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# 8

# BUILDING A CAPABILITIES FRAMEWORK WITH LEARNERS FROM HIGH-POVERTY NEIGHBOURHOODS

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Children and young people from high-poverty neighbourhoods are key stakeholders in the debate on improving educational practice and developing local capacity for sustainable change. However, they are rarely invited to participate in any consistent way. The capabilities approach (CA) is a philosophy that can help to focus our efforts to engage with and empower learners to contribute consistently to debates on policy and practice. By conceptualising wellbeing as multidimensional and promoting dialogue with disadvantaged groups, the approach can be used to build an evaluative framework to measure action for change according to youth-led goals.

Whilst this approach has been widely operationalised as a policy evaluation tool, there is little existing evidence of its use with children in group work settings. In this chapter, we demonstrate how applying the capabilities approach in schools can build a coherent, pupil-led framework for conceptualising and taking action on wellbeing. Such an approach can explore what children and young people value in their lives within and beyond school, generating a framework for action.

With this as the agenda, we report the findings of a study carried out within the Children's Neighbourhoods Scotland (CNS) programme, explained in Chapter 7, that has used the CA to inform a series of facilitated discussions with children aged ten to fourteen. In so doing, we outline a CNS capabilities research tool developed in collaboration with schools and present the resulting local framework for action.

Our findings present the wellbeing priorities of learners from high-poverty neighbourhoods. We use these to demonstrate how the CA can contribute to achieving greater equity in education systems by giving learners the space to think holistically about wellbeing. In so doing, we aim to demonstrate the nuanced and valuable contribution that learners can make to addressing child poverty and its effects on education in the widest sense.

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## Contexts for the study

Children and young people living in high-poverty neighbourhoods face significant barriers in relation to educational equity. Factors such as poor housing, food insecurity and 'disadvantaged neighbourhood' are associated with poor educational outcomes, as well as emotional and behavioural issues (White, 2018).

As noted in Chapter 7, one in four children in Scotland are currently living in poverty, with this figure likely to deteriorate following the COVID-19 pandemic as families have to cut back on food, and may fall behind on rent and household bills payments (Bynner et al., 2020). There is broad agreement that the causes of poverty require a 'whole system' approach (Public Health Scotland, 2020) to deliver sustainable change, working collaboratively across communities and involving a range of different stakeholders. In what follows we argue that empowering young people as key stakeholders in this process is a vital step for promoting educational equity within educational systems.

In 2018, the Scottish Government published their Child Poverty Delivery Plan, 'Every Child, Every Chance', which highlighted a commitment to mitigating poverty and improving quality of life for children and families, including the funding of Children's Neighbourhoods Scotland, a place-based approach to improving the wellbeing of children and young people in high-poverty neighbourhoods.

Alongside action on child poverty, Scottish Government has expressed a range of policy commitments to ensuring the children and young people's voices are heard in the decisions which concern them. Following the United Nations Convention on the Rights of the Child (UNCRC) Article 12(1), Scotland has enshrined in law the obligation for the state to involve children in decisions affecting their lives in Children (Scotland) Act 1995, Children and Young People (Scotland) Act 2014, and most recently, with the Children (Scotland) Bill in 2020.

Whilst consensus has built around the need to include children's views in addressing public policy challenges, progress with implementation is less clear. In particular, the extent to which children's rights translate into genuine changes to institutional power relations remains to be seen (Coburn & Gormally, 2019, p. 24). Although the discourse on children's decision-making has become formalised through legislation, the impact of these changes in terms of educational equity have yet to be realised.

Children's Neighbourhoods Scotland takes a child-led approach to tackling child poverty by supporting children to gain influence over local policy decisions, working with them to generate wellbeing goals and take action to achieve these (Bynner et al., 2019; Brunner & Watson, 2015). By drawing on the capabilities approach (Sen, 1979; Nussbaum, 2011) to identify children and young people's primary concerns, we aim to act as a facilitator for participation, collaboration and change in educational systems.

Education is considered a cornerstone of recovery following the COVID-19 pandemic, with the physical, mental and emotional wellbeing of children and young people highlighted as a key priority for education authorities and teachers.

The CA acts prospectively by articulating learners' wellbeing aspirations and offering a framework for evaluating – and shaping – the systems and resources offered to them.

## Concepts and challenges

The CA aims to address social justice concerns by generating dialogue on wellbeing with those who are directly experiencing inequalities. The result is a framework of wellbeing goals based on what each person has 'reason to value'. The CA is both prospective and evaluative (Alkire, 2008), exploring the dimensions of wellbeing, and using this to evaluate the policies ad resources which support or hinder achievement of goals.

Sen and Nussbaum developed the CA in response to concerns that the dominant mode of measuring a nation's wellbeing focused solely on economic growth or on 'happiness'. A focus on 'those things that intrinsically matter' (Sen, 1992) rather than the means to achieve them, recognises that freedom and agency are vital aspects of the achievement of social justice.

Nussbaum (2011) has developed a 'minimum core' set of *capability domains* or *goals*. These are: life; bodily health; bodily integrity; senses, imagination and thought; emotions; practical reason; affiliation; other species; play and control over one's environment. Nussbaum's core capabilities represent the minimum requirements for a life lived with dignity, with all domains needing to be met. As an 'evaluative space' rather than a well-defined theory, the CA is usually combined with other theories, such as equalities and human rights, health inequalities or anti-poverty theory. To ensure rigour, local deliberation can be combined with national and international standards, such as with the Equalities Measurement Framework (Alkire et al., 2009; Burchardt & Vizard, 2008) (see Table 8.1).

