The Role of Educators and Caregivers in Supporting Participation of Children with Disabilities in Educational Decision Making

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This qualitative study examines the communication and language supports available for children in educational environments. By doing this, it also examines the support provided by adults in educational settings for the participation of children with disabilities in educational decision making and the facilitating factors and barriers in children's participation. This study was conducted with 11 participants, including six teachers, one parent, and four children. The data was analyzed using thematic analysis and the results of the analysis revealed four themes. The outcomes of this research emphasize the impact of varied multidimensional factors involving the individual and their proximal environment.

Key words: *communication support, participation, decision-making, disability*

There has been a remarkable increase in efforts to include children's perspectives in the decision-making processes that affect them, or to listen to their views and include them in the decisions made. This issue is also included in internationally accepted reports and legislation, since gaining children's perspectives provides invaluable insights into building inclusive and receptive contexts (UN Committee on the Rights of the Child, 2009; UNICEF ECARO, 2018; United Nations General Assembly, 1989). In addition, approaches related to the development of practices that can support the participation of children and young people in decision-making processes have come to the fore (Cuevas-Parra, 2023; Lundy, 2007). With the use of inclusive perspectives, alternative approaches are further developed with the input of children and young people whose views are heard (Janta et al., 2021; Nguyen et al., 2022).

The involvement of children in decision-making processes is supposed to enable realistic, feasible, needs-oriented, and practically functional arrangements to be made (Janta et al., 2021; UNICEF ECARO, 2018). However, the participation of children and youth in decision making is not practiced in a similar way in all contexts. Although the participation of children and young people in decision-making processes has been recognised by international organisations and much work has been done on it, it is emphasized that there are limitations to the participation of children and young people with or without disabilities and the inclusion of their views in practice due to cultural, social, and/or economic factors (Cuevas-Parra, 2023; Kamenopoulou, 2020; Kamenopoulou & Goals, 2018; Tisdall & Cuevas-Parra, 2022). These limitations include such factors as environmental accommodations, societal attitudes towards disability, or prevailing norms guiding adult decision-making processes. Therefore, when viewed from a critical perspective, participation in decision-making processes is limited because disparities exist based on various factors in different contexts.

Variations in perspectives and practices also exist. These variations derive from broader environmental and societal factors, as well as the perspectives underpinning these factors. While there has been some progress with adaptations and regulations to support the participation of children and young people with disabilities in decision-

making processes by considering different factors, their participation still remains limited in various social contexts (Cavet & Sloper, 2004; Franklin & Sloper, 2006, 2007; Wickenden & Kembhavi-Tam, 2014). Studies on this issue have critically examined multidimensional factors affecting individuals' lives in different contexts by addressing the exercise of legal rights, accessibility to education and social life, and the role of control-oriented adult-centered power relations between adults and children (Cavet & Sloper, 2004; Franklin & Sloper, 2006, 2007; Wickenden & Kembhavi-Tam, 2014). Accordingly, in practice and research, it is emphasized that the representativeness of children and youth with disabilities living in various groups or communities is even more limited when there are few opportunities to access educational environments and social life (Wickenden & Kembhavi-Tam, 2014). These limitations related to accessing educational environments or social life also indicate that if legal frameworks or structured support systems are implemented effectively, they can support the representation of children in different contexts.

The right of every child to express their views through alternative environmental adaptations is stated in the context of rights. However, studies in both the Global North and Global South have identified risk factors related to social and economic activity, such as gender bias and ethnicity-related factors (geographical isolation, cultural bias, etc.), a lack of environmental adaptations or awareness, and the approaches of adults, including experts (Kamenopoulou, 2020; Kamenopoulou & Goals, 2018; McNeilly et al., 2015). These issues come from societal norms and impact children's lives. In terms of adaptations, these include identifying communication skills needs and deciding on the use of alternative support systems in terms of recognition of diversity. Identifying communication and language support is important for promoting inclusion in educational settings and social life. Although various types of communication support are available, such as alternative communication tools, therapeutic interventions, interpreters, sign language or visual supports, they might not be efficiently used in every context (Lundy, 2007; UNICEF ECARO, 2018; Wickenden & Kembhavi-Tam, 2014). Literature gaps remain regarding integrating alternative or individualized approaches, training for students and educators, or resource accessibility. These factors can be seen as barriers in relation to participation in decision making. Furthermore, intersecting social identities and social inequalities are also considered to shape individuals' experiences through a dynamic system of influence on their lives. Social identities (such as race, disability, gender) can influence individuals' understanding about themselves, and being a member of social groups is also an important aspect of social identity. In connection with this, social attitudes or peer relationships are important components in involving children in decision-making processes. Research on the perspectives of peers without disabilities towards children with disabilities shows the potential impacts of acceptance and sense of belonging for fostering an inclusive environment (Hong et al., 2020; Yu et al., 2015). This also relates to students' self-concept and participation in various areas of life (Hong et al., 2020; O'Farrelly et al., 2020; Yu et al., 2015). Thus, being responsive to children with disabilities in decision-making processes and listening to them are essential for developing working strategies for inclusion and empowerment of children with disabilities.

Due to the risk factors associated with barriers to children's participation in decision-making processes, as mentioned above, the perspectives of children and young people, especially in groups that cannot access the educational or social environments where the studies are carried out, cannot be heard and their views cannot be reflected in a realistic way. Therefore, instead of effectively engaging their voices and perspectives, there is a risk that their meaningful engagement can be overshadowed by structural or institutional barriers. In this sense, although the participation of every child and youth is stated as an important issue, it is seen that participation and representation rates have not yet reached the desired levels in every context.

As a component of participation in decision-making processes, the importance of a certain level of awareness, the possession of a variety of skills, and the promotion of skill development in children is also emphasized (UNICEF

ECARO, 2018). This highlights the potential positive impact of empowering both children and the adults in their immediate environment in providing the necessary supports and adequate environmental adaptation. In this sense, assessing the facilitating factors or obstacles affecting the participation of children and young people with a holistic approach is considered important to ensure sustainable participation (Brundle, 2023; Kamenopoulou, 2020; Kamenopoulou & Goals, 2018).

