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Children and Practitioners as Truth Seekers and Truth Tellers: Innovative, Counter-Hegemonic Approaches to Evaluating National Inclusion Policies

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Abstract: This paper describes and defends the counter-hegemonic methods applied to the investigation of a high-profile national policy for Early Education and Care (ECCE) in Ireland. The policy, the Access and Inclusion Model (AIM) seeks to ensure the full inclusion and meaningful participation of children with disabilities in mainstream, state funded ECCE. It makes a significant contribution to data and debate on how research *about* inclusion can *become* inclusion in the context of policy evaluation. The design of the policy evaluation included surveys, in depth interviews and qualitative case studies of pre-schools and children supported by AIM which were deliberately designed to be counter-hegemonic through the recruitment of practitioners as co-researchers (as expert representatives within a feminised workforce), and the use of a participative method of elicitation that sough the perspectives and lived experiences of inclusion among fourteen children supported by AIM. This method was multi-modal mapping. With a focus on these counter-hegemonic elements, the paper poses questions about how the approach was counterhegemonic in terms of its theoretical underpinning, practical approach, and outcomes. Thematic analysis of the data collected by practitioner researchers for the child case studies showed that the approach did achieve counter-hegemony through the achievement of redistribution, representation, and recognition in both the enactment of the research, and in the reporting of children's lived experience in the study as a whole. However, the extent of counter-hegemony achieved was limited when practitioner researchers were unable to deploy the multi-modal mapping method because of limited time, or because the child was not a speaker of English or was as yet, non-speaking. In a context where policy makers have a preference for positivist and rationalist approaches to evaluating the impact of policies, we assert that research *about* policies for inclusion, should be enacted *as* inclusion and social justice through the deliberate deployment of participatory and counter-hegemonic methods. We also assert that multi-modal mapping holds particular promise for researching the lived experience of inclusion and participation from the perspective of children and argue that more work needs to be done on developing these methods so that they are effective with all children, including those who are non-speaking. Finally, we posit that Fraser's triune model of social justice can be applied as a benchmark for designing and evaluating counter-hegemonic modii and outcomes.

1. Introduction

This paper describes and defends the participatory counter-hegemonic methods used in the large-scale investigation of the implementation and impact of a high-profile national policy for inclusion in Early Childhood Care and Education (ECCE) in Ireland—the Access and Inclusion Model (AIM). The investigation was commissioned and funded by the Government of Ireland via the Department for Childhood, Disability, Equality, and

Youth (DCEDIY). When using the term *counter-hegemonic*, we are referring to the deliberate efforts to resist, subvert, or transform existing norms and power structures. When using counter-hegemonic approaches, researchers may ensure that the voices of marginalised groups, such as young children with disabilities or practitioners working in a feminised workforce like the ECCE, are amplified and then deployed to design more equitable policies and practices. We aim to demonstrate that participatory research methods, specifically *co-research* and *co-production*, have more congruence with the intentions of policies focused on inclusion because they have more meaning and validity. In the context of this paper, where we use the term *co-research*, we refer to the participatory engagement of ECCE practitioners as research partners working alongside academic researchers in the commissioned study. These practitioner researchers (PRs) were actively involved in collecting and interpreting data. When we use the term *co-productive*, we refer to participatory research methods that prioritise the active involvement of participants and collaboration between participants and researchers, specifically, children with disabilities in pre-schools. While acknowledging some constraints, we will argue that our research design demonstrates how research *about* inclusion and social justice can be enacted *as* inclusion and social justice [1], even in the context of a formal independent evaluation of national policy. This paper makes a significant contribution to data and debates on how to evaluate national policies focused on inclusion in two ways. Firstly, it offers theoretical support for researchers and policymakers who want to make claims about the validity and fittingness of participatory methods in a context where cost–benefit analyses, randomised control trials, and 'objective' metrics as measures of impact are preferred and assumed to be more valid and defensible. The second significant contribution is methodological because we provide a full and transparent account of the participatory methods used to achieve a successful evaluation of the implementation and impact of AIM. Through this account, we are also able to make a case for multi-modal mapping as an elicitation approach with counter-hegemonic potential. This paper also describes the challenges and limitations encountered in using such approaches, since these are also of practical interest to the policy and research community.