Each capability domain is achieved through a series of practical 'functionings'. The capability domain defines what a person has *freedom to choose*, while the functioning represents *what they actually choose* (Kelly, 2012). For example, a capability domain might be the opportunities a person has to maintain good bodily health, such as access to nutritious food and health services, while the functionings represent the actions needed in practice, such as eating well and having access to suitable exercise. Within each capability domain, there is scope to explore a variety of functionings.

## Conversion factors

A core principle of the CA is that people have different abilities and resource requirements in order to achieve goals (Robeyns, 2017, p. 45). These resources are referred to as *conversion factors*.

Analysis of conversion factors recognises the multi-dimensional nature of inequality and the need for convergence across a range of social policies to address and resource the necessary changes. Conversion factors offer detailed scrutiny of

**TABLE 8.1** Capability domains from the Equalities Measurement Framework (Alkire et al., 2009)

| *CAPABILITY DOMAINS* | | *Description* |
|---|---|---|
| 1. | Lifespan | Able to live a normal length human lifespan. |
| 2. | Health | Able to have a good life, including nourishment and shelter. |
| 3. | Bodily safety and security | Able to live in physical and bodily security. |
| 4. | Identity, expression and self-respect | Able to be yourself, express yourself and have self-respect. |
| 5. | Individual, family and social life | Able to enjoy individual, family and social life. |
| 6. | Education and learning | Able to be knowledgeable, to understand and reason, and to have the skills to participate in society. |
| 7. | Standard of living | Able to achieve a good standard of living including food, clothing and housing. |
| 8. | Productive and valued activities | Able to engage in productive and valued activities. |
| 9. | Participation and voice | Able to participate in decision-making and make decisions affecting your own life. |
| 10. | Legal protection | Able to know the law will protect you and treat you fairly. |
| 11. | Play | Able to laugh, play, enjoy recreational activities. |
| 12. | Natural world | Able to access and live with concern for animals, plants and the natural world. |

the micro-, meso- and macro-level factors which prevent or enable wellbeing and thus provide focus for policy makers on the actions required. The analysis of the positive or negative influence of conversion factors is a helpful tool in understanding the barriers and enablers to people achieving their chosen values. These are:

- **Personal factors** – the resources held by an individual, such as income, education or social relationships;
- **Social factors** – including public policies, social norms or power relations, but also resources offered at a neighbourhood level in the form of schools, health services and youth activity; and
- **Environmental factors** – these come from the physical environment in which an individual is living.

The CA approach draws on the insights of young people themselves and on the changes that matter to them in the context of their lives and communities. However, understanding conversion factors also requires the insights of 'systems actors' who work at a neighbourhood or regional level in services such as education, health and social services, and third sector provision. In this sense, CA leads

logically to a collaborative inquiry approach – generating new evidence from research with children and young people, and working with systems actors/stakeholders on new policy innovations within education systems and other relevant areas of policy.

## Using a capabilities approach

Capabilities scholarship highlights the importance of locating children and young people's voices at the centre of any strategy for understanding the dimensions of their wellbeing (Biggeri, 2007; Biggeri & Santi, 2012). With the selection of appropriate research tools, children and young people of all ages are capable of expressing what it is they value and why. The act of listening also acknowledges children's autonomy, agency and critical thinking skills (Biggeri et al., 2006).

Dialogue and deliberation are central to the capabilities approach. Nussbaum suggests that practical reasoning is a key functioning that underpins all others (1988, pp. 179–184), while Sen repeatedly calls for debate and deliberation when considering the central freedoms of a society (1999; 2009).

Analysis of capabilities work with children and young people suggests the use of participatory, child-centred research methods of the sort mentioned throughout this book, to ensure that children and young people of all ages, abilities and backgrounds can be full participants (Garcia & Ritterbusch, 2014). These may include reflective materials, written or spoken text, pictures and videos, and could take place with a variety of participants, including children and young people themselves, parents, teachers or support workers. The participatory practice of youth work also offers other creative techniques to inform research. Informal education, as well as being by nature voluntary, draws on a wide range of creative methods such as drama, storytelling and visual arts, as well as games to explore issues.

In the main, criticisms of the CA focus on difficulties in its application. For example, criticism of operational challenges highlights Sen's reluctance to define a definitive set of capabilities (Sugden, 1993), as well as potential disagreements over the relative value of different domains, making it difficult to use the CA for interpersonal comparisons (Beitz, 2009). These have been countered by Sen's argument that there is considerable agreement over domain values. This would appear to be affirmed by research on the 'top six' dominant capabilities (Wolff and De-Shalit, 2007), and by research on commonalities among what is seen to constitute 'a good life' across urban and rural populations (Clark, 2005).

Another considerable challenge is the informational requirement, both in data generation and analysis. The evaluation of wellbeing goals necessitates data on multiple functionings, which may then need to be analysed across the three conversion modes (personal, social and environmental) and also in terms of wellbeing and agency. Challenges also reside in the development of a framework that is robust but allows for meaningful local deliberation. The testing of plain language is a key consideration in developing a framework appropriate for use in a local context (Lorgelly et al., 2008). Other criticisms include concerns that the CA may be overly optimistic in underplaying the effect of political power on decision-making

(Walby, 2012; Qizilbash, 1996) with implications for how we define empowerment and equity.

