

Report on Development of Children with Disabilities' and Parents' Wellbeing and Inclusion Checklist Tool Phase 2 – 2023



Disability Inclusive Development TO27/SMILE (a locally driven sustainable, scalable model of disability-inclusive education in Jema'a LGA, Kaduna State, Nigeria)

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Contents

Ac	knov	wledgements	3			
1.	Introduction					
2.	Overview of the Phase 2 process					
3.	Re	sults	9			
4.	An	Analysis and discussion				
	4.1 poter	How the checklist questions and process worked for children: positiv ntially problematic aspects.				
		How the checklist questions and process worked for the parents: pos ntially problematic aspects	itive and 19			
4	4.3	Other aspects which arose in the teams' analysis and reflections	21			
5.	Co	nclusions	23			
6.	Future Plans		24			

1. Introduction

This report describes a piece of inclusive participatory research undertaken in June 2023 under the UK-aid funded Disability Inclusive Development (DID) programme, (as part of Task Order 27 – SMILE focussing on inclusive primary education in Kaduna state in Nigeria).

The first phase of the work took place in 2022 (the report can be **viewed here**¹). The overall aim was to develop a tool to measure how children with disabilities (and their parents²) perceive their inclusion in school and society, as well as their wellbeing. The tool was developed in a participatory way, being informed by what children themselves and their parents see as important. Their ideas generated in workshops were incorporated into the design of the tool. It was designed to show changes in experiences and perceptions over time through repeated use of the tool, in this case over a one-year period.

The process of planning, designing and testing the tool was undertaken by researchers from the Institute of Development Studies (Mary Wickenden and Stephen Thompson) in collaboration with local consultants (Oluwatosin Adekeye and Noela Gwani), and with input from members of the task order steering committee, people with lived experience or expertise in disability and inclusion in Nigeria (Magaji Waziri and Risikat Toyin Muhammed for Phase 2).

During Phase 2 the team re-visited the two schools in Jema'a to repeat the piloting of the two revised checklists (Children's and Parents' versions) with two aims:

- To explore whether the revisions to the checklists (designed in Phase 1) improved their useability for a range of respondents and made the data they produced more specific and useful.
- To learn whether the schools and the communities (where the SMILE project had been doing a variety of interventions to promote inclusion), were now perceived by the children and their parents to be more inclusive and supportive of their wellbeing.

The principle of working in a participatory way with the population who would be respondents to a tool (i.e. directly with the children and parents) is still quite rare, especially in the field of disability in general and particularly in low-income settings. The underlying theory is that asking them directly about what is important to them and recognising them as 'experts' in their own lives is empowering for them. It would also

¹ Report on Development of Children with Disabilities' and Parents' Wellbeing and Inclusion Checklist tool 2022 -Phase 1 https://opendocs.ids.ac.uk/opendocs/handle/20.500.12413/17868

² In this report, we use the word 'parent' in its broadest sense to include a child's caregiver or legal guardian.

lead us to what would be the best criteria for assessing wellbeing and inclusion ensuring that the final checklists were salient and relevant in real situations. The questions would then reveal important aspects and provide valuable information about what needs to change to achieve an ideal inclusive school and community life for children with disabilities and their families.

There is not one clear definition of either inclusion or wellbeing used widely. Both are rather subjectively experienced concepts and may be influenced by individuals' own beliefs and attitudes, their expectations and the cultural contexts in which they are living. This research actively makes use of subjective understandings rather than trying to remove them.

More formal 'tests' of, for example, quality of life (a slightly different concept from wellbeing) have been designed to measure related aspects in relation to children with chronic illness or particular impairment groups (e.g. visually impaired children). However, these have not usually been designed in a collaborative way with children or parents, and tend to focus on health aspects, rather than on education and community life more broadly. They have also been designed mainly for use in high income settings and so are not necessarily appropriate to use in other contexts where resources and services are more scarce and where understandings about inclusion, wellbeing and disability may be very different.

In this report we share the findings from the second phase of trialling the two checklists, one for children and one for parents. We report how the revised versions worked and what they told us about the children's and parents' experiences. Finally, some suggestions are made about how these tools could be developed and rolled out further.