At this point, it is important to explain more about the context for this study. Ireland's policy for inclusion in ECCE, AIM, was implemented in 2016, and its continuing purpose is to ensure that all children, including those with disabilities, experience full inclusion, and meaningful participation in pre-school. Policy makers in Ireland had recognised ECCE as powerful catalyst for the development of a more inclusive education system and society, but were aware that children with disabilities were not accessing pre-schools as fully as their non-disabled peers. The barriers cited were inaccessible buildings, inaccessible practices, and low levels of confidence about how to include children with disabilities in mainstream ECCE settings. To support the increased capacity for inclusive practices in the ECCE sector, AIM provides two types of additional state subsidisations. These are *universal support* and *targeted support*. Universal support includes state-funded programmes of continuing professional development (CPD) for early years educators focused on inclusive practice. The offer includes a state-funded qualification in leadership for inclusion for practitioners who are in the role of Inclusion Co-Ordinator (INCO). Where settings have a qualified INCO, a higher capitation rate is paid to the ECCE provider. Targeted funding is provided when it is considered to be crucial to the effective inclusion of an individual child following an application process, but the allocation of funding is (in principle at least) not to be dependent on a diagnosis. Targeted elements include subsidies for building alterations, specialist equipment, and expert advice, according to the needs of individual children with disabilities. Targeted elements also include funding for additional staff, such that the child-to-adult ratio in the pre-school can be reduced. The intended outcome is not one-to-one support, but a more distributed model to counter the tendency for one-to-one support to diminish independence and isolate children from peers and other adults. Figure 1 summarises the universal and targeted supports provided through the policy and funded by the state.
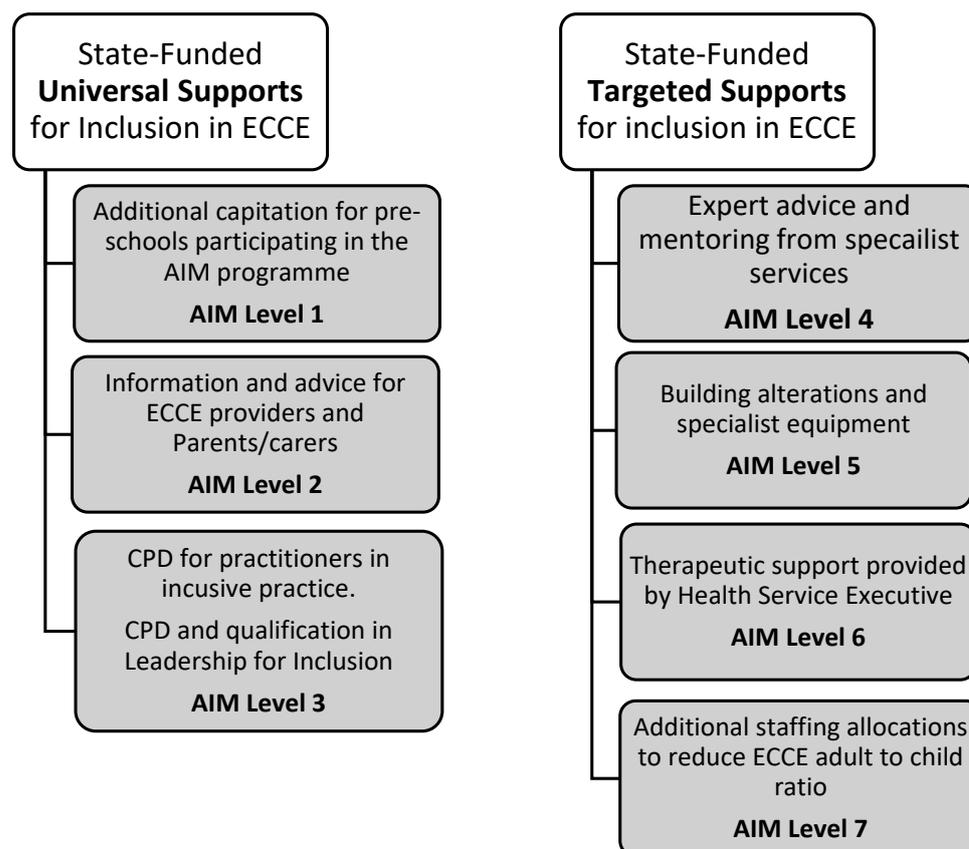
Figure 1 content:

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┌─────────────────────────┐        ┌─────────────────────────┐
│     State-Funded        │        │     State-Funded        │
│  Universal Supports     │        │   Targeted Supports     │
│   for Inclusion in ECCE │        │   for inclusion in ECCE │
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State-Funded **Universal Supports** for Inclusion in ECCE

- Additional capitation for pre-schools participating in the AIM programme
  AIM Level 1
- Information and advice for ECCE providers and Parents/carers
  AIM Level 2
- CPD for practitioners in incusive practice.
  CPD and qualification in Leadership for Inclusion
  AIM Level 3

State-Funded **Targeted Supports** for inclusion in ECCE

- Expert advice and mentoring from specailist services
  AIM Level 4
- Building alterations and specialist equipment
  AIM Level 5
- Therapeutic support provided by Health Service Executive
  AIM Level 6
- Additional staffing allocations to reduce ECCE adult to child ratio
  AIM Level 7

Figure 1. Universal and Targeted Supports in the AIM model.

The state-funded supports, shown in Figure 1, operate within a regulatory framework with equality requirements. For example, pre-schools are required to enact non-biased and anti-discriminatory practices, and to ensure every child's safety and wellbeing through appropriate safeguarding measures. Strict regulation of staff to child ratios is part of this framework. The quality of ECCE delivered by providers is monitored by two inspection bodies. One is focused on care (Pobal), and one focused on education (Department for Education, DE).

In this context, the authors were commissioned to investigate the implementation of the policy, and its impact on the full inclusion and meaningful participation of children with disabilities. Additionally, the study was required to evaluate how far AIM had impacted on the inclusive capacities of the ECCE sector, and whether there was a case for an expansion of the policy (e.g., to younger and older children with disabilities). It is important to clarify that this paper does not report on the findings of the commissioned evaluation since this is reported fully elsewhere [2]. Instead, the paper poses three questions not expounded in the full technical and research report published by the DCEDIY [2], but relevant to its methodological design. These questions are as follows:

- Question 1 (Q1): What theoretical underpinnings made the methodology counterhegemonic?
- Question 2 (Q2): What practical approaches made the methodological deign counter-hegemonic?
- Question 3 (Q3): To what extent did the approach achieve counter-hegemony (for participating children)?

We begin with Question 1 (Q1), with a specific focus on the *theoretical* approaches that lead us to claim that our methodology was counter-hegemonic.

2. Literature Review: Social Justice, Inclusion, and Counter-Hegemonic Research

Beginning with conceptual matters of relevance to our claim for counter-hegemony, it is an understatement to claim that the meanings of inclusion and social justice are myriad and contested [3,4]. Policies pursuing equity are suffused with contradictory or competing imperatives [5] or what Derrida [6] would term *aporias*. In the case of the AIM policy these aporias do prevail. For example, it is the stated intention of the policy to provide targeted support for children with disabilities *without* requiring a diagnosis. In policy documents, it is acknowledged that children may need additional support because they experience a type of difficulty not traditionally recognised as a disability, and hence not traditionally 'diagnosed' as such [7]. We observe here a desire to operate the policy around a broader concept of need in as agile a way as possible, without recourse to conventional labels. A policy imperative is to ensure that support is provided quickly and flexibly. This is to avoid a situation where a pre-school is left without the support it needs to ensure the child's full inclusion and meaningful participation during a two-year period of ECCE where time is of the essence, and where an understanding of a child's difficulties may not yet be complete, or even 'diagnosable.' However, a competing imperative operates in tension with concern for flexibility. To be awarded more intensive (and hence expensive) levels of targeted support within the policy, a condition is that the support must be shown to be *critical* to the full inclusion and meaningful participation of the child. In this context, checks and balances must be in place to ensure that resources are spent where they are most needed, or to put it another way, that children in the most need are not left unsupported because funds have been spent on cases where the claim is less critical. We can also observe the state's imperative to defend its expenditure. It is almost inevitable that a formal diagnosis provides a more absolute claim of a *critical* need for additional support because it is a claim that is easier for a state apparatus to read and deploy in defence of its funding decisions. Diagnoses hold power in this context, despite the policy's concern to diminish dependence on them. Potentially, the imperative to be agile and the imperative to be fiscally responsible are at odds with one another, and in the tug of war between accountability and flexibility, diagnoses have heave power. We think it is fair to reveal that we observed this aporia in action in our data for the commissioned study since it is an aporia widely reported in studies of similar policies in other countries [8]. We note this example of an aporia to illustrate the dilemmatic spaces occupied by policies on inclusion, and the complexity this creates.