Educational decision making aims to create a comprehensive, effective, and multiple-source-based evidence to increase the functional outcomes of educational systems for each child (Brighouse et al., 2016; Chitpin, 2021; Leithwood et al., 2020). These decisions can be made or affected by various partners involved in the education process of an individual, and these decisions are not only made in classrooms or schools. Educational decision making can include instructional decisions, student placement decisions, assessment processes, inclusivity decisions, or related issues (Brighouse et al., 2016; Chitpin, 2021; Leithwood et al., 2020). Therefore, gaining children's input on issues related to their education can influence the educational processes across various settings. In terms of employing a holistic approach, ecological systems theories can address the complexities involved in the decision-making process and in participation because multiple factors influence the educational practices across settings and systems (Bronfenbrenner, 2005; Bronfenbrenner & Ceci, 1994). Therefore, when addressing child participation in decision making, all aspects of interconnected systems need to be taken into account. Doing so might provide deeper insights into multiple interconnected issues, leading to improved practices. Understanding what is being done to support the participation of children with disabilities in decision-making processes, including within the educational environment, can shed light on what kind of strategies should be included in different contexts (McNeilly et al., 2015). In a few reported studies that were conducted in the United Kingdom, Canada, the United States, and Australia, student councils, feedback-based approaches, or advisory committees were used to support child participation in educational decision making (Cook-Sather, 2020; Flutter, 2007; Mitra, 2009). In the Turkish context, studies conducted on disability have highlighted the impact of social, economic, and gender factors on the meaning of being disabled, but more research is needed on children's participation in decision-making processes (Bezmez & Yardimci, 2010; Kesik & Beycioglu, 2022; Ochoa et al., 2017; Sakız & Woods, 2015). Accordingly, examining the current situation and practical applications related to the participation of children with special needs in decision-making processes in different contexts will contribute to both research and practice. Considering the limitations mentioned in the literature and discussed above, this study aims to examine school-based practices and the perspectives of educators and caregivers in order to understand the supports available in schools that promote child communication skills and participation in educational decision making. The objectives of this study are to (1) identify available communication and language supports for children with disabilities in their learning environments and (2) determine caregivers' and teachers' individualized support strategies and the effects of these strategies on the improvement of communication skills and child participation in educational decision making. The next section contains detailed information about the research methodology of this study.

Methods

This research was an exploratory qualitative study, and qualitative research methods were used for collecting the data. A qualitative methodology and related data collection techniques were chosen to gain an in-depth understanding of the participants' experiences (Creswell & Poth, 2018; Denzin & Lincoln, 2011). Ethical approval for this study was gained from Gazi University's Ethics Committee. Data collection was carried out in a large city. In total, 11 participants (6 teachers, 1 parent, and 4 students) from two different special schools participated in this research with initial consent forms and verbal consent.

Data collection

Direct participant observation, semistructured interviews, field notes, and diary notes were used for data collection. Thus, triangulation was used by involving multiple data collection tools and engaging multiple perspectives (teachers, parent, children). The classroom observations and interviews were repeated for a maximum of three times with the participants, lasting 30 minutes at most. During the classroom observations, classroom activities and interactions between teachers, students, or peers were observed. All the interview data was collected and recorded in a written format with consent, which was the participants' preference. The interview topics included child participation, communication and language support for children with disabilities, individualized support strategies, and the effects of these strategies on child participation in educational decision making. The observation notes were recorded by the researcher on an observation form. The researcher's diary and field notes were used to validate the observation notes and the interview data (Denzin & Lincoln, 2011). Detailed information about the participants is provided in Table 1.

Table 1. Participants information

Child participants	Gender	Child's diagnosis	Adult participants	Adult's diagnosis	
Participating child A	Female	Visual impairments, intellectual disability	Teacher A	Visual impairments	**School 1**
			Teacher B	-	**School 1**
			Teacher C	Visual impairments	**School 1**
Participating child B	Female	Visual impairments	Teacher D	-	**School 2**
Participating child C	Male	Visual impairments			
Participating child D	Male	Visual impairments	Teacher E	-	**School 2**
		Autism	Teacher F	Visual impairments	**School 2**
			Mother	Visual impairments	**School 2**

Recruitment of participants

The participants in this study were attending public special schools in a large city in Türkiye and receiving support from private rehabilitation centres. Due to the low number of public special schools within the city where the data collection took place, the city is being kept anonymous to protect the anonymity of the participants. Participants were invited to this study by contacting the schools within the scope of ethical permissions. First, volunteer teachers were reached and then the teachers announced the study to the parents. A volunteer parent, six teachers, and four students participated in this study. To ensure anonymity, code letters were used for each participant. Participating children were aged between 7 and 10.

Background

The education of children with special educational needs takes place in different settings in the Turkish context depending on the assessment of a child's disability. These settings include special schools, mainstream schools, special education classrooms within mainstream schools, homeschooling, or hospital-based education. After a child's special needs report is obtained from the health board, it is possible to apply to the Guidance and Research Center with this report and to receive additional support from private special education and rehabilitation centres if the special education evaluation board deems it appropriate after the evaluation and diagnosis process is carried out in the Guidance and Research Center (Ministry of National Education, 2018). Communication devices, individualized strategies, or adaptive teaching methods can be used by teachers and related special education

programs and in-service trainings available for educators (Ochoa et al., 2017; Ministry of National Education, 2018; Ministry of National Education Personnel In-Service Training Regulation, 2022). Although educators receive or can access support through special education programs and in-service training, studies indicate that practical application differs (Bezmez & Yardimci, 2010; Kesik & Beycioglu, 2022; Ochoa et al., 2017; Sakız & Woods, 2015). Studies have explored how teachers access and use resources and highlight how attitudes towards disability can potentially create barriers.

Data analysis

Thematic analysis was used to analyze the data. All the written data was discussed with adult participants and coded. Each adult participant was involved in discussing their own interview data, during which potential categories were explored. Thematic analysis was conducted following the six steps recommended by Braun and Clark (2006) for thematic analysis: (1) familiarizing yourself with your data, (2) generating initial codes, (3) searching for themes, (4) reviewing themes, (5) defining and naming themes, and (6) producing the report.

Results

This study investigated school-based practices and the perspectives of educators and caregivers to understand the supports available in schools that promote child communication skills and participation in educational decision making. In this study, educational decision making covers school and classroom-related activities and daily routines associated with them. Analysis of the data revealed some common patterns. These patterns were grouped into four themes: (1) communication support strategies, (2) difficulties in practice, (3) participation in decision making, and (4) the importance of maintaining collaboration.

Theme 1: Communication support strategies

Alternative methods of communication and symbol systems

Effective communication methods or tools play an important role in supporting children's participation in classroom activities and decision making. Additionally, a supportive communication environment can encourage children to express their opinions. In terms of supporting their students, the participating teachers emphasized some techniques that they used in the classroom to support children's communication skills. These reports reflected the data collected during classroom observations. The teachers were using augmentative and alternative communication techniques most frequently with students with multiple disabilities, and they used verbal communication with children who had no communication difficulties. Devices used in classroom settings included symbols (diagrams, reading or writing symbols), tangible symbols (objects or a part of an object, cards with pictures), or voice-making toys, although all of these devices were observed infrequently. The use of gestures and nonverbal communication techniques was also preferred by the teachers. This approach most likely reflected power dynamics between teachers and students, where the teachers have the primary role, as it appears to provide structure in the classroom. In the following quotes, the participating teachers described how they use symbols with children who have more than one disability during the classroom activities.