The development process we used and the aims of these Wellbeing and Inclusion checklists in Nigeria is therefore unique, innovative and potentially useful to other settings in Africa and beyond. The findings could be used to assess group changes (e.g. for a whole school) or potentially to look at change at the individual level if responses are compared for each child/parent over time.

2. Overview of the Phase 2 process

In the first half of 2023 the team worked on further refining the checklists, based on feedback from children with disabilities and their parents during the first pilot undertaken in 2022. Various changes to the questions, response options and to the protocol (instructions) were introduced. For example, it was acknowledged that a clearer explanation for participants is needed prior to undertaking the exercise, with more focus on translating the information into the appropriate local language. The information provided was also amended to emphasise that the process is not to be regarded as a test (no right or wrong answers) but rather an exploration of individuals' lived experience. Practice answers were to be included during the introduction (with assured answers) to ensure that all participants understood the process and how to respond using the Likert scale (a range of faces with different emotions). An example question is "You have a mango tree which has a good harvest, how does this make you feel?" The scale that was used was also amended, simplifying the faces used and introducing colours to improve accessibility and comprehension.

Based on feedback from participants relating to ease of comprehension, some of the questions from the checklist were refined. Where greater clarity was required, some questions were separated into two separate inquiries. Examples of the refinements are shown in the table below:

Focus	Original wording	New wording
Children	What do you think of your classroom environment?	Is the classroom suitable and comfortable for you?
Parent	Is your child welcome and included?	Is your child welcome and included in school activities?
Parent	Do you feel your child is safe in school?	Do you think the school is a safe space for your child?

Table 2.1 – Examples of changes in the wording of the tool

A few extra questions were added to ensure that the participants had the opportunity to provide the necessary information. The revised children with disabilities' tool comprised of 21 questions and the revised parents' tool comprised of 21 questions.

In June 2023, the consultants and steering committee members returned to the same two schools (both part of the TO27 intervention) in Jema'a that had been visited in Phase 1. These were the Waziri Aliyu Model Primary school Kafanchan (WAMPS) and Model Primary School, Takau (MPS). Where possible, the same participants who had been involved in Phase 1 were engaged for Phase 2. However, some of the children who had originally participated were no longer in school (which may require further investigation to understand why this change has come about).

On completion of the data collection, the consultants and steering committee members worked with the IDS researchers to analyse the data and reflect on the revised checklists and the instructions. The results are included in this report, as are reflections and discussion about both the limitations and future potential of the tools.

3. Results

Here we first present details about the participants who were assessed on the checklists and about the features of the revised checklists. Then the findings generated by the checklists themselves (i.e. what they told us about wellbeing and inclusion from the children's and parents' perspectives) are summarised in graphs and then some narrative descriptions and quotes from children and parents are presented in order to give a flavour of the data.

We also present the team's reflections on the success of the revised versions, in terms of the process, useability, respondents' understanding of the questions, response types etc and other issues which arose.

Child participants

Participant number 2023	Participant number 2022 tool pilot	Age	Gender B or G	Impairment type	Number of times administered checklist with child	Comments
P1	P12	11	В	Visual impairment	2 nd	
P2	-	13	В	Physical impairment	1st	
Р3	-	10	G	Behavioral /Autism	1st	
P4	Р9	17	G	Physical impairment	2nd	
Ρ5	-	11	G	Learning disability	1st	Child lives with aunty, was brought in from another town so she can attend school in Kafanchan.
P6	P16	10	В	Albino	2nd	
P7	P2	10	В	Physical impairment	2nd	
P8	-	10	G	Intellectual disability	1st	
Р9	-	10	В	Intellectual disability	1st	
P10	P18	9 (almost 10)	G	Visual impairment	2nd	

Table 3.1 School 1. Waziri Aliyu Model Primary school Kafanchan (WAMPS)