Sen (1994) recognises the complexity and challenge of operationalising an approach which values pluralism at its heart but contends that 'the search for an approach that would be at once *both* 1) informationally *sensitive*, and 2) *informationally undemanding* is unlikely to be successful' (p. 337).

With these issues in mind, we turn next to discuss how we designed a research tool for use with learners in high-poverty neighbourhoods that would enable them to contribute meaningfully to a dialogue on educational equity and wellbeing.

## Designing the research process

When designing the capabilities research tool for CNS, our aim was to enable young people from high-poverty neighbourhoods to voice their priorities for wellbeing by facilitating dialogue on wellbeing that was meaningful, critically engaged and enjoyable. In particular, we wanted to create a framework of wellbeing priorities that offered clear direction and could open dialogue with policy makers. Bearing in mind the criticisms outlined previously, we were conscious that too much information might obscure learners' goals and create unrealistic expectations of delivery. We were also mindful of our own resource constraints, as a small research team working across six neighbourhoods in Scotland.

Phase 1 of the research highlighted the importance of taking the time to build trusting research relationships with learners. Schools were understandably concerned that researchers would come in with the purpose of harvesting data, leaving little legacy from the interaction with participants. We wanted to ensure participants had the opportunity to develop research skills and become co-researchers in the study, and potentially, within their own schools and communities. We found that this process takes time, patience and a creative approach to sustain interest and build collective skills.

After trialling the use of open questions, such as 'what does a child need to achieve her/his potential?' we discovered that for young children, such questions were too broad to gather detailed data in our timescales, and whilst useful in setting the scene for research, did not support children to drill down into the detailed dimensions of wellbeing. We therefore made the decision to adapt the capabilities set developed by the Equalities Measurement Framework, since many of the domains mapped closely to the Scottish Government's 'Getting it right for every child' wellbeing policy and provided a useful starting point for research. During Phase 1, we tested the language of the goals with children, and made adaptions to make them meaningful to youth participants.

## The capabilities research model

The CNS capabilities research model (see Table 8.2) was developed in collaboration with schools, reflecting concerns that researchers should take the time to build

**TABLE 8.2** The CNS Capabilities Research model (Ward et al., 2019)

*A. EXPLORING CAPABILTIES AND DEVELOPING RESEARCH SKILLS*

| | Learning component* | Purpose and methods | Skills development |
|---|---|---|---|
| 1. | **Introduction to Capabilities Approach** | To introduce the Children's Neighbourhoods programme.<br>To introduce the Capabilities Approach and why it is a useful way of measuring wellbeing in neighbourhoods. | Critical thinking. |
| 2. | **Mapping the community** | To explore the local neighbourhood using visual research methods.<br>Research method: Mapping your neighbourhood. | Working collectively. |
| 3. | **Mapping the community (2)** | To explore the local neighbourhood and what makes it unique using visual research methods (2).<br>Research method: Neighbourhood walkabout/narrative photography. | Critical thinking.<br>Working collectively. |
| 4. | **Exploring identity** | To explore what is important in supporting wellbeing.<br>Research method: self-portraits. | Self-reflection and confidence-building. |
| 5. | **Vote on priorities** | To choose the key priorities for action for children and young people in this neighbourhood. | Dialogue and democratic decision-making. |
| 6. | **Understanding local issues** | To explore the complexities of a key local issue or priority through a structured debate.<br>Research method: gathering data and participating in debate.<br>Group discussion on capabilities priorities 1. & 2. | Debating and dialogue – understanding and presenting complex information. |
| 7. | **Uncover local stories** | To explore the rich history and experience of local people in our neighbourhoods<br>Research method: storytelling.<br>Group discussion on capabilities priorities 3. & 4. | Listening and analysis. |
| 8. | **Explore digital media** | To research digital resources of community information.<br>To explore digital research tools.<br>Research method: online research/ digital tools.<br>Group discussion on capabilities priority 5. | Digital awareness.<br>Analysis skills. |
| 9. | **Early Findings** | Analysis of small group priorities and capabilities framework | |

**TABLE 8.2** (Cont.)

*B. CONDUCTING RESEARCH (CO-RESEARCHER PROGRAMME)*

| | Learning component | Purpose and methods | Skills development |
|---|---|---|---|
| 10. | **Develop research methods** | To develop understanding of different research tools, their potential uses, strengths and limitations. To develop a research tool(s) to undertake 25 per cent sample of school/group population. (Optional: to undertake qualitative research, e. g. focus group discussion). Research methods: questionnaire; focus group facilitation | Dialogue and deliberation. |
| 11. | **Fieldwork** | To undertake research with a 25 per cent sample of the school/group population. Research methods: questionnaire; focus group facilitation. | Co-researcher skills: presentation, listening, organisation. |
| 12. | **Analysis** | To analyse research findings and draw out common themes. Analysis of questionnaires; analysis of group dialogue transcripts. | Analysis: simple statistical analysis. Analysis of focus group discussion. |
| 13. | **Presentation of findings** | Presentation of overall school/group capabilities framework and discussion of next steps based on research. Design and production of poster. | Presentation skills. Dialogue on next steps. |

trusting relationships with participants and that taking the time to build dialogue over a period of weeks will lead to rich, nuanced qualitative data. The study drew on approaches from the non-formal, community-based education sector, recognising its role in supporting children and young people from high-poverty neighbourhoods to remain engaged in learning by offering safe spaces and trusting relationships (Mackie, 2019). Key principles underpinning participative practice, such as critical dialogue, co-creating knowledge based on lived experience, and challenging power relations are shared by participative youth work practice (Davies, 2005) and community-based critical pedagogy (Freire, 1972).