> Each of our students has an object to communicate with each other. Additionally, we used objects such as a spoon for meal times, a toilet roll for toilet training … a specific object on the classroom door…. The students find the classroom by touching the object which represents the class. (Teacher C)

> We ask students to touch our hands if they feel hungry or by making a specific "sip" sound if they are thirsty. These help them to express their wants and needs. (Teacher C)

The teachers also articulated that needs-based planning was the main priority for them to support students' daily life skills. It was observed that children who used verbal language or alternative communication techniques for choice-based activities in the classroom indicated their preferences or maintained communication.

Routines/social praise

All the teachers reported that routines and the use of social praise had positive effects on their students' ability to establish and maintain communication, and they gave examples of the types of activities they used. The observed child-teacher classroom interactions also supported this.

> We use voice-making symbols, music, or food as a reinforcement. Those are effective. (Teacher E)

In the quote above, the teacher emphasized the routines such as mealtime or playtime to support communication. Similarly, another teacher emphasized the importance of routines in supporting communication, as shown below.

> In the mornings we always said "good morning, how are you?" and over time she learned this and now she can say "good morning, how are you?" when we come in the morning. When we go out of the routines, she can show problem behaviour. Routines are very important for us. (Teacher B)

Theme 2: Difficulties in practice

Adult participants highlighted some challenges in working effectively with children and implementing educational strategies. When addressing topics related to the support process or strategies, adult participants mostly stated the difficulties they experienced. Perceived difficulties emphasized an approach to managing or controlling children's contextually inappropriate or problematic behaviours. In addition, having limited information on how to provide support, the effects of school absenteeism, and teachers' support needs were other issues that attracted attention. The categories of this theme can be seen below.

Challenging behaviours in children

At different stages of the data collection process, adult participants frequently emphasized behaviours that they called "behaviour problems" or "challenging behaviours." Behaviour problems were the most frequently emphasized difficulty by the participating mother and five teachers. Addressing challenging behaviours was an important aspect of supporting children in educational environments because behaviour issues can be considered as barriers to meaningful engagement and participation in decision-making processes by adults. In this study, the adults' approach to controlling behaviour and the classification of perceived negative behaviours based on this was notable. In the following quote, the teacher addressed challenging behaviours and used different strategies.

> He has screaming and crying behaviour.... Recently he has new behaviours like climbing on the table. We have used different strategies but these behaviours still persist. (Teacher E)

In the quote below, the teacher stated a decrease in challenging behaviours throughout the process, attributing it to emphasizing the importance of following the rules.

> She was showing problem behaviours. Now she follows the instructions.... She obeys the rules as we obey them. (Teacher A)

> He received communication support from 6 months old.... He is not receiving communication support now, but we are attending a private special education centre.... I have had a hard time. He does not want to eat.... He didn't listen to me as much as listening to his teachers. (Mother)

In the above quote, although the participant mother stated the difficulties she experienced based on behavioural problems in different environments, she also stated that there was a limitation in the methods she could apply for this as both she and her child have a disability and she was the child's sole caregiver. Therefore, additional support was required for the mother and her child from the related parties such as educators, schools, or rehabilitation centres; these parties may have knowledge and the ability to transfer knowledge to parents about teaching methods, behaviour management, or other teaching strategies. While the problem behaviours were not observed during the observations, the child's limited participation in the educational activities as well as any kind of decision about their education was recorded. It is also important to consider how the strategies or behaviours exhibited by adults might influence potential behaviour problems. In relation to this, the following observation note describes an interaction between teachers and student.

> Student is sitting at a desk placed near the window with his back to the window, away from his peers in the classroom. There are colourful picture cards on the student's desk and these cards were placed on the desk by the teacher. The student takes the cards with his hand and tries to examine them by turning the cards at a very close distance to his eyes. Meanwhile, the two teachers in the classroom are interested in the activities of other students.... After looking at about six cards (this took about five minutes), the student threw all the cards on the floor. The teacher then told the student to collect the cards and after repeating this verbally three times, the student collected the cards and put them on the table. (Observation notes, Participating child D)

In the quote above, multiple factors might have influenced the student's behaviour, such as seeking attention, sitting apart from his classmates, or needing more support during the activity.

Lack of knowledge on child disability and lack of materials

Four of the participating adults, including the participating mother, emphasized that they did not have enough knowledge about the child's disability or special needs and that this limited the effective implementation of the educational support process. In addition, the fact that children had communication difficulties was also seen as a limitation in determining disability status and needs. It appears that a lack of knowledge can also lead to low expectations. Furthermore, teachers stated that the families did not have enough information about disability and the support to be provided or that they did not have access to information. Where they were critical of the situation, being unable to access information was a disadvantage, as shown by the two quotes below.

> Some of our students need support in language and communication and also physical education. The parents have a lack of knowledge in these areas. (Teacher C)

> Actually, we could not evaluate how well the students were learning. (Teacher C)

In addition to the lack of knowledge about how to provide support, another related topic that came to the forefront was related to the materials to be used during the educational training of children, as two teachers from one school stated that they did not have enough materials. A related quote can be seen below.

> The student can answer one-word questions but he can't improve speech. We don't have talking books. We have a sensory room; however, we can use this room only during limited hours in a week.... However, I don't want to take him to there whenever he cries because I don't want to use the reinforcement incorrectly. I don't want to reinforce his behaviour of crying. (Teacher E).

School attendance (including the effects of the COVID-19 global pandemic)

Three of the participating teachers stated that school absenteeism had a negative impact on children with multiple

disabilities, especially on teaching skills and supporting communication. They emphasized the negative impact of prolonged absences due to vacations or health conditions on students' skills and academic progress. Two teachers attributed this to the limited support provided for communication skills in out-of-school settings or the difficulty of following up their students' progress.

> Our main concern is communication. She displays limited spontaneous communication. Particularly after coming back from holiday breaks, she starts using a lot of repetitions in her speech. We can notice this when we return from holidays. I don't think that she has continuity in communication outside of school. (Teacher B)

Although this was a frequently emphasized issue, it is also noteworthy that participating teachers did not emphasize any strategies for family collaborative practices during absences or vacations. Throughout the observation process, it was observed that in the classrooms of students with additional disabilities, one or two students attended the class and student communication was mainly with the teacher. Below is a quote from the observation data. The following activity was completed in approximately 10 minutes in accordance with the teacher's verbal instructions.