Participant number 2023	Participant number 2022 tool pilot	Age	Gender B or G	Impairment type	Number of times administered checklist with child	Comments
P1	P1	14	G	Hearing impairment	2 nd	
P2	Р9	11	G	Hearing impairment	2 nd	
P3	-	10	В	Visual impairment	1st	
P4	P10	16	G	behavioral	2nd	
P5	P7	14	В	Learning disability	2nd	
P6	P6	20	В	Hearing dis/intellectual disability/multiple	2nd	Child Lives with grandmother. Father took the child to another town during the term which he didn't attend school there. Grandmother asked to return the boy to Kafanchan so he can return to school.
P7	Р3	10	В	Hearing impairment/sickle cell	2nd	
P8	P13	10	В	Learning disability	2nd	
P9	-	10	В	Visual impairment	1st	

Table 3.2 School Model Primary School, Takau (MPS)

NB the number of children available to participate in the checklist pilot was smaller in the second phase, a total of 19 as opposed to 32 in the phase 1.

32 in the phase 1.

About the checklists

Children's tool

The children's checklist comprised 21 questions covering:

 Journey to school? 2.Suitability and comfort of classroom? 3. Enough things to learn with? 4. Playground/compound? 5. Toilets-accessibility? 6. Toilets – cleanliness and water? 7. Help from adults in school? 8. Getting on with other children in school? 9. Help from other children? 10. Teasing /mocking/hurting/bullying? 11. Getting on with children at home/community? 12. Treatment from adults in home/community. 13. Can you join with everything at school? 14. Can you join in with everything at home/community? 15. How good is life at school? 16. What is the best thing about school? 17. What is the worst thing about school? 18. How good is your life at home/community? 19. Anything else you want to say about life at school/home? 20. Anything else? 21. What do you think of this checklist?

The parents' tool

The parents' checklist comprised of 21 questions covering:

1. Is your child welcomed in school? 2. Does this school suit the needs of your child? 3. Teachers' treatment of your child? 4. Do teachers have the right resources? 5. Does your child get on with other children? 6. Attitudes of other parents and others to you as a parent? 7. Attitudes of parents and others to you seen the toilets at school? – if YES are they safe/clean/ accessible? 10. If NO-has your child mentioned the toilets? 11. Are the needs of boys and girls with disabilities met equally? 12. Are children with different types of difficulty are all treated equally well? 13. Is school safe from external dangers? 14. Is your mind at rest when your child have a good life overall? 17. Do you have a good life overall? 18. Is there anything you worry about in relation to your child? 19. Anything else you want to say? 20. Is there something else you want to tell or we should ask about? 21. What do you think of this checklist?

The response categories on both the children's and parents' checklist forms for each question (except the final ones asking more open questions) were a choice of 5 or a "don't know" response, as illustrated on part of the form below:

Response	1. Very bad	2. Bad	3. Okay	4. Good	5. Very	Don't know	Comments
	Mummuna sosai	Mara kyau	lafiya	Mai kyau	good Mai kyau sosai	Ban sani ba	
	8	:	e	e	:	<u></u>	
Question 1							

NB The checklist format continues with the subsequent questions 2-21. A form is completed for each child or parent. A full version of the checklists and the instruction sheet are available from the authors on request.

Respondents are asked to give a rating on the scale for each question and also explain and give more information if they want to which is recorded in the comments column.

Revisions to Phase 1 checklists

After Phase 1 (the first trial of using the checklists), there was extensive discussion within the team about possible adaptations to the initial versions and process. As well as revising the actual questions and the response icons, we also revised the instructions for the 'tester', so that they were clearer about not testing children under five, providing practice at responding before starting, being friendly and conversational, recording verbal responses in the comments column, encouraging the child to point if they wanted to etc.

In summary the adaptations that we had made were (impact in brackets):

- 1. It was longer with more questions, better worded, to gain more nuanced data (questions worked better longer checklist was okay)
- 2. The team had worked hard on the Hausa wordings, agreeing on the best translations and practicing using these during preparation time (they were more confident and more consistent in their usage)
- 3. The response choice emoticon rating scale was improved with better images and use of colour and the 'don't know' category was clearer (children responded better)
- 4. Improved tester guidelines. Being clearer that the 'tester' could be flexible, repeating the question, using extra words/signs/pictures to explain, asking the child for their explanation/reasons for their answer (were able to gain responses more consistently from children)
- 5. A column for comments was added (more detailed data collected, although needs even more space)
- 6. We had provided a record sheet for the consultants and steering committee members to use to assess how well each question worked. Unfortunately this was not used as suggested, but reflections on each question were collected during team discussions. The consultants also sent us their written reflections on the process.