The model offers thirteen components, with the aim of building trust and creating the space for thinking and dialogue around the concepts and contexts for wellbeing. The research took a group work approach, using a range of strategies to support young people to initiate dialogue in groups. The initial three sessions worked to build trust through creative and fun activities common to youth work settings. These include self-portraits, creative mapping, visualisation and gathering local stories. Self-portraits explored personal identity, encouraging young people to reflect on what is most important to them and consider how others see them. Mapping examines young people's experience of place, visualising their day-to-day journeys and the significant places in their local community. Gathering family

stories highlights the value of local experience and knowledge in defining identity, and encourages the exploration of rich, qualitative data.

Each of these activities was adapted to suit the needs of the specific groups with which we worked. We encouraged the exploration of complex issues around identity and belonging with older groups through discussion, whereas we encouraged younger participants to reflect on their relationship(s) to space through the medium of their choice such as drawing, list-making or play.

Alongside creative activity, groups engaged in a series of games designed to support positive social interaction and build trust. These activities build awareness of young people's relationship to the neighbourhood by considering the spatial dynamics and geographies that influenced them, and how these interweaved with social relationships (Massey, 2005; Soja, 1980). Games that supported this learning included 'Spectrum of Difference', 'Just a Minute' and meditative activities using visualisation. The group then made a visual map, which explored their key relationships and journeys, the resources they accessed and their perceived gaps in local provision and facilities. Further games drew upon debating and improvisation skills to develop critical thinking, creative responses, and build positive social relationships through group work in teams.

Making space within the workshops for games and play engendered a sense of fun and shared experience between the group and the research team; it delineated the activities as separate and more fluid than curriculum-based classwork. These games drew on creative arts and social justice practitioners, such as Augusto Boal's 'Theatre of the Oppressed' (2000 [1974]). The aim in such work was to use creativity and group work to engender collective action in areas of inequality.

The programme then moved to open dialogue on wellbeing goals, initially using a single, open question to avoid confusing language or pre-empting capabilities domains (Biggeri, 2007): 'What are the most important opportunities a child or young person should have in her/his life?' Drawing on the set of wellbeing goals generated by the Equalities Measurement Framework (Alkire et al., 2009), participants were invited to vote for their 'top five' priorities for wellbeing, first as individuals using a simple survey, and then as a collective group exercise using the 'Open Space' method. The 'top five' domains were amalgamated with individual votes to form the basis for in-depth group discussion.

The research tools drew on recommendations from Biggeri (2004, 2007) to open a reflective space where children and young people were invited to consider what would be important to them in the future, asking them to 'talk and draw' key factors in their future wellbeing. We then aimed to build confidence gradually, working initially in pairs, then threes and finally, mini groups of six. Each mini group was asked to convene dialogue sessions on the wellbeing priorities, with learners alternating the role of host to pose a series of questions:

- Why is the wellbeing priority important and what would it look like to achieve this goal?
- What are the perceived barriers to achieving this wellbeing goal?
- What are the perceived enablers to achieving this wellbeing goal?

Groups then moved on to consider what action might be taken to achieve the five priority goals, working initially in pairs and then joining into groups of four to explore and present their ideas for action research projects.

The CNS model aimed to develop learners as co-researchers by integrating research skills training within the programme. Once the qualitative focus group research was complete, co-researchers carried out a school-wide survey, based on a 25 per cent sample of students. Findings from the focus groups and the whole school were amalgamated to form a capabilities framework for the school.

The presentation of the framework back to the school offered the opportunity to begin exploring ideas for action on the wellbeing goals that children and young people had identified. Through a process of collaborative inquiry, CNS aimed to support children and young people to act on these wellbeing goals with the support of relevant stakeholders. For example, the group might choose to hold a citizen's jury or school panels, with young people invited to question stakeholders on specific areas of their work that relate to achieving wellbeing goals.

As concerns the informational requirement of the CA, although we have generated a number of different artefacts, such as community maps, self-portraits and stories, we have found that distilling data into a framework of 'top 5' wellbeing goals, accompanied by key functionings (actions), provided a workable means of sharing the findings with stakeholders and policy makers. Further research is required into how the artefacts created with children and young people might be used to convey the feeling and tone of the discussion and the lived experience of our research participants.

A central element in the participative research practice was the role of the facilitator. Each group was supported by two staff members: one academic researcher experienced in participative practice, and a CNS local coordinator who was based in the neighbourhood as a community animateur. These dual roles aimed to bring together a unique combination of research expertise, the stimulation of dialogue through group-work practice, using tools such as questioning, widening the discussion, supporting, clarifying and enabling. The use of games and creative practices developed by the local coordinator aimed to create a safe, fun space within the classroom, different from the atmosphere and practice of the everyday classroom, with pupils supported to take a lead in dialogue and the convening of groups.

## Generating a capabilities framework

Following initial discussions, schools were invited to propose participants according to which learners they thought would benefit most from the activity. Each school identified a small group of ten to twelve children or young people to participate in in-depth research and co-researcher training. The recruitment of groups differed across schools: some bringing together mixed-age pupil council representatives; others putting forward pre-existing leadership or pupil evaluation groups, or classes of pupils with additional support needs.