Even in the face of this complexity we want to make some further headway in preparing to defend our claim that our research design was counter-hegemonic and congruent with inclusion as a rights movement. Our starting point is Fraser's [9] tripartite conceptualisation of social justice, which comprises the elements *redistribution*, *recognition*, and *representation*. These are not distinct elements of but a gestalt where the practices and outcomes centred on each are more than the sum of trinary parts. Usefully, Waitoller and Artiles [10] drew on Fraser's model to propose that in the case of *redistribution*, a socially just education system must antagonise a more equitable distribution of access, participation, and quality opportunities to learn. In the case of *recognition*, a culture of *recognition* [11] would acknowledge and value all learner differences and be expounded in habitually responsive curricula, pedagogy, and assessment. Finally, and interrelatedly, the voices and experiences of non-dominant groups would be amplified, and their suggestions about solutions deployed—this is the *representation* dimension. In our view, there are close parallels between current conceptions of educational inclusion and Fraser's tripartite conceptualisation of social justice. For example, Ainscow [12] deploys the concepts *presence*, *participation*, and *progress* when proposing indicators for the educational inclusion of diverse learners. We would be able to describe an early education system as inclusive where children with disabilities are present in mainstream pre-schools, participating in all that the pre-school and its community had to offer, and are thriving and developing educationally and socially. In this vein, we think it defensible to argue that inclusion has a close, conceptual relationship with Fraser's tripartite formulation of social justice for the

following reasons. Both inclusion and the Fraser's triune share the overarching goal of promoting equity and fairness through addressing systemic inequalities. They converge in their aim to rectify educational disparities. Both recognise the multiple dimensions of identity and disadvantage and are represented in policies and practices that consider these complex intersections and recognise how they are implicated in the construction of inclusion and exclusion. With this argument established, we apply the terms inclusion and social justice interchangeably in our ensuant content, assuming them to be near synonyms where one advances in concert with the other, and where *redistribution*, *recognition*, and *representation* interact to achieve inclusive transformations.

We recognise a research process as counter-hegemonic when it is a synergetic investigation *about* social justice (in this case, a policy focused on inclusion) at the same time as operating *as* social justice in its modus and design. It seems pertinent to pose the question, what research approaches may achieve such a synergy whilst being congruent with the pursuit of *redistribution*, *recognition*, and *representation* within an inclusive milieu? In response, we recognise participatory research approaches as counter-hegemonic. Typically, these engage a community or marginalised individuals and groups in defining research questions, collecting data, analysing data, and decision making. Participants may be engaged as co-researchers and co-creators of knowledge who have equal or elevated status. The aim is to challenge traditional power dynamics in research [13] and to ensure that oppressed voices are amplified in the spirit of *redistribution* (of power) and *representation* [14]. We also recognise inclusive methods of elicitation as counter-hegemonic, since they are responsive to individual preference and propensity. For example, for children who are non-speaking, visual and gestural responses are ways for them to speak their own 'truth' and where research methods are designed to elicit truths expressed without words, non-speaking children can experience both *recognition* and *representation*.