Children's responses

Because we changed the wording of many of the questions and increased the number of items (from 10 to 21), it is difficult to make exact comparisons between what the children thought in Phases 1 and 2 and some children did not participate in Phase 1. Overall, there was a general trend towards improvement and more positive ratings about most aspects. However the children had been very positive about many aspects before, so there was often not much room for a higher rating (ratings at ceiling). For example most children again said they liked their schools and teachers and emphasised that they had friends at school. She has a friend that she plays together with in the school. He has many friends, and they play together.

In response to Question 16 (what is the best thing about your school?) they said for example

The way he is being taught. He likes the way the school is kept clean. He loves playing football in school. Learning. She likes the school field.

Adults and other children were usually helpful to them. However there was a variety of responses. Some children were aware of the quantity and quality of resources available (Questions 2 and 3) (classroom and resources)

We are choked on the desk, we sit three on a row. He likes his classroom because he is not being beaten. Child says the desks in the classroom are not convenient. There are not enough pictures in the classroom to help them learn. There are pictures in his class. Mentioned that there are not enough pictures in the class, but he is okay with that.

Sometimes they gave rather mixed feedback, e.g.in relation to Question 4

The teachers help them and teach them perfectly. They flog them when they are stubborn.

and some gave ambivalent answers, e.g. to Question 9 (help from other children?)

Other children don't help him in the classroom when he asks for help/spelling. Other children help during play time but not in the classroom, he helps himself. Other children don't help him, they beat him and he doesn't know why.

However, some of the same negative aspects as previously remained, for example the lack of physical accessibility of the outside compounds, dirty toilets and lack of water.

Question 4 (outside environment)

Mentioned the playground is not safe. The senior pupils stop the child from playing in the playground. He gets angry and goes elsewhere to play. Child said the playground is good but he falls sometimes, children push him down.

He likes the playground because of the swings.

Playground has stones and not suitable, some children litter the playground with faeces.

Questions 5 and 6 (Toilets)

The toilets are not washed. Children defecate around on the floor. The toilets are dirty. He defecates in the bush, he doesn't use the school toilet. The toilets are very dirty. It is difficult for me to get to the toilets easily because of my back. The toilet in his house is cleaner that of the school. There is no water, they fetch water outside.

The children were generally positive about the help they get from adults in school, teachers were specifically mentioned

The teachers punish those who mock children with disabilities. Teachers help her to climb the stairs to her class. Adults in the school protect the child from bullies.

However, there is also still some bullying/teasing/mocking/beating both by other children and teachers and also to some extent by children and adults in their communities. E.g. Question 10 (does anyone tease, mock or hurt you in school?)

No one mocks him. Children mock him, they say he messes up the toilet in the school. Whenever he falls or injures himself, they laugh at him. People mock him. (He was shy to say why). They mock him because his eyes are red.

In relation to inclusion more broadly, Question 13 (Can you join with and do everything that other children do in school?) responses were also quite varied:

He doesn't join others because of his eyes. Children at home send him away when he wants to join them to play. He is not able to do things like house chores, the teachers don't help him. Cos of her leg she is not able to run around the way other children do. I do everything. I'm involved in all activities.

We do everything together.

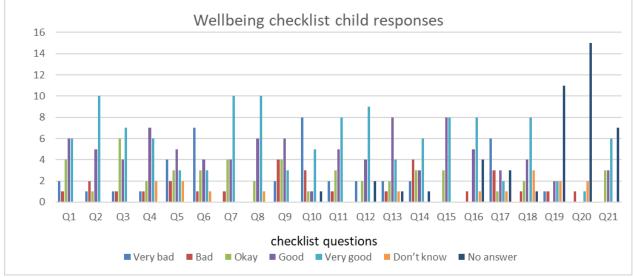
Responses to the same question but in the home setting was also mixed, Question 14 (Can you join with and do everything that other children do in your community/village?)