The capabilities framework was generated with children and young people from qualitative data across two schools (one primary and one secondary school) in the same neighbourhood. This is a Children's Neighbourhoods Scotland site with high levels of child poverty.

Wellbeing priorities were amalgamated from each of the two school frameworks produced to create a neighbourhood framework, which includes seven key priorities for children and young people's wellbeing. The priorities that young people had reason to value were having a job, safe and warm place to live, food and clothes; having good relationships with family and friends; feeling safe; being healthy; feeling happy and confident; living a long life; and being able to learn. In what follows, we explain what each of these involve.

**Having a job, safe and warm place to live, food and clothes**. Young people chose standard of living as the primary goal for wellbeing, which they expressed as 'having a job, safe and warm place to live, food and clothes.' Standard of living offered a vital source of stability, underpinning all aspects of wellbeing. For example:

> *If they've got like a stable, happy life then they'll have like an opportunity to get a better education, go to better work, maybe have a better family because like if you want to start a family, you obviously want to have like a good job and everything to actually start it well. So, it'll give you more opportunities in life in general so that you can, will make you happier.*
>
> *(Lena, aged 14)*

Stability was noticeable by its absence:

> *If you can see like a lonely person, like they've maybe not got the right amount of food, they've not got the right amount of clothes, they've not got a home, they probably don't feel safe, they don't have a job … you can kind of see it and it can really affect how they act as well.*
>
> *(Rachel, aged 14)*

Having personal resources was protective, supporting independence and future success:

> *It'll make you more happy because you'll be independent, and you know you can do stuff by yourself without getting other people to do things for you, to help you. So that'll make you more confident and you'll be a happier person in general.*
>
> *(Lena, aged 14)*

> *A good standard of living helped young people to achieve employment more easily and is "the key to a good life and it's the key to being healthy and it's good for your mental health as well".*
>
> *(Rachel, aged 14)*

> *Achieving success in life meant that young people could reciprocate support to others later in life: "If you have a good job you can give back to your parents who gave you that from like your early childhood, in your childhood. So, I feel like that's important".*
>
> *(Rachel, aged 14)*

Young people's focus on standard of living as the primary goal for wellbeing demonstrates their recognition of socioeconomic circumstances as a key indicator of living a life of dignity.

It is notable that, while most of the other capabilities goals are represented in the Scottish Government's 'Getting it right for every child' policy (such as health, education, social relationships), standard of living does not feature. The inclusion of socioeconomic goals within the capabilities approach allows young people to choose to address macroeconomic concerns as well as behavioural and relational ones. This is a valuable and nuanced outcome, since academic research suggests that the causes of inequalities are socioeconomic and will therefore only ever be solved in part by behavioural and relational approaches (McCartney et al., 2013).

The young people involved in this research held high aspirations for employment but pointed out that they often did not know or understand the pathways to achieving their employment goals. Children as young as ten reflected on their lack of knowledge of career possibilities. For example, some were interested in working with animals but only knew of the jobs of vet or zookeeper. They wanted to know what other roles might be available and how to gain access to them. These findings suggest that children's aspirations are strong, but that the conversion factors may not support their achievement through the provision of appropriate labour market opportunities or job-relevant information and skills, and they often feel ill-equipped to achieve them.

Young people were also keenly aware of the impact of inequality on personal resources, and how adverse experiences in childhood could impact mental health and ability to achieve. They recognised the 'corrosive disadvantage' (Wolff & De-Shalitt, 2013, p. 161) caused by multiple difficulties, including the effect on mental health of not being able to provide for oneself. A lack of independence was considered disempowering, taking away people's opportunity to live a life of their choosing.

**Having good relationships with family and friends**. Children saw positive relationships with family as central to wellbeing. Good family relationships '*help you*' (Eddie, aged 10), '*keep you safe and protected*' (Tyler, aged 10) and '*keep you company*' (Hamish, aged 10), while reciprocal care means '*you can show love to them*' (Chris, aged 10) and '*they look out for you as well*' (Tyler, aged 10).

They also saw family relationships as a place to be treated as special: '*My family, they cheer me up, they make me happy and then they often treat me*' (Eddie, aged 10). Being able to be yourself was important, and both family and friends were a protective factor in this regard, instilling self-confidence in young people. Young people who did not feel good might struggle to be themselves:

> *You could come across as this happy, bubbly person and on the inside, you could just really feel really sad and depressed.*
>
> *(Lena, aged 14)*

Poor self-image also resulted in a difficulty in building social relationships:

> *If you can't love yourself how are you going to love others? Like it can not only have an effect on you, but it can have a massive impact on your family and friends.*
>
> *(Jemma, aged 14)*

Friendships were also important, helping children to feel happy and included:

> *They invite me to most things and they make me laugh and smile all the time.*
>
> *(Eddie, aged 10)*

> *Friends also helped children to feel understood: "A good friend is where like they can talk to you, they can understand you and can help you as well, and don't leave you out".*
>
> *(James, aged 10)*

Young people keenly understood the importance of positive, strong relationships but also recognised that adults were not always equipped to offer what they needed, especially during the teenage years. They also recognised their own vulnerability in reliance on adult capabilities and were able to point out that adults often need support to forge good relationships. They had a range of suggestions to improve relationships, including 'how to talk to your teen' sessions offered through school or community.