Later, we describe our methodological design in detail, but note here that we engaged seventeen practitioners (PRs) as co-researchers in the development of case studies on the implementation and impact of AIM. There were two rationales for this choice. The first was praxiological. PRs close-to-practice status would mean more astute awareness of phenomena of interest (e.g., design of learning activities, inclusive spaces, inclusive interactions). In turn, this would lead to richer data and more authentic interpretations of relevance to the commissioned evaluation's main objectives. There was another potential benefit because PR's close-to-practice status would also mean that findings and practice implications were more likely to be communicated in the vernacular of the professional community that were implementing the policy and core to the realisation of its aims. Our proposal here is that the catalytic validity of the research could be strengthened as a result, meaning its potential to energise participants into knowing reality anew and being energised to transform it was increased in the way described by Lather [15]. When referring to participants, we depart from Lather to argue that those catalysed by praxiological design into a state of conscientization [16] are not only the PRs or the practitioners they interacted with in the research process, but potentially, a national practitioner community who may perceive descriptions of phenomena, challenges and solutions in our research that are more useable in their practice contexts.

The second of our rationales was philosophical and adopted a feminist framing because the intersection of gender and expertise in the labour market is of significant interest for an ECCE workforce. Seminally, Braverman [17] explored the way in which work and skills come to be devalued in sectors where women predominate, a process often referred to as 'feminisation'. Where a profession is *feminised*, its expert status is diminished, along with its pay and social status [18]. We know that gender dynamics in education are closely related to care work, and this is a particular issue in ECCE because of the overlap of these functions. In the ECCE sector, mainstream gender roles that associate women more closely with reproductive work and caring labours are replicated in their workforce participation. This phenomenon is live in the international context, where we know that the concentration of women teachers is in the earlier years of schooling, particularly in

pre-schooling. Women make up eighty five percent of the global teaching workforce in early education, and so it is fair to claim that the ECCE workforce has been feminised [19]. Feminisation is also manifested in the way that the expertise of the ECCE workforce is diminished, devalued, or overlooked. Dominant constructions of the ECCE professional as a 'caregiver' and 'childcare worker' have contributed to this situation [20]. This is because 'childcare' discourses reproduce the assumption that the task can be performed by any layperson and indeed, any laywoman. Caring for children is often associated with innate or 'natural' female propensities, and such naturalisations are one method through which *expert status* and *expertise* is denied [21] with consequences for the ECCE workforce, their pay, and their power [22]. In Ireland, there is a strong policy commitment to professionalising the ECCE workforce, at the same time as improving pay and conditions, and this has been demonstrated by the funders' support for engaging PRs in the commissioned evaluation. At the same time, feminist analyses of state rhetoric on workforce development in Ireland have identified neoliberal discourses aligned with global quality reform which are perceived to spawn performative discourses and practices that promote consumer-choice, tick-box managerialism, and individuated performativity. The consequence is the demotion of the 'holistic, organic, nurturing, agentic notion of relational care and pedagogy' in the ECCE sector [23] (p. 239). We would argue that the installation of quality and performance management constructs practitioner competence in a 'masculine' framing since the focus is on 'objective' technologies of performance, whilst downgrading more 'feminine' relational proficiencies such as care and nurture [24]. A counter-hegemonic approach to research in the ECCE sector would deliberately seek to avow the expertise of practitioners, whilst affirming relational work as expertise.

Involving PRs as co-researchers in the evaluation of a high-profile national policy (AIM) was deliberately deconstructive because it resisted feminising discourses. It was an effort to *redistribute* power and challenge normative conceptions of value. This was because PRs were positioned as experts and co-researchers with essential knowledge who implemented a nurturing, participatory, and inclusive method to elicit the lived experience of very young children with disabilities. In this way, we were striving to *redistribute* power and ensure that practitioners were *recognised* and *represented* as central collaborators in the evaluation, and as experts of value to an independent evaluation. At the same time, we were overtly *recognising* their status as agents of relational care and education. Here, we are explicitly demonstrating the links between our research design and Fraser's model of social justice [8].

Now that the theoretical basis for our claim to counter-hegemony has been presented, we turn to a description of our methodological design with a focus on the second question posed in this paper—what practical approaches made the methodological deign counter-hegemonic?