> In the classroom, there was a teacher's desk, a rectangular table for the students to work, and chairs around it. Only two students attended the class and a teacher was doing collage work around the student table.... The student actively participated in the collage work made of tactile materials.... The teacher asked the students three times to choose among the materials: "Which one do you want?" ... During the activity, Student A responded to the teacher's instruction with sound (six times) but did not use words.... Interaction with their peer was very limited. While the teacher did not provide any guidance for peer interaction, the other student tried to complete their own activity. (Observation notes, Participating Child A)

Social and emotional support for teachers

Participating adults including the mother and two teachers indicated their need for psychological support within the overall process. They stated that dealing with problem behaviours and the ineffectiveness of the methods used or the limitations and difficulties experienced in cooperative processes, had a cumulative negative effect over time. As a result, these participants stated that they needed support in the process of working effectively with students and their families.

> Sometimes we need psychological [social emotional] support. Sometimes it is hard to cope with the difficulties and we feel frustrated. Sometimes I am not sure how to provide support or how to cope with difficulties. (Teacher F)

Theme 3: Participation in decision making

Limitations were observed in the participation of children and families in educational decision-making processes. Teachers did not mention participation in decision-making processes of students with communication difficulties based on the issues in the categories mentioned above.

Child and parent participation in decision making

Participation of children in decision making was limited. Two teachers interpreted the educational decision-making process based on participation in classroom activities. This limitation was also found to be the case with the teachers who had visual impairments themselves, who stated that their participation in decision-making processes had been limited during their education, as shown below.

> I was educated in a mainstream school.... In high school, I decided which high school I would choose, but my family and teachers influenced my decision and influenced my choice. Children do what the family wants. The child behaves the way the family directs. (Teacher C)

Similar limitations in children's participation in the educational decision-making process were also seen in family participation. However, all teachers perceived that the decision-making process in general was carried out by adults and that the family's role in educational and other decisions was predominant. A related quote can be seen below.

> Families are influential in decision making. But in the classroom, for example, in mathematics lessons, I ask their [students'] opinion and sometimes I choose activities. (Teacher D)

The participant mother, however, stated that she followed the education and support process together with the teachers in making decisions, and according to her, the decisions made by the teachers contributed to the process.

Theme 4: The importance of maintaining collaboration

Practices aimed at maintaining cooperation between schools, families, and professionals were considered important by all adult participants. However, difficulties were reported at the stage of sustaining cooperation.

Collaboration between schools and families

Four of the six teachers stated that there were difficulties in the process of cooperation with families, and that families were reluctant or unwilling to participate in the process. The impact of in-school discourses was also emphasized by two teachers. For example, they stated that they perceived that school-family cooperation was not sustained based on the experiences of other teachers, and it was also seen that there were common views or practices among teachers in the same school. The limitation in family cooperation also negatively affected the monitoring of students' progress or the implementation of effective strategies. There was a negative perception of using alternative ways to increase family involvement or strengthen communication with the families. In addition, teachers also attributed limited parental involvement to mothers' responsibilities for other children or fathers' employment status.

> In terms of partnership with families, there are some problems. When we say about a child's ability, they cannot accept this. The parent then says that the student can say the numbers from one to ten in the private educational centre, but he cannot actually. There is an exaggeration.... The parent says the student can multiply numbers and we ask for a video to see it, but it never arrived. (Teacher C)

> Family partnerships are difficult ... because many parents think that they accept their child's circumstances, but actually they never accept the child's situation. They cannot understand the child's condition. (Teacher A)

In the quotes above, the teachers focused on family-related factors to maintain school and family partnership. In the quote below, the teacher had limited communication with the family and lacked information about activities at home.

> I don't know how much parents and families are implementing the activities, but this year she is going to the park more. We can see that she spends more time in social environments. (Teacher B).

> We thought he misses his father and that's why his problem behaviours are increasing ... because his father left the house. We tried to contact him (the father) but he didn't want to see him. (Teacher E)

As in the quote above, abandonment by the father when both the mother and the child had disabilities, and the impact of family-related factors related to this, were also mentioned as one of the factors affecting the continuation of cooperation. The participant mother and her child were visually impaired. As stated by the teacher, the father had abandoned his parental responsibilities, so the mother took care of the child by herself.

Collaboration between professionals

Differences of opinion among experts and limitations in knowledge sharing are noteworthy. The medical approach was also adopted in providing educational support. The quote below is an example of the medical approach overriding the views of the educational professional; it shows the limited collaboration between professionals who were involved in decision making regarding educational placement.

> The student learns so fast. However, it is so sad that she cannot use what she has learned because she is diagnosed with intellectual disabilities and she cannot attend an academic classroom. (Teacher B)

Most of the students were receiving support from private rehabilitation centres at weekly intervals depending on their assessment reports. However, only one teacher emphasized that they maintained communication regularly with the educators at the special rehabilitation centre through notebooks in which they recorded daily activities, while the other teachers emphasized that there were problems in the cooperation process between teachers, educators, and specialists.

> The student needs help with speech and language provided by an expert; however, an expert should work with the student. I am not sure if an expert provides this support there [in the private education centre].... The booklet they sent us showed that the student gained some skills within two or three hours, but I have worked here with the student for a total of 30 hours to help the student to gain these specific skills. (Teacher C)

Two of the educators stated that they had tried to get advice from academics but it wasn't given on a regular basis. They also communicated with their colleagues who worked in the same school regarding behaviour management strategies. However, there was no communication between education and medical specialists. As stated in the quote below, the use of medications prescribed within the scope of the expertise of medical specialists was seen as a way to cope with the challenging behaviours of the children.

> The student was taken to a psychologist because of his aggressive behaviour. He is on medication.... He is constantly asleep, falling asleep during classes. (Teacher E)

Similarly, the participant's mother stated that she received support from a medical specialist for her child whom she regularly visited at the hospital, and that she had informed the teacher about the support received and the medications used. However, the teacher emphasized that she was not sure to what extent the information conveyed by the mother was accurate. Therefore, there is also an issue in terms of who has the information about the child's special needs, making the necessary adaptations, or how accurately the information is conveyed between the parties.