Despite young people seeing relationships as the second most important priority for wellbeing, they did not have a clear means of communicating their concerns in a way that would result in action being taken. In other words, they were able to articulate what needed to change but did not know how to influence the conversion factors that could support action on this (such as being able to contribute to local strategy on mental health and wellbeing, or engage with strategies for parent and family support). This resonates with Dixon and Nussbaum's (2012) claim, that young people's rights are not adequately conceptualised due to the power differentials at play between children and adults. Dialogue around which wellbeing goals learners had reason to value allowed a nuanced exploration of the ways in which children's wellbeing goals interconnect with those of adults.

**Feeling safe**. This was defined in terms of physical and emotional security, safety online, and being able to access counselling and support when feeling unsafe. Feeling safe was perceived as key to achieving all goals, again underlining the interlinked nature of domains to produce multiple disadvantage:

> *It's important to everything. If you don't feel safe, you won't sleep properly; if you don't sleep properly you won't be able to cope with school; if you don't cope with*

*school you won't get qualifications; if you don't get qualifications, you won't get a job.*

*(Alex, aged 13)*

Physical safety was important at home and in the wider community, and was negatively affected by violence. Anxiety about physical safety could prevent young people from going out and affected social relationships by making it difficult to make friends. Violence in the home was described as affecting all areas of a young person's life.

Participants felt that a lack of trusting relationships could be detected in a young person's behaviour. For example:

*If someone is really quiet or they don't want to speak out or they don't go out a lot that's how you can probably tell that they don't feel safe, like they don't feel that they can trust anyone, so they feel like something's going to happen to them if they say something or do something or go somewhere.*

*(Aileen, aged 13)*

*Poor treatment at home might result in a young person lashing out at others: "You could turn out a certain way because someone's treated you a certain way".*

*(Lewis, aged 13)*

Conversely, knowing that there were people that could help offered peace of mind.

Some respondents described some young people as more susceptible to bullying, particularly online:

*Different mind sets can affect it because if you're someone that takes things to heart if you open up a message then it can affect people in different ways.*

*(Anna, aged 14)*

Younger teenagers were thought to be more vulnerable to bullying, with online manipulation considered a particular challenge for pupils in their early teens.

Protective factors for feeling safe were seen as loving family and trusted group of friends; being safe in your own home; able to tell someone if you experienced something difficult online; and being able to deal with mental health problems quickly.

A broad discussion of the concept of safety allowed learners to explore the connection between pragmatic behaviours, such as being able to lock the door, and live in a house where you are safe, with the conversion factors associated with crime and vulnerability.

Some participants observed that certain children and young people will be more vulnerable than others to online bullying, for example. This observation allowed the facilitator to explore the causes of this phenomenon, which drew discussion

back to the importance of strong and trusting primary relationships, and further exploration of the stresses on families that might result in poor relationships.

Young people also were able to consider how issues of poverty or difference might impact across a number of domains, often doubly or triply disadvantaging some young people over others. This detailed exploration allowed young respondents to consider the interconnectedness of seemingly disparate aspects of wellbeing, and how personal, social and structural inequalities impact on their achievement.

**Being healthy**. Mental health was a primary priority, alongside access to healthy food and getting enough exercise and sleep. The concept of mental health was discussed alongside the following domain, 'Feeling happy and confident', producing overlapping themes around the value of social relationships in preventing mental ill health. For the purposes of this chapter, the themes discussed in this section relate to mental health services and pathways, while those discussed in the following section relate to the preventative aspects of mental health that generate feelings of wellbeing and happiness.

The significance of mental health, even for the youngest children participating in our research, reflected awareness of the decline in mental health of young people, in recent years (Scottish Government, 2019;). Whilst there was a keen awareness of the effects of allowing poor mental health to go untreated, young people were unclear how to access clear information on 'what works' if faced with a mental health issue.

Respondents wanted clear, responsive pathways that were tried and tested. They were also aware that waiting lists for counselling support were long – up to a year in many cases – and even counselling support within the school was inconsistent or involved a period of waiting. The gap between what children need and what is available underlines the requirement for a systematic approach to voicing youth concerns. It also highlights the need for a holistic approach to wellbeing that can challenge the silos between statutory services.

**Feeling happy and confident**. Young people expressed feeling happy and confident as fundamental to broader wellbeing. Several young people emphasised the detrimental effect that mental health deterioration has on the ability to achieve other goals. For example:

> *It's a chain reaction. See, if you're not feeling happy with who you are then you don't really feel safe in your own headspace and if you get so far into it that it could affect your health. And then obviously that would lead you to not live a long life. You wouldn't get to do all of the other stuff that's on* [the capabilities list*] like enjoying leisure activities, being able to access nature and animals and pets and you wouldn't really have a good relationship with family and friends. You could be so insecure that you wouldn't want to talk to them.*
>
> *(Lena, aged 14)*

Those who did not have good family relationships were considered at a significant disadvantage:

*If we're not happy and confident, it could lead to all different things … Like depression and all that, because you need your family and friends there to support you, and that'll make you happy, when if you don't have any, you might get like upset and sad and always be like down and not happy.*

*(Joseph, aged 13)*

*The cyclical nature of poor mental health meant that feeling low was exacerbated by finding it "harder to go outside, because you'll be stressed that … someone's talking behind my back … so it can really mess up your mind".*

*(Lewis, aged 13)*

*and by a resulting lack of confidence that can "stop(s) you from doing more things, and then your self-esteem will just go down, and that's just not good".*

*(Alex, aged 13)*

Young people cited bullying as a key barrier to feeling happy, eroding self-confidence and causing isolation. Bullying was often compounded by a young person feeling unable to get help. Discrimination was a significant issue, including racism and cultural assumptions, and using religion to stereotype or exclude people. People with disabilities also experienced discrimination in that '*they always feel like they need help and they may not want that*' (Jemma, aged 14).

