiences clearly convey certain emotions (i.e., scared, embarrassed, happy). Similar to writing activities, drawings are an effective medium in accessing children’s voices, because it allows them time to reflect and imagine about topics and how they wish to convey their understandings of these topics, with flexibility to remove or add elements of their drawings (Noble-Carr, 2006; Punch, 2002); this strengthens participants’ agency in the data generation process as part of the data collection phase of the research. Although, drawings may not be an engaging research technique for all young people, particularly older children (Punch, 2002), and researchers must also consider the children’s abilities and interests in artistic drawing.

There once was a girl who was teased and made fun of all the time at school.
She got bullied all the time.
They make fun of her and they say "Your name is stupid."
She always trips all the time and they call her names, like "clumsy."
She cried.
It was cruel.
They called her stupid and all she wanted to do was play UNO with her friends.
She was in the special class.
She was scared and she felt like going home.
She wanted to go home, because she was teased.
The next day, she did not come to school.
Instead she came here, to our centre!
She felt lucky, because she got to come to our centre and she didn't have to go back to school.
She's happy when she's here at the centre.
She feels safe here, safer than her school, away from the people, the classmates, the bully people.
No one bullies her at the centre.
She felt happy.

Figure 6. A story told by participants during Storygames about a girl with disabilities being teased at school.
**Storygames** provided greater insights into the children’s understanding of inclusive education and difference. Storygames entailed each child add one line to an open ended story until the story reaches a natural conclusion (Veale, 2005). This method presented participants with opportunities to develop a shared understanding of their respective views to produce an organized and interconnected story (see Figure 6).

Imaginative story games may inspire discussion, kindle memories of the children's experiences, and is especially useful when broaching sensitive issues (Noble-Carr, 2006). As such, using fictional characters and pretend scenarios in considering vulnerable topics may present a sense of security for young people, as they remove themselves from personal experiences to invent a story about an issue relatable to their lives. Within storygames the children contemplated issues of difference and school inclusion from a make-believe perspective, sharing their own understandings veiled through imaginative stories. Storygames may serve as a safe gateway for some children to open up to discussing sensitive issues pertaining to their lives.

**Photography** complemented participants’ responses with the other methods and provided a unique way for the children to express themselves. Using photography and combining it with children’s description of their photos presents understandings regarding abstract topics, especially if children are uncomfortable discussing these issues through writing or dialogue (Moss et al., 2007), or if there is difficulty depicting certain images/actions through drawing (Punch, 2002). Participants used digital photography to preserve and visibly highlight experiences within their narratives. Subsequently, to give life and voice to their images the children created a narrative of their photos, offering meanings that may “…inform a conscious reflection on previously taken-for-granted assumptions” (Carrington et al., 2007, p. 9). I presented participants with digital cameras to capture images representing their schooling experiences. I developed a “Photo Camera Reminders” sheet to guide participants during the photo taking process, and I presented them with an example of my own photo narration. I printed all digital photos and returned them to participants. Working in pairs, participants reviewed images and discussed its significance (see Figures 7 and 8).
I am graduating this year. Graduating makes me feel involved and like I belong at school. I am going to high school next year! This is my graduation book with pictures!

Figure 7. During photo narrations, Gem highlighted that graduating from school provides her with a sense of inclusion.

Sometimes we eat at this restaurant. It means "Tasty House." That's "Tasty House" in Chinese [referring to the restaurant sign]. The name of the restaurant. This is soup that I buy at the restaurant. I don't eat this at school. I don't want to bring this soup to school.

Figure 8. During photo narrations, William described his enjoyment of cultural foods, which he reserves for distinct spaces encompassing home and family life, not school.

Using photography and combining it with children’s description of their photos, presents participants’ expressions and understandings regarding abstract topics such as, inclusion, exclusion, and diversity. The children used photography to visibly capture images important in their lives and lived experiences within narratives. Namely, presenting voice, meaning, and insights regarding differences, learning, and inclusion.
Multi-Method Approach

Through a multi-method approach I obtained a more thorough understanding of participants’ experiences, triangulating their reports from interviews with their creative activities. Some participants responded more easily to sharing experiences through multiple creative methods, revealing rich data that may be unlikely to access through a single method (i.e., interviews). For example, some of the children more readily wrote about experiences, rather than discussed them. In maintaining an inclusive approach within the research I found it necessary to adapt and tailor research methods better suiting participants’ strengths, interests, and preferences (Ajodhia-Andrews & Berman, 2009; Freeman & Mathison, 2009; McDonald, Kidney, & Patka, 2013). This entailed ongoing modification to certain aspects of the research session to foster maximum participation of all children. For instance, I introduced more visual supports (e.g., brainstorm mapping on large boards, large print type outs of all interview questions), modified my delivery and tone of speech (e.g., slow, melodic, short phrasing), offered choices of computer use and scribing, and utilized the Picture Exchange Communication System (PECS) for Gem who has cerebral palsy with significant speech and language delays (see Figure 9).

Through the use of PECS, Gem explained that computers provide her with a sense of inclusion.

Figure 9. Through the use of PECS, Gem explained that computers provide her with a sense of inclusion.