Discussion

The results of this study reveal variable factors that impact participation in the educational decision-making processes of individuals who have one or more disabilities and the supports provided in this direction in educational environments. In particular, several issues have come to the fore, including those related to children's immediate

environment and the support provided in this environment and how the concept of disability is perceived and how this perception affects the participation of individuals with disabilities in educational decision-making processes. The results are discussed using a systems approach because the factors in the child's immediate environment and the relationships between adults and professionals were emphasized (Bronfenbrenner & Ceci, 1994; Bronfenbrenner, 2005). Therefore, based on the findings of this research, critically examining the participants' experiences in those settings involves considering how different systems interact, are interconnected, or intersect to influence children's positioning in the environments where they have grown up.

Bronfenbrenner's model, which is used to interpret the data, addresses the dynamic effects of nested systems; a model can be seen in Figure 1.
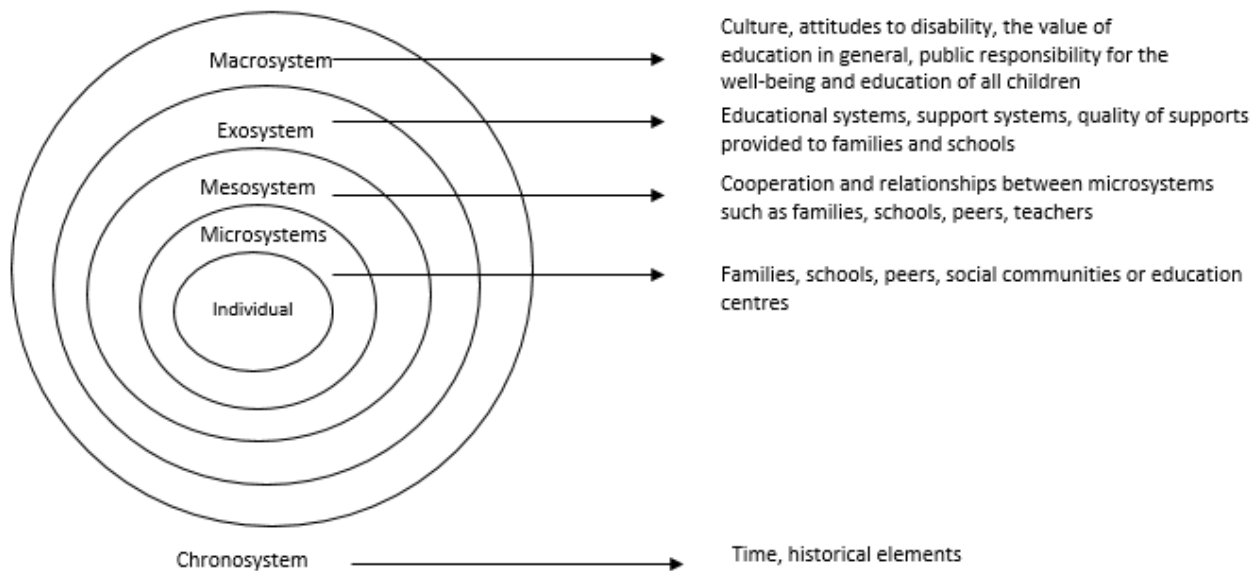

Figure 1. Bronfenbrenner's model.

There is a regular interaction between the individual and the units in the immediate environment (microsystem) of the individual (Bronfenbrenner, 2005; Bronfenbrenner & Ceci, 1994). This individual was at the centre of the nested systems. Here, the factors originating from the individual and from the immediate environment mutually affect each other. Therefore, each unit in the immediate environment, including families, teachers, support centres or experts, interacts with each other (mesosystem). There are also structures that have an indirect impact on the individual and their immediate environment, such as support systems, the structure of educational programs, and the underlying approaches (exosystem). In addition, according to the systems approach, a structural interaction in cultural or behavioural characteristics (macrosystem) and a historical time element (chronosystem) interacts with the entirety of the nested systems being considered (Bronfenbrenner, 2005; Bronfenbrenner & Ceci, 1994). Accordingly, the main outcomes of this research draw attention to the fact that events take place in the context of the individual depending on where they live over a period of time, and all the structures involved in these events form a contextual system of influence.

The research outputs of this study were assessed by addressing the dynamic effects of the nested systems of the students' educational and home lives through the lens offered by Bronfenbrenner's (2005) model. The emphasis

on individual factors by the family and teachers in the child's immediate environment was notable. Several factors within the interconnected microsystems appear to contribute to the understanding of children's needs and practice to support participation in educational decision making. One of these factors was linked to the adults' emphasis on managing children's challenging behaviours. The majority of the participating adults in the study stated that they had difficulties in identifying the needs of children with multiple special needs and incorporating appropriate strategies accordingly. They mainly emphasized the effect of communication difficulties and challenging behaviours on these difficulties. It was seen that there were also difficulties in incorporating appropriate strategies for perceived challenging behaviours and that this was interpreted as a barrier by the participating adults. In the literature, it is considered that teachers' inadequate preparedness and lack of related support or materials can affect both teachers and their students in the teaching process (Boujut et al., 2016; Ginja & Chen, 2023; Ruppar et al., 2016); therefore, the results of these studies also highlight the potential need for specialized training for educators.

In terms of adaptations and alternative strategies, alternative communication and symbol systems were used by the adults in the school environment; however, the outcomes of the research also revealed that the participating adults lacked knowledge in terms of adaptation and appropriate strategies to be used. Although the educators stated that they tried to get advice from the relevant field experts they could reach, or by communicating with other teachers, they emphasized that this was not enough or that the strategies could not be sustained. Ultimately, these interconnected microsystems interacted to shape opportunities for learning and skills development differently for every child. At the microsystem level, educators, families, and schools are important, but the broader factors and their influence on the microsystems are equally significant. The broader issues may include societal perspectives on education, disability, and inclusive practices. At the exosystem level, the amount and quality of supports provided to families and schools can be considered within the exosystem level, while at the macrosystem level societal perspectives influence educational policies, practices, and the value placed on inclusive education. The impact of these systems can also be seen at the mesosystem level by including cooperation or lack of cooperation between parties such as schools, rehabilitation centres, educators, and families.