He plays at home because the children at home are not rough. Mentioned that they show him differences due to his disability. Parents don't allow him to go out.

In response to Question 17 (what is the worst thing about your school?), some responses were:

Doesn't like the toilets in the school. None! He doesn't like the way others in school fight. Not happy with the way others curse him. Don't like the bog tree in the school, there are birds that bite children. Does not like the way she walks to school alone.





Overall then as can be seen responses to most of the questions were 'good' or 'very good'. The questions where ratings were 'bad' or 'very bad' were numbers 5 and 6 (toilets accessibility and cleanliness), number 10 (teasing/mocking/bullying) and number 14 (joining in with everything at home/in community).

Parents' responses

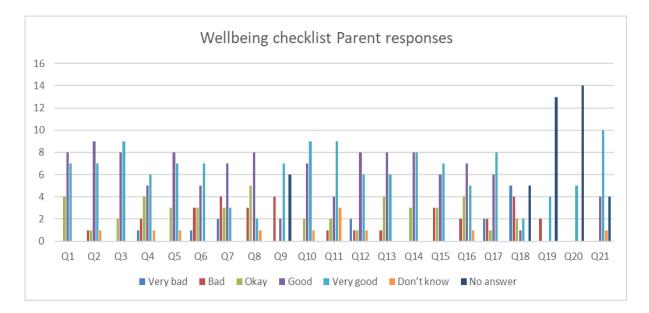
As above it is hard to make very exact comparisons with Phase 1, because of changes we made to the questions. However, in summary the responses were rather

similar, with some signs of small improvements at school (for example teachers now intervene if they see bullying going on) and more welcoming of children.

Interestingly and contrastingly some children had left the schools (either now not going to school or transferring to other schools – according to the headteacher), but there were some new children in the project schools, where parents had moved their child to these schools because they would accept their children and they knew they were shifting to an inclusive approach. So we did not have exactly the same group of parents responding as in Phase 1.

Parents still have concerns about what school can offer their child, whether there are enough teachers and resources and they need more information and support to understand inclusion. Some were anxious about their child's lack of academic progress, and the consultants felt that sometimes they were expressing a need for more individual support and information (and maybe counselling), to understand and adjust their expectations of their child. There were mixed understanding and views about what the benefits of attending school are, apart from pure academic achievement.

There is more awareness about disability and inclusion in the community now and acceptance of children with disabilities and that they should attend school alongside other children. Children were sometimes being included in community activities with other children, but sometimes their impairment made this difficult, or their parents kept them at home, perhaps being concerned about their safety.



Graph 3.2 summary of the parents responses to each question

The parents responses show that they mainly answered with 'good' or 'very good' responses, although there was a variety of additional comments. E.g. Question 13 (is your mind at rest when your child is at school?)

I'm okay because I know he is being taught in school. Sometimes her son complains of back ache which gets her worried when the child is in school. I feel safe when she gets home. The child is always happy. I feel safe because the other siblings are in the school.

However there were some negative ratings in relation to Question 6 (Other parents' attitudes to you as a parent)

They mock the child calling him the boy with the red eyes. Some parents don't bother to ask about the wellbeing of the child. Some parents don't patronise where she sells (mother) her goods due to her child's disability.

and Question 7 (What are the attitudes of other parents and others in the community to your child?)

Some community (members) sometimes help with medications for her son. Parents and other people in the community like the child. Some people are fond of the child, they can hold her and send her on errands. They mock the boy, they call him Albino. No complaints from others in the community.

In response to Question 8 (School physical environment), some felt that

the school playground is not big enough for the children, because the pupils are many.

And their perceptions about the toilets question number 9 were that

the children complain that the toilets are bad and dirty.

More generic questions in the second half of the checklist were answered in a mixture of ways and sometimes lead to longer discussions with the testers. E.g. Question 15 (Is your child happy and comfortable at home and in the community?)

The child is not happy with the way people mock him. The child is happy but not perfect. There are difficulties.

It's not bad.