As participants moved through these creative mediums they raised sensitive issues that they or others in the group have been dealing with (e.g., difficulty with friendships and bullying [see Figures 2, 4, 6], negotiating appropriate spaces for expressing cultural identity [see Figure 8]). Although perhaps eliciting unpleasant memories, these discussions opened doors to further explore taboo and stigmatizing issues related to culture, disability, inclusion/exclusion, and school life in a supportive environment with a group of similar peers. In addition to broaching difficult issues, the children highlighted pleasant experiences through these approaches (e.g., inclusive experiences at school [see Figures 5, 6, 9], sense of safety and belonging at the non-profit centre [see Figure 6]). Such creative mediums presented opportunities for this group of children to inform repertoires of diversity and raise awareness regarding issues impacting their lives.
How Can Children with Disabilities Serve as Co-researchers?

Consent Process

Considering children’s agency is often passive within the research process, even more so among children with disabilities, I mindfully structured the study to include participants as active co-researchers. I did so by first offering participants decision-making opportunities to engage in the research through verbal and written child assent. I directly asked the children whether they would like to participate in the research. In doing so, I am not suggesting the children knew exactly the meaning of research or consent. However, asking a child to participate in research, as is common practice among adult research participants, demonstrates mutual respect between researcher and child, and I advocate is part of ethical research involving children. Additionally, in requesting young people for their permission to actively engage in research more likely obtains a sample of children who independently desire with invested interest to be involved. Participants also completed a child assent form. The form addresses the agreement between researcher and child, conveys the child’s interest to participate in the study, respects the child’s sense of control in the research process, and demonstrates recognition for the rights of the child (Hill, 2005). Requesting for children’s assent imparts within them a sense of empowerment (Mishna et al., 2004), valuing children's competency and choice making abilities, thus signifying ownership throughout the research process.

Collaborative Narrative Construction

Moreover, we collaboratively constructed their individual narratives. Participants negotiated which experiences and stories to include, their impressions of surfacing themes/interpretations, and the organization and editing of each narrative (Chase, 2005; Creswell, 2005). Ensuring the analysis and interpretation of narratives were representative of participants’ perspectives, I continuously conferred with the children during group sessions, confirming accurate or intended responses. There is the possibility that responses might differ within individual versus group sessions. Yet, as participants had built a rapport with each other and proceeded throughout the entire research within a group session format, I thought it was best to maintain this established and consistent routine to support the children’s level of comfort. Maintaining routines (e.g., consistent group session research format) was useful in this research, as it supported engagement of participants with ASD; for young people with ASD routines provide a sense of stability and security, as disruptions to regular schedules or expected practice can often cause distress. Eder and Fingerson (2003) argued that group settings also help reduce to some degree researcher (mis)interpretations and elicits more accurate participant responses, as such settings allow children to develop their own "talk" separate from the researcher, and they are often requested to defend these responses among peers in the group. I re-presented (3 times) to participants drafts of their narratives, reassuring appropriate portrayal of their stories as they desired. This particular paper was not shared with the children for feedback. I shared the data and all drafts of narratives from the original study with them to allow for their decision making regarding narrative interpretation and analysis. Participants were aware from the consent process that I would be presenting their data to others in the form of writing and presentations. However, as previously mentioned, I did not position the children as co-researchers participating at the highest degree of participation (i.e., Hart's [1992] Ladder of Participation, 8th rung), and thus I chose to initiate different scholarly outputs of the research without collaborating with the children. Nevertheless, this does not discount the children’s voices as narrators at the centre of each narrative (Chase, 2005), serving to a certain degree as co-researchers.
Participants’ original interview texts sometimes required re-wording or re-structuring to support readability and comprehension of their narratives. All participants maintained some form of communication, language, and comprehension challenges. On occasion, they employed incomplete sentences, incorrect grammar structure, or ambiguously articulated terms and/or phrases. Additionally, participants sometimes provided brief and/or “yes/no” responses requiring ample probing. In such cases, I revised participants’ verbatim responses (e.g., editing sentence structure, adding punctuation, pronouns, etc.) to fortify reader comprehension and strengthen participants’ personal meanings, ensuring narratives flowed as complete and understandable stories grounded in their experiences. In amending the children's responses, power dynamics shift toward me as the researcher, reflecting perhaps that my voice possesses more power within a research context than my young participants. Although, I think this is always the case in research, whether working with child participants or adult participants; even after member checking and collaborating with participants, the researcher has the ultimate decision making power to shape the research and disseminate the data in various scholarly forms as they deem suitable. My participants did not have a say in how I shared and presented their narratives to the world (e.g., this article, the selected journal, etc.), and this may leave them more vulnerable and powerless in the research process. In attempts to restore some of the power imbalance among participants in this particular study, I ensured the children reviewed their narratives after I re-worded their verbatim responses. They were offered opportunities to revise or edit my changes, supporting intended meanings and interpretations of their final narratives. To illustrate my amendments of original texts, I present one example for each participant in Table 1.
<table>
<thead>
<tr>
<th>Participants:</th>
<th>GEM</th>
<th>ALICE</th>
<th>SIMON</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Context:</strong></td>
<td>Gem and I discussed what makes her feel included at school.</td>
<td>Alice and I discussed understandings of difference and being different.</td>
<td>Simon and I discussed exclusion.</td>
</tr>
</tbody>
</table>

**Original Interview Text:**

**Amanda:** So Gem what are you going to make in here that makes you feel included?  
**Gem:** I included in school... I feel school... [shows her drawing of school].  
**Amanda:** Can you show me what you do at school that makes you feel included? [referring to her PECs book]  
**Gem:** [Selected Computer PEC]  
**Amanda:** Oh, OK. Computer.  
**Gem:** In school.  
**Amanda:** In school. It makes you feel included?  
**Gem:** Yes.  
**Amanda:** What else?  
**Gem:** Anything else that makes you feel included at school?  
**Gem:** [showed the birthday cake PEC]. When have birthday.  
**Amanda:** Oh, when you celebrate your birthday?  
**Gem:** Me.  