Young people – particularly girls – experienced negative feelings when comparing themselves to others. Instagram influencers were cited as an important influence, but comparing yourself to a popular figure could cause poor self-image, with girls thinking '*maybe I shouldn't look like this, maybe I need to look like this and you just don't accept who you are*' (Jemma, aged 14). Media images of women were perceived as attainable through social media promotion, but such images turned out to be personally unattainable and caused unhappiness.

Confidence was a particular issue with secondary school-aged participants. The pressure of societal assumptions and school expectations was perceived as having a strong impact on feelings of happiness and confidence. Having the language to discuss negative feelings was considered critical, and there was a strong will amongst participant groups to address this through peer support networks, if the right training and support was put in place. Peer support was considered preferable to professionalised support for those struggling with confidence or experiencing minor mental health issues.

Using the capabilities approach allowed research participants to explore the phenomenon of happiness as an individual experience that had strong links to relational networks. Working collectively, young people were able to compare the effects of societal assumptions around race and gender and were also able to respond collectively by proposing peer-led solutions. Peer support was seen not only as empowering and sustainable due to being led by young people, but also offered broader protection by making visible the value of supportive friendships.

**Living a long life**. The critical factors for being able to live a full lifespan were diverse and spanned several other domains. Healthy eating and exercise were again cited as important, but more abstract concepts such as 'feeling free' were articulated. With children expressing the importance of '*being a wolf not a sheep*' and being '*your own team*' (James, aged 10). Managing to avoid addictions was considered essential, and secondary aged learners were aware that addictions might develop as a result of poverty and mental ill health.

Several young people expressed concern at global affairs, such as political leaders that were perceived as dangerous or unstable. For example:

> *I wasn't feeling safe in Scotland … things like Donald Trump and that, when all that was going on, because like Kim Jong-un and Donald Trump, I wasn't feeling safe. I wanted to move out the country, like I wasn't feeling* safe at all.
>
> *(Ariana, aged 13)*

Concern was also expressed at damage to the planet through climate change:

> *See if Greta completes her goal of stopping climate change, I think the world will go back to normal because the sea levels will stop rising and the ice will stop melting, and maybe if some people see that happening and the change, they might just stop littering and kind of realise.*
>
> *(James, aged 10)*

The goal of living a long life again demonstrated the multidimensional aspect of capabilities goals. Discussions on what was important to young people ranged from healthy lifestyles to political stability and climate change. This allowed for young people to articulate concerns across a spectrum of conversion factors relating to individual behaviours, democratic erosion and the power of youth to make a change. Exploring solutions to big issues was an important theme and demonstrated not only that young people were able to make a valuable contribution to serious discussion, but also that they were able to envision innovative ideas and express counter narratives that generated energy for action.

**Being able to learn**. Children and young people valued learning as instrumental to gaining employment, generating an income and thereby ensuring a good standard of living. Gaining qualifications was regarded as key to future employment:

> *It's important to learn so that you get good exam results and you could get a job leading on from that.*
>
> *(Farah, aged 14)*

> *I think it's important to learn things to prepare you for later on in life for jobs and things.*
>
> *(Joseph, aged 13).*

Learning also offered the chance to '*build people skills*' (Farah, aged 14) and supported '*good mental health*' (Aileen, aged 14). Barriers to learning included falling behind in school, non-engagement with support and lack of sleep.

Extra-curricular learning was also highly valued. For some, a more informal environment was more conducive to learning than school:

> *They teach you more stuff that you would learn in school.*
>
> *(Brandon, aged 10)*

Many pupils participated in clubs and hobbies, including coding, football, netball, dance, gymnastics, boxing, swimming, arts and crafts, and Guides/Scouts. These activities were considered a protective factor that supported positive social relationships outside school and helped young people to switch off and recharge their batteries. Barriers included a lack of access to community-based activities due to cost and transport requirements.

The perception of school learning as instrumental to employability may reflect the emphasis on achieving exams but was also associated with the compulsory nature of school. Young people commented on the different type of learning available from the informal sector, and the fact that this engagement was made through choice and on a voluntary basis. Further, the social aspect was seen as integral to informal learning, while social networks were sometimes described as incidental in the school environment. These factors are key principles of youth work practice (Davies, 2005), and contribute to a youth-led learning experience.

The Children and Young People Framework for Wellbeing that is based on these views is summarised in Table 8.3.

## Practising equity

We argue that through a process of trust-building and collaborative action on the issues that are important to learners in high-poverty neighbourhoods, we can begin to challenge the power differentials that prevent young people from participating as valued stakeholders in dialogue on the improvement of educational systems. In particular, listening to the experiences of young learners may help to stimulate new ways of working and foster new ways of working that are grounded in a 'whole system' approach to wellbeing.

Whilst children are increasingly invited to contribute to planning processes in schools, opportunities for them to engage with policy makers at a neighbourhood or national level are few and lacking in consistency. The arenas for community involvement in decision-making are rarely equipped to invite meaningful engagement by children and young people so the brokering of dialogue using the CA is a useful way to begin conversations between young people and those who make the decisions that impact on their lives. By using the CA framework as a starting point to identify key actions for change, we propose that children and young people can be supported to take action on the wellbeing priorities that concern them.