Previously the boy is always being mocked by others but there is awareness now and a lot has changed.

and Question 18 (Is there anything you worry about in relation to your child). This last one did not require a rating as it was an open question. The answers given were quite varied.

The parents seemed to appreciate the opportunity to discuss their child's wellbeing in detail and a variety of topics arose, ranging from safety concerns, health and educational progress:

Worried about the sons' eyes, when its windy his eyes get teary. Son gets constant headaches mostly in December all the time. Has some empathy for the daughter as a child with disability. Worries about rape, advises child not to play with young boys. The child falls sick frequently. He is worried about the child slow learning.

Their feedback about the checklist itself was also positive. They appreciated the interest being taken in them and their child. Most chose a positive face, and some made a comment

She is happy with the checklist. Important questions were asked especially for children with disability. The questions are okay.

Overall then, the checklists provide a systematic but also flexible way to ask both children with disabilities and their parents about their experiences at school and at home/in the community and provide a picture of the wellbeing of the child and parents and also about how well inclusion is working.

4. Analysis and discussion

4.1 How the checklist questions and process worked for children: positive and potentially problematic aspects.

Overall the team felt that the whole process and the checklist itself had worked much better this time. We were worried that increasing the number of questions might make it too long for some children, but this was not usually the case. The children enjoyed the individual attention and were mostly attentive and responsive.

Noticeably, as in Phase 1, they did respond overwhelmingly positively to most questions. This may be because they are genuinely happy with everything about going to school (being able to attend itself is seen very positively). However, reflecting more critically, they also have very little idea of what improvements could be made or what a really model inclusive school would be like. Additionally it may be that in the Nigerian culture (particularly more rural settings), in the context of being asked by an adult and in a school environment, the children are unused to being critical or asking for anything different. Thus their default answer (which would be seen to be polite) was to rate things positively. This is a form of 'courtesy bias' which is anyway common especially in in-person data collection but is probably exacerbated for children where the power hierarchy between them and adults is steep.

4.2 How the checklist questions and process worked for the parents: positive and potentially problematic aspects

An initial challenge experienced by the research team was that more parents who had children with disabilities in these schools wanted to participate than the research team had capacity to deal with. They perhaps regarded participation in the research as a way to express grievances, and as such were keen to join in. However, time and resources available meant that not all parents could be included in the sample. This suggests a disconnect between the demand for this type of investigation from the parents of children with disabilities and the undertaking of research focused on 'user-centred' aspects of disability inclusive development.

For the parents that did participate, one challenge that the research exposed was that in general many of them had relatively low expectations in terms of inclusion. They had no 'benchmark' against which to assess their children's experiences. As such, they may not be aware of what inclusive education could and should be like. One of the researchers stated that people's expectations are low, and they are just grateful for somewhere that the child can go - the fact that the child can go to school...if I raise my expectation...I am not being grateful.

One potentially problematic aspect which is relevant to these tools, but related to this type of research in general, is courtesy bias. In this case parents may either overemphasise positive aspects of what is experienced by their children, or downplay negative aspects, in order not to upset anyone. As one of the researchers explained,

Some people don't want to criticise...They don't want to say something bad.

They may be concerned about the consequences for their children if they do criticise the school or the education system.

However, some parents found participating very empowering. One of the researchers reflected that the checklist provided

the opportunity for emotional expression but also allows respondents to let out feelings while giving them the sense of power that they are making a difference by speaking out.

This reflection resonates with ideas about emancipatory research, where the methodology selected can result in knowledge production that can result in benefit to disadvantaged people and promote emancipation. Further research could explore how the use of such tools are relevant to this theme in more detail. To elaborate on this point, one of the researchers relayed what one of the parents had said by paraphrasing,

I am sure that what I am saying will make a difference not only for my child but other children, making their life better.

For the responses of some parents the researchers noted that the body language of the participants did not match what they said. The parents were reminded that they should feel free to explain exactly what is happening in school and in the community. The researchers recorded responses such as "It's okay" but their faces suggest it "can be better". This suggests that that parents are resigned to accepting the current situation as it's better than nothing.