**Amanda:** So tell me what is different?  
**Alice:** Good.  
**Amanda:** So different is good. So, Alice said being different is good. What else?  
**Alice:** Nice.  
**Amanda:** Different is nice... What else, Alice? Different is...?  
**Alice:** Friends  
**Amanda:** Oh, different is your friends. Wonderful. Friends are different.  
**Alice:** Different is good.  
**Amanda:** Yes.  
**Alice:** Different is nice.  
**Amanda:** Yes, different is nice. Being different is...?  
**Alice:** School.  
**Amanda:** School... Different is?  
**Alice:** Spanish.  
**Amanda:** That means languages. Good job.  
**Alice:** Yes.  

**Simon:** If someone was bullying me that makes me feel excluded.  
**Amanda:** Yes. Did that happen to you before?  
**Simon:** That’s... that’s... bullying happened to me before and it makes me feel excluded.  
**Amanda:** Oh, what happened when you were bullied? What did they do? [no response]  
**Amanda:** Can you remember?  
**Simon:** I can’t remember what it was...  
**Amanda:** I remember last time [previous session] you said somebody swore at you.  
**Simon:** Oh, yes. That was the autistic kid. That was grade 8. He swear at me when I go to that boy to see something. He was on the computer. He said “go away” and he swore.  
**Amanda:** Oh, he was on the computer and he was in grade 8.  
**Simon:** Yes.  
**Amanda:** And he swore at you and said to “go away.” And that made you feel...?  
**Simon:** Excluded  
**Amanda:** Excluded. And what did you do? Did you go away?  
**Simon:** I go away. I ignored it.  
**Amanda:** Was he in your special class?  
**Simon:** Yes.

**Narrative Text:**

This is my school. I am included in school. I feel included in school, especially on the school bus. Something that makes me feel included at school are the computers. I also feel included at school when my class celebrates my birthday.

I think being different in school is good. I think being different is nice. I see differences at school, like different languages, such as Spanish... Different is my friends.

Bullying makes me feel excluded. Bullying has happened to me before and it makes me feel excluded... There was an autistic kid. He is in Grade 8. He is the special needs class. He swears at me. I go to that boy to see something, because he was on the computer. He said "Go away" and he swore at me. That made me feel excluded. I went away and I ignored it.
<table>
<thead>
<tr>
<th>Participants:</th>
<th>MEW</th>
<th>EDWARD</th>
<th>WILLIAM</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Context:</strong></td>
<td>Mew shared his understandings of disability during a brainstorming session.</td>
<td>During photo narrations Edward described a photo he took representing exclusion.</td>
<td>During photo narrations William described a photo of his teddy bear, inclusion, and exclusion.</td>
</tr>
</tbody>
</table>
| **Original Interview Text:** | Amanda: What do you think about people that have disabilities?  
**Mew:** They’re poor.  
**Amanda:** Poor, OK.  
**Mew:** They’re not rich. They have little. They don’t have money. It’s sad when you don’t have money. They lost their friends or their life, or their house, or food.  
**Amanda:** Wow. So you think that people who have autism will lose their friends? Has that happened to you? Have you lost any friends?  
**Mew:** Maybe if they don’t know what you say.  
**Amanda:** They don’t understand.  
**Mew:** Or, they don’t understand another language.  
**Amanda:** Yeah, understand what you say.  
**Mew:** Some people don’t speak the same language as us. Maybe they are inside they are good, but inside their heart is good, but outside they are bad.  
**Amanda:** Why are they bad outside? Outside in the world?  
**Mew:** Because they can not control themselves.  
**Amanda:** Oh, OK. Outside they are bad because they can not control themselves. Like their behaviours?  
**Mew:** Yeah. Oh, or maybe they take drugs.  
**Edward:** I think this is exclusion.  
**Amanda:** What is it?  
**Edward:** When I take a picture of that building.  
**Amanda:** Hmm.  
**Edward:** And then my mom told me to take a picture, because that’s where the people go.  
**Amanda:** Who people?  
**Edward:** Other people.  
**Amanda:** Yeah and why is it exclusion?  
**Edward:** Because it’s almost getting old.  
**Amanda:** OK. So how does it tell me if people feel left out like they don’t belong?  
**Edward:** They don’t belong there, that’s why it’s an old place.  
**Amanda:** Uhuh, but people do live there. Are they rich people or poor people or average people?  
**Edward:** Average people.  
**Amanda:** OK.  
**Edward:** Sometimes the apartment got broken wall papers.  
**Amanda:** Right. Would you want to live there?  
**Edward:** No. It’s too old right now.  
**Amanda:** Do you remember excluded from previous session? Makes you feel what, good or bad?  
**William:** Bad.  
**Amanda:** Bad. So does your teddy bear make you feel excluded or included?  
**William:** Included.  
**Amanda:** Included, OK. Do you wish that the teddy bear was at school?  
**William:** Uh, nope.  
**Amanda:** Why?  
**William:** Not included in school.  
**Amanda:** What makes you feel excluded, which makes you feel bad?  
**William:** I can bring this [point to photo of teddy bear].  
**Amanda:** To school?  
**William:** No.  
**Amanda:** OK. Listen. What makes you feel excluded from school?  
**William:** This [points to photo of teddy bear].  
**Amanda:** Oh, I thought it made you feel included.  
**William:** This, will bring it.  
**Amanda:** Yes, but what makes you feel bad?  
**William:** Bring this.  
**Amanda:** Bring the teddy bear?  
**William:** No, people will laugh.  
**Amanda:** They will laugh at you.  
**William:** They will laugh at people if you bring a toy.  
**Amanda:** Oh, why would they laugh at you?  
**William:** Cause it looks like a baby toy.  
**Amanda:** Oh, so that would make you feel excluded.  
**William:** Yes. | | |
| **Narrative Text:** | I think that people with disabilities are poor and not rich. They have little or no money, and it’s sad if they don’t have money. I also think maybe on the inside people with disabilities are good... inside their heart is good, but outside they are bad. They are bad outside, because they can not control themselves. People with disabilities may lose their life, their house, and food! They may have to take drugs to control their behaviour.... If you have autism you can lose friends if other people don’t know what you say... If they don’t understand you... like a different language, and some people don’t speak the same language as us. | This building reminds me of exclusion. It’s a building where people live. The building is getting old... it’s an old place. People don’t belong there. People that live there are not poor or rich, they are average. Sometimes the apartment has broken wall paper. I wouldn’t want to live there. It’s too old right now. | Even though she [teddy bear] makes me feel happy and included. I don’t want to bring her to school... this will make me excluded and feeling bad. Bear will not make me feel included at school. I will be excluded, because people will laugh at me. The kids laugh at people if you bring a toy. Bear looks like a baby toy. |
Research Kits