In the research context, teachers' awareness of student participation in educational decision-making processes was found to be limited. Especially in cases where communication difficulties were seen as a barrier, adults who were unable to effectively incorporate alternative pathways focused primarily on teaching skills or managing or controlling students' problem behaviours. The discourse and practice of control is also emphasized in research outputs carried out in different contexts (Orsati & Causton-Theoharis, 2013). The participating educators and parent, including those with special needs, emphasized the dominant influence of the role of their own families or teachers in the decision-making processes in their own lives. They also considered that this influence had positive effects based on their own experience. It was therefore a normalized practice for adults to make decisions and for the child to be a passive recipient. This was based on a relationship of mutual trust between children and family members or teachers. However, the interconnected effects of interactions between family, school, and expert dynamics in the immediate environments appeared to create normalized circumstances and common narratives that might create structural barriers to equal participation. In turn, in order to raise awareness about the participation of children or young people in decision-making processes, it is important to involve the individual and their immediate environment together. In related studies, limitations related to adults' inclusion of children's views in the decision-making process have been mentioned in relation to factors such as the adult having the authority to make decisions on behalf of the child or whether this is considered culturally correct (Tisdall & Cuevas-Parra, 2022). These factors are interpreted in relation to adult control and the existence of power relations between adults and children, as well as the limitation of child participation based on adult interests (Saaltink et al., 2012; Tisdall & Cuevas-Parra, 2022). Consequently, when individuals with communication difficulties or those in need of appropriate environmental adaptations are not provided with the necessary support by the adults in charge

of the process, they are restricted from sharing knowledge and participating in educational decisions made about or for them. From a critical lens, this also refers to the structural challenges within the immediate environments of children where the role of power dynamics between children and adults is emphasized.

According to the findings of this study, there is a need for cooperation between school administrators, educators, centres providing special education support, and families within the scope of providing the necessary technological tools, providing support about their use, and actively involving each party in the process. However, it is noted that this cooperation is not effectively sustained in all contexts. The predominant influence of familial factors, lack of knowledge, difficulties in accessing knowledge, disagreements among educators about methods and strategies, and prejudices against sustaining collaboration are among the prominent findings of this study. Studies conducted in other contexts also emphasize the lack of knowledge of families, the attitudes of experts towards the inclusion of children in decision-making processes, or limitations in the support provided to educators and professionals (Kamenopoulou & Goals, 2018; McNeilly et al., 2015; Yeşilkaya, 2020). In addition, it is emphasized in studies on children's participation in decision-making processes in schools that the process of acceptance and establishment of changes made in this direction will take time depending on the established school culture and that such changes to be made in an established school culture may not be accepted immediately (Cox & Robinson-Pant, 2008). In studies conducted on similar topics in the literature, it was reported that adults used the right to make decisions on behalf of children with disabilities to protect children with disabilities or thought that children could not participate in decision-making processes (Saaltink et al., 2012). Similarly, the educators who participated in this study seemed to believe that even if children have certain skills, this will not have much effect in terms of participation in the decision-making process. It is still open to debate whether these factors are a result of the reluctance of adults, who are in the decision-making position and can exercise power, to involve children in the decision-making process or whether they provide justifiable reasons to avoid interaction (Lundy, 2018). Whether the reasons given by the participating adults for not including the necessary techniques and strategies or not having the means or time to include them is an excuse, it is important to investigate this in more detailed studies and in different contexts (Lundy, 2018).

There are complex challenges experienced in many dimensions related to factors that have an indirect impact on the child's immediate environment. Their individual or cumulative effects have an impact on topics related to child participation. One of the main difficulties in meeting complex needs is that different specialists provide the support and there is a lack of cooperation or coordination among them (Turnpenny & Beadle-Brown, 2015; Yeşilkaya, 2020). The complex situation of families who have to reach out to different specialists for educational or medical evaluation and the resulting support, combined with the lack of sustainable cooperation among specialists, educators, and families, is a barrier. In terms of family involvement, a lack of support by families for their children's education can be related to multidimensional factors, and this may require critically examining the structural factors. Family involvement might be negatively affected if teachers' attitudes towards family-expert cooperation are negative. Family involvement is important in terms of increasing the family's knowledge by trying different ways of sharing knowledge with them, as well as providing adequate opportunities for children to participate in decision-making processes in the educational and social environment. There are outcomes of research in the literature that share the finding that a holistic and supportive approach has significant contributions to both child and family participation (Saaltink et al., 2012). Due to the complexity of various issues within the environment of children and their families, it is important to consider alternative forms of empowerment.

From the results of this study, it can be seen that the medical approach is predominant in understanding disability experiences. This consciously or unconsciously affects both the individual and those in the individual's immediate environment through practice in different contexts at the meso and micro levels. Viewing the impact of a medical

approach at the microsystem level appears to focus more on individual factors that significantly influence the experiences of children, parents, or educators. Therefore, at the mesosystem level, a medical-approach-based structure of the support systems addresses challenges in supporting collaboration among all related parties. This also creates a structural barrier to embedding a holistic approach to involve effective strategies to meet needs.

Through a critical framework, diverse factors and their interconnected influences address multidimensional barriers that shape the experiences of children who have disabilities, as well as individuals in their immediate environments. In this study, teachers and families adopted the medical approach for students with behavioural problems they thought they couldn't cope with, and while they tried to control the behaviours through the use of various medications, the child continued to participate by remaining passive. Although similar results have been reported in studies conducted in other contexts, whether this is the right approach is still a matter of debate (Christensen, 1999; Kamenopoulou & Dukpa, 2018; Malacrida, 2004; Skrtic, 2005). This situation also provides examples of the application of the generally accepted medical approach as a normal practice in daily life in the context of the child and their immediate environment. This also reveals a power relationship between the experts who hold the knowledge and the families who try to access the knowledge. Participant teachers who stated that both children and families need a certain amount of support also stated that they themselves need social and emotional support.

In processes where children and youth with disabilities are involved in adult-oriented decision making, the literature emphasizes the importance of recognizing and implementing in practice the rights of health professionals, social experts, parents, and educators regarding children's participation in decision making (Franklin & Sloper, 2009; McNeilly et al., 2015). Ensuring such recognition draws attention to the importance of collective work with adults and parents who work with children with disabilities as experts, and the support to be provided to experts in this regard (Franklin & Sloper, 2009). McNeilly et al. (2015) state that the development of services and opportunities for children with disabilities are factors that can influence the inclusion of this group in the decision-making process. The potential contribution of comprehensive and well-planned support processes for teachers and students is also stressed (Cox & Robinson-Pant, 2008). Therefore, the inclusion of the views of children with disabilities in educational decision-making processes, or the sustainable involvement of children and adults in the process of knowledge sharing, can be presented in a more feasible form by addressing and analyzing multidimensional factors in detail and generating solutions in a context-specific manner.