The checklist was found in general to work well, but there were some incidents where parents pointed to one symbol on the scale but then retracted this selection with their response. As one of the steering committee members pointed out,

Some respondents verbally would answer a different thing but when asked to point at the object which represent their responses, they will point at an opposing object.

This suggests that they did not fully understand the purpose of the scale or how it was intended to be used. However, for some participants the researchers reported that they gave both positive and negative responses in answer to a particular question, after which they didn't know where to point on the scale. For example, in response to the question about the way the teachers treat their child in school, one participant is paraphrased by one of the researchers as responding,

the teachers are trying, they invite us to see the progress of our children, but they do not have enough teachers to teach them. Most times the teachers are changed, posting them to other classes.

In this sense, the checklist was found by some participants to be restrictive in terms of representing their experiences. In some cases, the participant pointed to the point on the scale that they felt was most representative of their position but felt that this response did not fully reflect their answer. It was therefore a compromise for them and their verbatim comments often tell us more than their rating scale response. This illustrates the disadvantage of asking respondents to provide a single (essentially quantitative) response to a complex question, about which they may have a number of conflicting responses.

4.3 Other aspects which arose in the teams' analysis and reflections

The research team reflected that the data collection was quite time consuming (20 to 30 minutes per participant). This criticism could be levelled at many more purely qualitative approaches seeking for in depth reflections, which would in fact take even longer! In this context, the research team reported that some of the children started getting distracted, while the parents had a lot to say. As one researcher stated,

Parents expressed themselves fully, were happy at the opportunity to speak on their experience.

This is perhaps due to them rarely being asked for their opinions and views on their children. One of the researchers explained that engagement with the checklist provided

emotional relief for the parents.

The parents of children with disabilities were very keen to participate and once given the chance provided a lot of detail in their answers.

5. Conclusions

In conclusion we can certainly say that the process of developing the checklist, using participatory, inclusive and child-friendly approaches, in collaboration with the children with disabilities and their parents was successful. As well as being enjoyable for the participants, it provided us with robust reasons for including many of the items on the two lists of questions. During the revision between Phase 1 and 2 we did change some wordings and added some items in order to make the questions more specific and to dig deeper.

The extra time spent on fine-tuning the translations to Hausa and for the consultants to practice the process was definitely worthwhile and improved the whole procedure. We feel that the checklists are still 'in development' and would need further refinement before they could be rolled out more widely. We have deliberately resisted going down the route of trying to standardise these tools against other similar ones, as there are not clear comparators. These are very much designed to collect subjective ratings of the children and parents, and importantly also their verbal comments, which are as important as the quantitative rating scale. It is then a hybrid or quanti-qual tool.

However there is potential to use this tool on a bigger scale, when shifts in ratings for whole groups of children and parents could be analysed statistically. In contrast it could be used to track changes for individual children and parents over time or with small groups (e.g. in one class or school), using it more qualitatively to monitor change in inclusive practice and subjective experiences of inclusion and wellbeing. The checklists do show that changes in understanding and practice of inclusion for children with disabilities is happening in the project schools, though more work will be needed to cement this in the current schools and roll it out to others. The children with disabilities themselves and their parents are glad that they are going to school, however there are some aspects which still need attention to improve their experiences and outcomes, both academic and social.

6. Future Plans

After two phases of piloting and refining the checklists, we recognise that while they offer an innovative way to assess how children with disabilities and their parents perceive their wellbeing and inclusion in school and society, they could be further strengthened and developed to make them more effective in future.

An illustrated version, particularly of the children's checklists may make it more accessible for children with communication and/or learning difficulties. Having pictures associated with each question may assist them to understand and strengthen their participation. Ideally these pictures would be culturally and contextually appropriate. To achieve this, an artist or designer from Nigeria (or wherever the tool is to be used) could be engaged.

While the tools were shown to work in Nigeria, it would be good to test in other contexts or countries, either in the region or beyond. In addition, returning to Jema'a to gather further data would allow for further longitudinal analysis.

Relating to the design - it was suggested that the tool could be formatted in landscape orientation, as opposed to its current portrait orientation. This would provide more space to record the comments from participants and where possible verbatim quotes, which would strengthen the recording of lived experiences and opinions.