To also support the children’s involvement in the research, I provided them with research kits that included personal journals, drawings, photo camera, pencil case, etc. I developed the kits for participants to further establish a sense of research authority and agency. I hoped the kits incited feelings of belonging and control in the research project. As sessions progressed, participants requested for their kits, decorated and personalized their kits (e.g., stickers, drawings, artwork, etc.), cared for its items, and regularly reviewed their work within the kits, all demonstrating a sense of pride.

What are Ways to Create a Safe Research Environment for Children with Disabilities?

A premise to participatory research is developing a safe space for child participants to freely engage in research activities. Endeavouring to create such a space I debated the research environment, considering strategies to foster safety, comfort, and trust. I considered the number of research sessions, formatting of these sessions, the research venue, number of participants in the sample size, level of researcher flexibility, and individualized reinforcing items for participants. These details supported a relaxed, respectful, and confiding research milieu for participants to comfortably share personal experiences about their school life.

Group Sessions

Participants engaged in seven group sessions of approximately 90 minutes each. This number of sessions was chosen to build rapport with the children overtime, while accessing rich information. The number of sessions also allowed for participants and I to review their data and narratives on a continuous basis. Considering the importance of matters related to difference and school belonging, and recognizing some activities take more time than others, I chose to provide ample opportunity for the children to deeply engage in activities and review narratives. Rather than feeling a sense of hurriedness, I wanted participants to experience a sense of relationship building and freedom to extend discussions throughout the research process. During the fourth session, I noted,

I needed this many sessions (i.e., 7), because they [participants] are slowly understanding the topics and what we are discussing…allowed me [a] chance to repeat questions in the next session if I felt they did not answer questions or there was confusion…this is important when working with children with disabilities – repetition and familiarity. (Ajodhia-Andrews, Researcher Memo, Session #4)

When researching with young people, group sessions present a more natural research context as children are seemingly more familiar and relaxed when conversing about salient issues in their lives that are rarely discussed, particularly relating to peer culture, health, well-being, and other sensitive topics (Darbyshire et al., 2005; Eder & Fingerson, 2003; Johnson et al., 2014a). Thus, a group setting fit the context of my study, as participants explored conceptualizations, feelings, and insights regarding disability, ethnicity, and culture, examining how these impact their personal experiences of school belonging and learning. Conducting the study in groups appropriately collected multiple understandings and perspectives via interactive conversations, whereby participants built upon each other’s ideas and freely opened-up about their experiences (Creswell, 2005; Eder & Fingerson, 2003). Such conversational type discussions further elicit stories among young people in narrative research
(Engel, 2005). Although one-on-one interviews may also be valuable when discussing sensitive issues due to privacy (discussion stays between researcher and participant), it does not encourage interaction and conversation with others, which may provide essential emotional support for young people when confronting difficult topics. Additionally, one-on-one interviews may lead to children providing responses they think researchers want to hear, especially if researchers fail to acknowledge and make attempts to address power relations (Noble-Carr, 2006). Unlike individual interviews with a researcher, group interviews help ensure no one child feels pressure to answer a question or questions they do not understand posed by an adult (Johnson et al., 2014a), or perhaps do not want to answer with an adult.

Within all interviews participants typically hold less control and power in comparison to the researcher, and such imbalance in power and status can be greatly intimidating for young children, especially in a private adult-child interview (Eder & Fingerson, 2003; Johnson et al., 2014). Group interviews may empower children to challenge, encourage, and ask questions of each other, serving as researchers among themselves. Eder and Fingerson (2003) suggested group settings allow children to comfortably participate with peers, often out numbering the researcher, and hence conveying a sense of more power in numbers. Einarsdóttir (2007) noted, Group interviews are based on interactions, so the children discuss the questions, help each other with the answers, remind each other about details, and keep the answers truthful. In the group interview, children can also ask questions and themselves serve as interviewers in that way. Children are also more powerful when they are together, and they are also more relaxed when with a friend than when alone with an adult. (p. 200)

Therefore, group sessions may help rebalance existing power dynamics between researchers and child participants, allowing for candid sharing and articulation of stories in a forthcoming fashion, exploring topics such as culture, ethnicity, disability, inclusion, and school life (Eder & Fingerson, 2003; Hennessy & Heary, 2005; Johnson et al., 2014a).