The difficulties experienced by both families and educators in the different topics mentioned in this article appear as barriers regarding participation in decision-making processes. Given the lack of knowledge, difficulties in collaboration, the predominantly accepted medical approach, and the cumulative challenges these create, none of the adult participants see participation in educational decision making as an option for children with disabilities. This is especially the case for children with multiple disabilities or who have communication difficulties. Therefore, it is important to examine these factors affecting children's participation in educational decision-making processes in a broader context, with a holistic approach that considers the impact of factors specific to the socialcultural contexts. In addition, internalized practices need to be evaluated and practical and applicable approaches need to be revealed. Therefore, this might require a paradigm shift where empowerment of children with disabilities takes place by addressing the broader structural issues through recentering their voices.

Limitations

This study has some limitations in terms of the number of participants, the context, and the duration of the study; the global pandemic also had an impact on the data collection process. This qualitative study was completed with

11 participants and, although limited by the number of participants, it provided an opportunity to examine the experiences of the participants in depth. Therefore, in future studies, collecting additional contextual data and supporting the outputs with expanded studies in different contexts would contribute to the findings described here.

Conclusion

The outcomes of this study revealed the cumulative impact of the interaction of different and interrelated variables on the individual and their immediate environment. In the context in which the research was conducted, having more than one disability in addition to a primary diagnosis impacts the parents' and teachers' approaches when providing communication support for children and involving them in educational decision making. The training and support needs of parents and teachers impact the implementation of effective strategies for supporting children. Additionally, collaboration among the parties is important for providing opportunities for children to be active participants in the decision-making process by using alternative modes of communication. Complex dynamics exist within each child's home and school environment that affect the nature of support, as well as the outcomes of the support provided. Various issues affect access to communication support, such as limited resources, limited access to support, and prejudices about a disability. Identifying these context-based issues can have a positive impact on employing effective strategies. Further effort is required to foster children's participation in decision-making processes related to their education and to influence related policy and practice. The outputs of this research will contribute to the development of sustainable practices and related studies for, and with, children within the Turkish educational context and beyond.

References

Bezmez, D., & Yardimci, S. (2010). In search of disability rights: Citizenship and Turkish disability organizations. *Disability and Society*, *25*(5), 603–615. https://doi.org/10.1080/09687599.2010.489312

Boujut, E., Dean, A., Grouselle, A., & Cappe, E. (2016). Comparative study of teachers in regular schools and teachers in specialized schools in France, working with students with an autism spectrum disorder: Stress, social support, coping strategies and burnout. *Journal of Autism and Developmental Disorders*, *46*(9), 2874–2889. https://doi.org/10.1007/s10803-016-2833-2

Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, *3*(2), 77–101. https://doi.org/10.1191/1478088706qp063oa

Brighouse, H., Ladd, H. F., Loeb, S., & Swift, A. (2016). Educational goods and values: A framework for decision makers. *Theory and Research in Education, 14*(1), 3–25. https://doi.org/10.1177/1477878515620887

Bronfenbrenner, U. (2005). *Making human beings human: Bioecological perspectives on human development*. SAGE.

Bronfenbrenner, U., & Ceci, S. J. (1994). Nature-nurture reconceptualized in developmental perspective: A bioecological model. *Psychological Review*, *101*(4), 568–586. https://doi.org/10.1037/0033-295X.101.4.568

Brundle, C. (2023). Facing the challenge of understanding how northern biases and assumptions impact the research process: Considering the researcher positionality in exploring local practice of disability-inclusive education in Uganda. *Disability and the Global South*, *10*(1), 2210–2231. https://dgsjournal.org/vol-10-no-1/

Cavet, J., & Sloper, P. (2004). Participation of disabled children in individual decisions about their lives and in public decisions about service development. *Children & Society*, *18*(4), 278–290. https://doi.org/10.1002/chi.803

Chitpin, S. (2021). *Understanding decision-making in educational contexts*. Emerald. https://doi.org/10.1108/9781800718173

Christensen, C. (1999). Learning disability: Issues of representation, power and the medicalization of school failure. In R. J. Sternberg & L. Spear-Swerling (Eds.), *Perspectives on learning disabilities: Biological, cognitive, contextual* (pp. 227–249). Routledge.

Cook-Sather, A. (2020). Student voice across contexts: Fostering student agency in today's schools. *Theory Into Practice, 59*(2), 182–191. https://doi.org/10.1080/00405841.2019.1705091

Cox, S., & Robinson-Pant, A. (2008). Power, participation and decision making in the primary classroom: Children as action researchers. *Educational Action Research*, *16*(4), 457–468. https://doi.org/10.1080/09650790802445643

Creswell, J. W., & Poth, C. N. (2018). *Qualitative inquiry and research design: Choosing among five approaches* (4th ed.). SAGE.

Cuevas-Parra, P. (2023). Multi-dimensional lens to article 12 of the UNCRC: A model to enhance children's participation. *Children's Geographies*, *21*(3), 363–377. https://doi.org/10.1080/14733285.2022.2071598

Denzin, N. K., & Lincoln, Y. S. (2011). *The SAGE handbook of qualitative research* (5th ed.). SAGE.

Flutter, J. (2007). Teacher development and pupil voice. *The Curriculum Journal, 18*(3), 343–354. https://doi.org/10.1080/09585170701589983

Franklin, A., & Sloper, P. (2006). Participation of disabled children and young people in decision making within social services departments: A survey of current and recent activities in England. *British Journal of Social Work*, *36*(5), 723–741. https://doi.org/10.1093/bjsw/bch306

Franklin, A., & Sloper, P. (2007). *Participation of disabled children and young people in decision-making relating to social care* (November). https://www.york.ac.uk/inst/spru/pubs/pdf/decision.pdf

Franklin, A., & Sloper, P. (2009). Supporting the participation of disabled children and young people in decision-making. *Children & Society*, *23*(1), 3–15. https://doi.org/10.1111/j.1099-0860.2007.00131.x

Ginja, T. G., & Chen, X. (2023). Conceptualising inclusive education: the role of teacher training and teacher's attitudes towards inclusion of children with disabilities in Ethiopia. *International Journal of Inclusive Education*, *27*(9), 1042–1055. https://doi.org/10.1080/13603116.2021.1879958

Hong, S.-Y., Eum, J., Long, Y., Wu, C., & Welch, G. (2020). Typically developing preschoolers' behavior toward peers with disabilities in inclusive classroom contexts. *Journal of Early Intervention, 42*(1), 49–68. https://doi.org/10.1177/1053815119873071

Janta, B., Bruckmayer, M., de Silva, A., Gilder, L., Culora, A., Cole, S., Leenders, E., Schuurman, M., & Hagger-Vaughan, A. (2021, April). *Study on child participation in EU political and democratic life: Final report.* European Commission.