**TABLE 8.3** Children and Young People's Framework for Wellbeing

| *CAPABILITIES DOMAIN* | *FUNCTIONINGS* |
|---|---|
| 1. Having a job, safe & warm place to live, food & clothes | • Enjoy an adequate and secure standard of living including nutrition, clothing, housing, warmth, social security, social services and utilities, and be cared for and supported when necessary; able to afford bills and keep up with payments<br>• Access a job you enjoy<br>• Get around inside and outside the home, and to access transport<br>• Receive tailored support, role play and information in school on employment opportunities<br>• Access local facilities (shops, affordable healthy food, cinema, leisure, clubs and activities) |
| 2. Having good relationships with family & friends | • Get support and help when you need it<br>• Have an adult you can trust and who will pay attention to you; know that someone will look out for you<br>• Enjoy mutually respecting, positive family relationships<br>• Enjoy good communication; be able to make up after an argument<br>• Have and make friends and be able to see them regularly<br>• Able to protect yourself when using technology |
| 3. Feeling safe | • Feel physically safe, in your own home and out and about<br>• Feel safe in school, not being worried about people fighting or bullying<br>• Feel emotionally safe, being able to trust others, friends, parents, teachers<br>• Be able to access counselling and support<br>• Be free from violence and protected from abuse<br>• Feel safe when using technology, not being subject to bullying on social media or online |
| 4. Being healthy | • Attain a high standard of physical health, including access to nutritious food and exercise, and ability to maintain a healthy lifestyle including exercise, sleep and nutrition<br>• Attain a high standard of mental health, with preventative support, supportive relationships and responsive, accessible services<br>• Access to timely and impartial information about health and healthcare options, without discrimination<br>• Live in a healthy and safe environment including clean air, clean water, and freedom from pollution and other hazards<br>• Enjoy a good relationship with the natural world, through access to nature and pets or animals |
| 5. Feeling happy & confident. | • Support to develop and maintain self-respect, self-esteem and self-confidence<br>• Able to address mental health problems early<br>• Able to talk about emotions, as an individual and family |

**TABLE 8.3** (Cont.)

| *CAPABILITIES DOMAIN* | *FUNCTIONINGS* |
|---|---|
| 6. Living a long life | • Access good food<br>• Feel free<br>• Have supportive friends and family to look after you, and not feel lonely<br>• Have pets for companionship<br>• Living on a sustainable planet with sustainable, healthy transport<br>• Be able to avoid smoking and drugs<br>• Receive additional support when vulnerable (e.g. homeless, victim of discrimination) |
| 7. Being able to learn | • Enjoy teaching that inspires you<br>• Access a range of local activity in the community<br>• Access transport and/or outreach provision when required<br>• Address mental health issues early<br>• Receive support for problems in school, including problematic behaviour<br>• Able to get enough sleep |

Drawing on the key features of a community of practice, our work to build trusting dialogue and deliberation with children and young people has the potential to be extended to a wider, mutually accountable working group. By inviting policy makers and implementers to join a collaborative inquiry process with young people, the next step is for CNS to continue to support pupils in using action research to work towards the wellbeing goals that the children have prioritised. Such an environment would value children as competent social agents, whilst also recognising the barriers they face as 'actors with limited and unequal access to action' (Bühler-Niederberger & König, 2011).

## Conclusion

Through this study, we set out to develop research practice that would support children and young people from high-poverty neighbourhoods in articulating their wellbeing priorities. In particular, we aimed to embed practices in the school classroom which could build bridges into the community, both raising awareness and adopting the practices of non-formal education. By taking the time to build trusting relationships with small groups of pupils as co-researchers, the research was able to generate rich and nuanced data on their priorities, barriers and enablers for wellbeing.

This was, of course, a small, in-depth case study based in two schools, within a high-poverty neighbourhood in one local authority area of Scotland. Consequently, the findings are necessarily limited. Further comparative limited research into the wellbeing priorities for children and people, both qualitative and quantitative, would be valuable.

The original research was conducted before the start of the COVID-19 pandemic, but the findings were used to inform local policy on mental health service provision for children and young people during the lockdown period, and to fund ongoing work to map local provision. In addition, the capabilities model is now being transferred online to enable participation with schools that can be continued in the likelihood that ongoing restrictions limit face-to-face contact. A key focus for the future will be on developing action research projects and raising awareness of how children and young people living in high-poverty neighbourhoods are experiencing this dramatic change to their local contexts and their lives.

Despite these constraints, the study suggests that, given the time and space, children and young people can demonstrate that they have valuable views and experiences of wellbeing, and can contribute to addressing the problems associated with poverty (Biggeri, Arciprete & Karkara, 2019). This corresponds with evidence that young people from high-poverty communities are not lacking in aspiration but are unable to access the resources to transform aspiration into outcome (Kintrea et al., 2015).

The capabilities approach offers a common, multidimensional wellbeing framework that represents the wellbeing concerns that children and young people 'have reason to value' (Sen, 1999, p. 285). This has the potential to inform and influence policy makers at local, regional and national levels. Using the capabilities framework as a jumping-off point for social action for change, young people in high-poverty neighbourhoods can engage with the institutions that formulate policy decisions affecting their lives, challenging them to reconsider the conditions under which children and young people are invited to participate in decision-making.

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