**Itinerary/Guide**

In using a variety of research methods throughout the study, it was helpful to develop a group session itinerary and script guiding facilitation of each session. I initiated and developed this itinerary and script without the involvement of the children. It was developed prior to commencing the research with participants. I consulted with the children's instructor who suggested that arriving prepared with a guideline of routines and activities would better support the children's research engagement. With this advice, I decided that creating the itinerary/guide on my own would be best to create a positive research experience for participants, in which they could successfully contribute. The itinerary described the organization of each session, outlining sequential accounts of which research methods to carry out and its duration, as well as a loose script to follow throughout sessions. Still, I maintained flexibility within each session, adapting the schedule if necessary to manage issues such as lack of time, participant fatigue, and momentary withdrawal of participation.

Flexibility was crucial to accommodating for the group climate, as participation levels varied depending on circumstances of the session and how much each child wanted to participate in each activity. At times I omitted an activity, switched the order of activities, reduced the length of time for a particular activity, played games as chosen by participants, or took longer break/snack times. I encouraged participants to engage in all activities, yet, in employing multiple methods I was aware some children may not want to participate for differing reasons (e.g., boredom, fatigue, etc.), and there may be limitations to fulfilling their
ideal research method preferences (Punch, 2002). Research fatigue and boredom is a common concern when working with not only child participants, but for many researchers and participant populations. However, in recognizing that my participants also maintained communication differences that did not always include verbal speech, I became sensitive to monitoring their body language as a viable form of communicating fatigue/boredom (e.g., placing their head on the research table, pacing back and forth in the research room, daydream like gazing, or disruptive behaviours to the group such as throwing objects, randomly shouting, etc.). When a child no longer desired to take part in an activity, they were offered a break. These breaks were in addition to the other regularly held break/snack periods within each session.

Positive Behavioural Supports

Prior to data collection I discussed details regarding the children’s behaviours and reinforcers (i.e., items/activities they enjoy playing with or engaging in) with their instructor at the non-profit centre. This informed me of any behavioural issues, and ensured I had access to reinforcer items to re-direct the group and/or individuals. To create a more exciting experience, I developed what I described to participants as the Magic Bag (similar to the Magic Box – see Ajodhia-Andrews & Berman, 2009) filled with reinforcing items specific to each child. The Magic Bag was used as a positive behavioural support during each session. As a previous ASD behavioural therapist, I found the use of positive behavioural supports extremely useful when working with children with disabilities, as these supports encourage engagement within activities. Positive behavioural supports refer to reinforcers (e.g., activities, objects, food/drink, verbal praise) individualized to each child based on their likes and interests to positively guide and support their behaviour and participation. In this particular study, I ensured to fill my Magic Bag with items of interest to each child such as nail polish, public transit paraphernalia, Sponge Bob themed items, etc. I also employed frequent and consistent enthusiastic praise (e.g., high-fives, "good job!", "cool work!"), and phrases reminding participants that when they complete an activity they will have access to their reinforcers (e.g., "First let's finish our story and then you can use the nail polish"). These supports are beneficial particularly when children appear disengaged with the research. More specifically, children with ASD may convey behaviours perceived as difficult and as such become interpreted as a desire to withdraw from participating in the research. Positive behavioural supports can re-direct perceived negative behaviours to allow children in successfully engaging in the research, thus assisting in accessing participant voice and views (Ajodhia-Andrews & Berman, 2009).

Research Venue and Sample Size

In establishing a comfortable research atmosphere, I considered the setting and participant sample size. All sessions occurred within a classroom in the non-profit centre. As a research venue, the centre’s environment helped ensure the children felt safe, comfortable, and relaxed (MacNaughton & Smith, 2005); having attended the centre for many years, most participants were familiar with its facilities and classroom environment. I was the sole facilitator of all research sessions and maintained a 1:6 researcher-child ratio in each session. Using a small sample size (i.e., 6) allowed for more in-depth examination of issues related to diversity and sense of school belonging, and supported my ability to attend to each child and provide assistance when necessary. Narrative researchers frequently use smaller sample size groups to strengthen deeper immersion into topics, group cohesiveness, and analysis of narratives (Chase, 2005).
How Do I Uphold Qualitative Rigor While Supporting Agency and Voice among Children with Disabilities?

Amidst tensions between navigating the realities of carrying out participatory research with a group of children with disabilities and debating strategies to maximize their participation in narrative research emerged issues of agency and voice. Agency and voice are likely shaped by socially constructed circumstances. These circumstances serve to either limit or liberate agency and voice among children with disabilities. For instance, institutional structures of schooling often promote segregated rather than inclusive learning for children with disabilities and structures of medicine promote fixing impairments, both sanctioning normalizing discourses and attitudinal barriers in relation to notions of children with disabilities, directly influencing a child’s sense of agency and voice (Ajodhia-Andrews, 2016; Holt, Lea, & Bowlby, 2012; Liasidou, 2012; Rosenbaum & Gorter, 2011). Socially constructed limitations among children with disabilities in research include for example, positioning the child as incapable due to impairment, thus limiting and often excluding them from research rather than presenting adaptations and accommodations to support and access the child's voice (e.g., children with disabilities may be excluded from research because of behavioural difficulties or verbal communication difficulties, etc., Ajodhia-Andrews & Berman, 2009).