Kamenopoulou, L. (2020). Decolonising inclusive education: an example from a research in Colombia. *Disability and the Global South*, *7*(1), 1792–1812. https://dgsjournal.org/vol-7-no-1-2/

Kamenopoulou, L., & Dukpa, D. (2018). Karma and human rights: Bhutanese teachers' perspectives on inclusion and disability. *International Journal of Inclusive Education*, *22*(3), 323–338. https://doi.org/10.1080/13603116.2017.1365274

Kamenopoulou, L., & Goals, S. D. (2018). Inclusive education in the global south? A Colombian perspective: "When you look towards the past , you see children with disabilities, and if you look towards the future, what you see is diverse learners." *Disability and the Global South*, *5*(1), 1192–1214. https://discovery.ucl.ac.uk/id/eprint/10136429/

Kesik, F., & Beycioglu, K. (2022). Turkish education policies and practices: Inclusive or exclusionary? *International Journal of Inclusive Education*, 1–18. https://doi.org/10.1080/13603116.2022.2058625

Leithwood, K., Harris, A., & Hopkins, D. (2020). Seven strong claims about successful school leadership revisited. *School Leadership & Management, 40*(1), 5–22. https://doi.org/10.1080/13632434.2019.1596077

Lundy, L. (2007). "Voice" is not enough: Conceptualising Article 12 of the United Nations Convention on the Rights of the Child. *British Educational Research Journal*, *33*(6), 927–942. https://doi.org/10.1080/01411920701657033

Lundy, L. (2018). In defence of tokenism? Implementing children's right to participate in collective decision-making. *Childhood*, *25*(3), 340–354. https://doi.org/10.1177/0907568218777292

Malacrida, C. (2004). Medicalization, ambivalence, and social control: Mothers' descriptions of educators and ADD/ADHD. *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine*, *8*(1), 61–80. https://doi.org/10.1177/1363459304038795

McNeilly, P., Macdonald, G., & Kelly, B. (2015). The participation of disabled children and young people: A social justice perspective. *Child Care in Practice*, *21*(3), 266–286. https://doi.org/10.1080/13575279.2015.1014468

Mitra, D. L. (2009). Strengthening student voice initiatives in high schools. *Youth & Society, 40*(3), 311–335. https://doi.org/10.1177/0044118X08316211

Nguyen, X. T., Bernasky, T., & Dang, T. L. (2022). *Final report: The Transforming Disability Knowledge, Research and Activism (TDKRA) Project.* https://doi.org/10.22215/ddsc.2022.301

Ochoa, T. A., Erden, E., Alhajeri, O., Hurley, E., Lee, K., Ogle, L., & Wang, T. (2017). Disability laws and special education provisions in China, Kuwait, South Korea, Turkey, and the US. *International Journal of Special Education, 32*(2), 325–354. https://eric.ed.gov/?id=EJ1184133

O'Farrelly, C., Booth, A., Tatlow-Golden, M., & Barker, B. (2020). Reconstructing readiness: Young children's priorities for their early school adjustment. *Early Childhood Research Quarterly, 50*, 3–16. https://doi.org/10.1016/j.ecresq.2018.12.001

Orsati, F. T., & Causton-Theoharis, J. (2013). Challenging control: Inclusive teachers' and teaching assistants' discourse on students with challenging behaviour. *International Journal of Inclusive Education*, *17*(5), 507–525. https://doi.org/10.1080/13603116.2012.689016

Ruppar, A. L., Neeper, L. S., & Dalsen, J. (2016). Special education teachers' perceptions of preparedness to teach students with severe disabilities. *Research and Practice for Persons with Severe Disabilities*, *41*(4), 273–286. https://doi.org/10.1177/1540796916672843

Saaltink, R., Mackinnon, G., Owen, F., & Tardif-Williams, C. (2012). Protection, participation, and protection through participation: Young people with intellectual disabilities and decision making in the family context. *Journal of Intellectual Disability Research*, *56*(11), 1076–1086. https://doi.org/10.1111/j.1365-2788.2012.01649.x

Sakız, H., & Woods, C. (2015). Achieving inclusion of students with disabilities in Turkey: Current challenges and future prospects.

International Journal of Inclusive Education, 19(1), 21–35. https://doi.org/10.1080/13603116.2014.902122

Skrtic, T. M. (2005). A political economy of learning disabilities. *Learning Disability Quarterly*, *28*(2), 149–155. https://doi.org/10.2307/1593616

The Ministry of National Education. (2018). *Özel Eğitim Hizmetleri Yönetmeliği*. https://orgm.meb.gov.tr/meb_iys_dosyalar/2018_07/09101900_ozel_egitim_hizmetleri_yonetmeligi_07072018.pdf

The Ministry of National Education. (2022). Personnel in-service training regulation. https://www.resmigazete.gov.tr/eskiler/2022/03/20220311-6.htm

Tisdall, E. K. M., & Cuevas-Parra, P. (2022). Beyond the familiar challenges for children and young people's participation rights: The potential of activism. *International Journal of Human Rights*, *26*(5), 792–810. https://doi.org/10.1080/13642987.2021.1968377

Turnpenny, A., & Beadle-Brown, J. (2015). Use of quality information in decision-making about health and social care services: A systematic review. *Health & Social Care in the Community*, *23*(4), 349–361. https://doi.org/10.1111/hsc.12133

UN Committee on the Rights of the Child. (2009). *General comment No. 12: The right of the child to be heard (CRC/C/GC/12)*. https://digitallibrary.un.org/record/671444?ln=en&v=pdf

UNICEF ECARO. (2018). *Children's participation in the work of NHRIs*. National human rights institutions (NHRIs) series: Tools to support child-friendly practices. https://www.unicef.org/eca/sites/unicef.org.eca/files/2019-02/NHRI_Participation.pdf

United Nations General Assembly. (1989). *Convention on the rights of the child.* https://www.unicef.org.uk/wp-content/uploads/2010/05/UNCRC_united_nations_convention_on_the_rights_of_the_child.pdf

Wickenden, M., & Kembhavi-Tam, G. (2014). Ask us too! Doing participatory research with disabled children in the global south. *Childhood*, *21*(3), 400–417. https://doi.org/10.1177/0907568214525426

Yeşilkaya, E. (2020). Using the Medical Research Council framework for developing a logic model to support children with visual impairments in their learning environments. *British Journal of Special Education, 48*(1). https://doi.org/10.1111/1467-8578.12336

Yu, S., Ostrosky, M. M., & Fowler, S. A. (2015). The relationship between preschoolers' attitudes and play behaviors toward classmates with disabilities. *Topics in Early Childhood Special Education, 35*(1), 40–51. https://doi.org/10.1177/0271121414554432