Accessing Voice

In efforts to foster participants' agency through sharing personal views and carrying out degrees of decision making, I retained a distinction between giving voice and accessing voice; voice is not something given, as we all possess a voice. Yet, although researchers may not give voice we are positioned to modulate how loud and clear these voices ring throughout the research. For instance, depending on the context of a study, level of researcher reflexivity, and consciousness of participant voice, researchers may either amplify or turn down the sound of voices. Employing participatory research methods via creative mediums demonstrated participants' varying stories and supported accessing their unique ways of voicing these stories. Co-construction of the narratives between myself and participants also served to amplify voice and articulate their messages, and hopefully allow them to be heard; this suggests researchers extend beyond accessing participants' voices to also figuring out ways to amplify their voices.

Yet, even with co-constructing of the narratives my voice as the researcher may always hold more power. The researcher filters the data/narratives based on personal context (socio-cultural, historical, and political) and experiences, often reflective of the researcher (Creswell, 2007), and s/he has the final say in research dissemination. This is the case with all research participants, whether adult or child or those with or without disabilities. In the end, however, readers must assess the research approach and design, considering how I endeavoured to cultivate a safe and empowering research environment involving young people with disabilities, supporting their maximum participation as co-researchers while ensuring narrative presence.

Agency and Power

Voice is connected to agency and power as it implies a sense of presence, particularly narrative presence. Participants’ voices as narrators connected with me, the researcher as their audience, and I attempted to access, amplify, and hear their voices; thus, the children maintained a strong sense of narrative presence within the study. I do not use the term presence to simply suggest physical presence in research, as children may physically participate and speak to a researcher and never get heard. The narrative presence of ethnically diverse children
with disabilities in research, specifically participatory research, whereby these children contribute to research agendas, processes, and decisions is critical to exploring schooling experiences of marginalized young people (Watson, 2012; Williams et al., 2012).

Researcher reflexivity also fosters participants’ agency and voice. I reflected after each session via researcher memo notes (Emerson, Fretz, & Shaw, 2002), capturing details and overall feelings/impressions, and asking questions of myself, participants, and the research process. Reflecting on research methods, I questioned if a particular medium was unsuccessful in accessing participants’ voices, and if so, what actions might I take to revise the approach, better inciting the children’s stories? What techniques worked well, fully engaging participants’ voices, and why? I debated whether to keep Gem in the study, because I frequently struggled to comprehend her responses, especially during the beginning of the research. Yet, in due course, I recognized it was my responsibility to find ways of accessing her voice to support her maximum participation.

As I listen to Gem, I realize all her speech is inaudible and I can’t understand any word she says…..struggling to keep her in the study, but [this] goes against the purpose of hearing all voices despite ability and other differences. Need to include other ways to get her to communicate — PECS, visuals, typed up instructions, etc. (Ajodhia-Andrews, Researcher Memo, Session #1)

Thus, reflexivity supported my sense of flexibility. Flexibility is vital when collaborating with children with disabilities, as it serves as a constant check-in to examine whether the researcher has done her/his best to uphold child participants’ agency throughout the process while also presenting opportunity for maximum participation (Ajodhia-Andrews, 2016). I contemplated whether I did my best to present children’s narratives in ways which they desired while also respecting their agency as co-researchers. Phelan and Kinsella (2013) noted researcher reflexivity supports not only rigor in qualitative research, but also ethical research practices. Through steady reflexivity, I attempted to manage ethical issues of assent, voice and power, representation of participants within the data, and disclosure of truthfulness.

**Discussion**

Conducting research with children raises many dilemmas and ethical uncertainties. Such quandaries escalate when researching with children with disabilities, due to complexities of accessing voice and sensitivities surrounding topics. Shifting away from deficit-based positioning of children with disabilities in research, this paper contemplates ways of maximizing children with disabilities' research participation to support accessing voice in ways in which they may be heard, while presenting them decision and choice making opportunities strengthening the researcher-participant partnership.

Researchers are urged to seek ways of emancipating voices of children with disabilities in research projects (Watson, 2012). Participatory methods, particularly through the use of creative mediums, effectively access and include voices of children with disabilities. In their review of research projects involving children and youth with disabilities Loveridge and Meyer (2010) reported on various projects that successfully used creative mediums to access participants’ voices. For instance, they described ethnographic creative methods employing arts and crafts, talking mat methods with storyboards and cameras that elicit views from children with disabilities who do not use speech to communicate, and visual data gathering methods employing picture boards and cameras (Loveridge & Meyer, 2010). These methods present alternative communication/linguistic systems for young people with disabilities. Aligning with my study, it was clear these mediums offered participants different options for
communication and expression. Through such qualitative creative mediums, participants poignantly shared understandings and experiences of school life relating to inclusion and diversity.

Multiple methods also presented participants with a variety of communicative platforms, with traditional methods (e.g., interviews) combined with creative ones (e.g., storygames, photography, drawings, and writing activities). This supports a suitable balance for preventing boredom and heavy reliance on one research method, while also presenting a range of communicative avenues for young people with disabilities to choose how they wish to voice their understandings and experiences. Multiple qualitative approaches through different exercises/activities may complement each other, rather than replicate, allowing participants to share different stories and experiences each time they engage in a different activity (Darbyshire et al., 2005; Noble-Carr, 2006; Punch, 2002). For instance, employing visual methods combined with interviews and narratives worked well as forms of communication for young immigrant children (Keat et al., 2009) and children with disabilities (Carrington et al., 2007) as they shared personal lived experiences in efforts to foster inclusive schooling grounded in student knowledge and understanding. Employing images (e.g., drawing and photos) combined with narratives appropriately suited my participants' interests and abilities, transpiring rich insights. The use of multiple-methods is evident in international studies involving research with marginalized young people as they examine issues impacting their lives. For example, West (2014) employed various methods (e.g., games, drawings, mapping, walks, etc.) to understand the challenges of water supply from the perspectives of Tibetan children living in remote villages. In Nepal, Johnson, Hill, and Sapko (2014b) explored through a range of creative and performative mediums (e.g., songs, dance, drawings, mobility maps, etc.), the roles of boys and girls in their households and societies. In Scotland, Connors and Stalker (2007) engaged young children with disabilities in research through a variety of methods, including interviews, spider diagrams, picture cards, and word games. In my particular study the number of differing mediums employed with young people with disabilities supported their differing forms of communication. It also assisted in acquiring deep and profound understandings of their experiences of inclusion, learning, and diversity. Some of their stories shared would never have emerged without the combination of the multiple methods.

Safe research milieus, an essential component of participatory research, allow young people to openly and freely share experiences in a trusted environment. I considered ways of building a rapport-filled and trusting research environment for participants to comfortably share personal schooling experiences. To establish a safe research venue, I contemplated details regarding the number of research sessions and its structure, the number of participants I felt I could successfully support to their maximum participation, techniques to engage participants through positive behavioural supports, and my personal level of flexibility to adapt and accommodate for participants and the group climate. Involving children within research entails researchers prioritize creating a safe and enjoyable space for young people to express themselves (Johnson et al., 2014a; MacNaughton & Smith, 2005). For instance, various studies highlight the use of incorporating many research sessions when engaging young people in research (e.g., Connors & Stalker, 2007; Larkins, 2014; O'Kane & Panicker, 2014), as well as the benefits of group sessions (Darbyshire et al., 2005; Eder & Fingerson, 2003; Einarsdóttir; 2007; Johnson et al., 2014a). Positive behavioural supports may also aid in providing a relaxed venue, functioning to re-engage children in the research process. For example, in describing a study regarding young children's understanding of well-being and ill-being in Peru, Crivello and Arangoitia (2014) reported the use of scheduled playtime with participants throughout activities to re-energize participants. This playtime operated as a positive behavioural support to re-engage the children. Alike my experience, other researchers found value in using an
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Itinerary to guide research work with children, while being aware of the delicate balance between scheduling and maintaining flexibility to provide a supportive research environment (Freeman & Mathison, 2009). All of these collectively impact young people's maximum participation, as well as their ease and comfort in safely participating in the research.

Part of involving children in participatory research includes examining ways to support their voice and maximum participation as co-researchers. One essential means of doing so is providing children with decision making throughout the research process. Receiving young people's consent and assent to engage in research is not only ethical but also empowering, particularly among those with disabilities who experience limited opportunity to be taken seriously within research processes (Connor & Stalker, 2007; Wickenden, 2011). It also acknowledges their capacity to assess the research information for themselves as decision makers (Noble-Carr, 2006). Seeking children's consent and understanding for why they are participating in research and what it may entail affirms the rights of the child, and as such researchers should implement a process for informed consent when engaging in research with children (Johnson et al., 2014a).

Collaborative narrative construction was another important element for establishing the children's agency and voice as co-researchers, and is imperative to narrative research (Chase, 2005; Creswell, 2005). This assisted with ensuring narrative interpretations and the presentation of their stories and images within personal narratives were as participants' wished. Including participants in the process of validating findings and interpretations is a significant factor in engaging young people in research (Johnson et al., 2014a). In my particular study, narrative co-construction provided participants with some ownership over the data, and also accounted for vulnerability of my researcher voice and any assumptions I may have made with interpreting the narratives (Chase, 2005). Qualitative research is not “value-free” (Denzin, 2004, p. 449), but rather an interactive process as both researchers and participants are positioned in diverse contexts, which shape perspectives and interpretations (Denzin & Lincoln, 2005). A prevalent debate in qualitative research with young people concerns researcher interpretation during data transcribing and analysis. In efforts to deal with this conundrum, I clearly state upfront that it was necessary to revise and in a sense “tidy up” the data to support readers’ understandings of participants’ perspectives. I also concede bringing my own interpretations to the children’s schooling experiences and views related to diversity and inclusion. I sought approaches of fostering children’s ownership in the research. I offered participants liberty to review and amend personal narratives on multiple occasions and presented various forms of data collection to access and amplify voice; thus providing many opportunities for research participation and personal analysis.

In keeping with participatory research values and approaches I confronted challenges in how to respectfully encourage participant agency. This paper describes the strategies I employed to foster agency among participants as co-researchers, “…giving [the children] as much control over the content and process of the research as practically possible” (Noble-Carr, 2006, p. 12). Strategies included the use of multiple research methods, creative mediums, obtaining participants' informed consent, co-construction of narratives, providing research kits, and maintaining researcher reflexivity. Between these various approaches I strove to accurately portray participants’ experiences and stories as they intended, exemplifying their meanings and interpretations. Yet, determining what constitutes children's agency is not always straightforward. Children's level of agency in research are sporadically explained throughout the literature, often failing to describe agency, differing levels of agency, and what agency looks like in particular contexts with diverse young people (Prout, 2011; Tisdall & Punch, 2012). In sharing how children with disabilities’ agency were enacted in this research, I hope to problematize and convey the complexities involved in taking a concept such as agency from theory-to-practice (Tisdall & Punch, 2012).
Limitations and Future Research

Many limitations of this study surfaced due to time constraints: (1) This study may have benefited from including one-on-one sessions between myself and participants. This one-on-one time would have allowed for individual interviews to compliment group interviews, and also to review final drafts of the narratives individually with each participant. The children may have provided different responses during these one-on-one sessions, thus allowing for more robust triangulation of the data and perhaps greater depth of information obtained; (2) The sense of safety and trust within the research environment would have been strengthened if I built a rapport and developed a relationship with the children prior to the beginning of the research process (e.g., 1-2 sessions engaging with the children during their program time at the centre); (3) Last, participants were not observed in their school environment. Including an observation period may present more insights into the children's schooling experiences, support triangulation of the data, and assist in the interpretation of their narratives. With more time built into the research process these three limitations may be addressed in future research.

Considering the complex nature of facilitating research with young people with disabilities, investigators may continue exploring the researcher's role in deliberating over ethical matters of fostering voice and agency when involving children with disabilities. This may include how to engage young people with disabilities as co-researchers ensuring they are respected and protected throughout the process, while also being attuned to necessary adaptations and accommodations suiting the children's differing abilities in accessing and amplifying their voices. In reflection, for example, I recommend researchers involve children in the scheduling of research activities, as it may further develop their sense of agency as co-researchers. This limitation relates to my itinerary and guide used throughout the study, as it was not created with the children.

Generalizability was not a goal or consideration for this research, and therefore is not a limitation. Each participants' narrative is uniquely their own story representative of personal views, thoughts, contexts, and lived experiences. My primary interest focused upon participants’ stories, how they told them, and their understandings of them. This research was about their lives, school world, and personal human experiences as ethnically diverse young people with disabilities - I sought ways in which to gain entry, access their voices, listen, and share their stories.

Concluding Remarks

The purpose of this paper is to advance discussion and debate regarding research with children with disabilities based on my reflections of the study I carried out. The qualitative methods and participatory approaches employed to access and amplify participants' voices may serve as examples guiding researchers in their journey of researching with young people with disabilities. Or, at least perhaps serves as a catalyst for thinking about topics raised throughout the paper as they conduct research with children from traditionally marginalized groups. This study highlights the use of creative mediums to rebalance power relations within the research process, as they present forms of inventive communicative possibilities for young people with disabilities to express understandings and experiences. I encourage researchers to extend their conceptual repertoires surrounding voice, communication, and language beyond conventional speech toward other forms of communication, including creative ones. The incorporation of such methods inclusively recognizes diversity among voices and has potential to meet rigorous research standards. From a human rights-based perspective, young people have a right to express their views and to have these views be heard, specifically concerning matters impacting their school life. Accordingly, this paper suggests educational stakeholders (e.g., educational
researchers, teachers, principals, educational assistants, therapists, policy makers, etc.), recognize the value of incorporating the voices of young people with disabilities to generate inclusive reform. Through engaging children in sharing personal narratives of schooling experiences and educational matters relevant to their lives holds potential and promise to shape inclusive teaching and learning for children with disabilities. It also includes their voices into the social model debate (Connors & Stalker, 2007).

As McDonald et al. (2013) noted in their study of intellectually and developmentally disabled individuals’ views of research practices and participation,

[They] want to contribute to research, have their voices heard, and experience new settings, people and ideas…[they] want researchers to focus on their abilities, value their contributions and time, demonstrate patience, provide accommodations, and conduct research which is relevant to them. (p. 2)

This yearning to positively participate and socially engage in research about their lives extends also to children with disabilities (Ajodhia-Andrews, 2016; Williams et al., 2012); as Edward, one of my participants appealed, “I wish there could be more programs at school about research” conveying his desire to be involved in more research within school contexts. Through a myriad of research considerations and approaches, this group of children with disabilities were afforded opportunities to exercise their right to collaborate in varying aspects of the research process, in varying degrees. While attempting to deconstruct research barriers to support the children, it was still necessary to find approaches in managing impairment(s) and any needs stemming from the impairment(s), facilitating maximum participation in the research; thus, appreciating the interdependence between impairment, social environments, and participants’ personal responses to these.

Far too often the rights of children with disabilities in research are dismissed and their voices disregarded due to social exclusions, negative constructions of disability, institutional gatekeepers, and complications of time and accommodations (Ajodhia-Andrews, 2016; Connors & Stalker, 2007; Wickenden, 2011). Yet, perhaps this dismissal results from complexities surrounding disability and childhood issues, methods, approaches, ideologies, and analyses that may limit researchers in participatory work with children with disabilities (Loveridge & Meyer, 2010; Watson, 2012). Considering the multifaceted and messy nature of research within childhood disability, embracing new research approaches may be essential to examining the life of children with disabilities. Watson (2012) suggested these new methods position children with disabilities as active contributors to research agendas in which they comfortably describe personal experiences of disability while also demonstrating intersections of differences (e.g., ethnicity, disability, gender, etc.) highlighting the heterogeneous nature of their social experiences. Through participatory and narrative methods, this paper addresses possibilities of qualitative research to access and amplify voices and differing social experiences of children with disabilities, while underscoring their capacity and right to contribute to research regarding their lives. It is hoped through these reflections researchers continue (re)imagining and (re)defining ethically, empowering, and socially just ways in conducting research with children with disabilities.

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