3. Methodology

Though this paper focuses on the counter-hegemonic elements of our research, specifically on close-to-practice case studies of pre-schools who are engaged in the AIM programme and children who are supported by it, describing the wider methodological design for the evaluation will provide useful context.

In the evaluation of AIM, a mixed methods approach was adopted to ensure the development of a rich dataset which captured the experiences and perspectives of a large and varied range of participants. Methods included an analysis of documents and existing statistics, a review of the international literature, online surveys of 1157 parents/carers and 732 ECCE practitioners, and multi-modal interviews of 79 people, including service deliverers, ECCE providers, and parents/carers. Finally, 14 case studies of pre-schools participating in the policy, and of individual children with disabilities attending the pre-schools and supported by the policy, were constructed. Quantitative data were interrogated descriptively and analytically, and thematic analysis was applied to all qualitative data. Figure 2 provides a summary of the overall methodological approach. Methods were

applied within an ethical framework and were tested before use. This was through cognitive testing in the case of the survey (method 3), and by piloting in the case of qualitative methods (methods 4 and 5). The trustworthiness of data and interpretation were tested through cross-checking and validation, peer review, expert review, statistical tests, and in the case of qualitative data, a constant comparative method. At least 2000 people participated in the study.
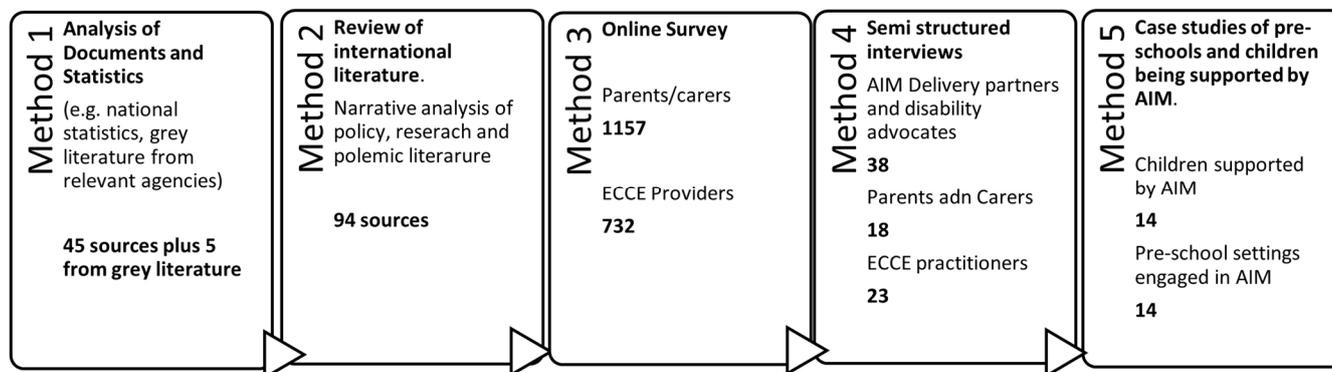

Figure 2. Summary of methods applied to the evaluation of the policy.

With the support of the DCEDIY, the research team integrated two counter-hegemonic features into the methodological design shown in Figure 1. One was engaging early years practitioners as lead researchers in the construction of the case studies of pre-schools and children supported by AIM (Method 5). In this way, Practitioner Researchers (PRs) were co-researchers who were leading on the implementation of the close-to-practice element of the methodology. The other was to deploy a participatory method when eliciting the lived experiences of participation and inclusion among children supported by AIM, so that their voices were elevated. PRs worked as co-researchers in implementing the case studies.

A case study approach was selected for close-to-practice research in this case because it could provide an in-depth account of the lived experiences of the policy as it unfolded among practitioners, families, and children. Multiple perspectives were accessed, including those of children, parents/carers, practitioners, pre-school leaders, and where possible, external professionals (such as advisors) supporting the children and the pre-school in inclusive strategies. For example, AIM enables Early Years Specialists (EYS) who are allocated to pre-schools to provide advice on inclusive practices and on how to apply for AIM-targeted support. EYSswere included as participants in the case studies where possible. Each case study involved two parts that were both distinct *and* interrelated. Firstly, the pre-school's experience of participating in the policy, which we will henceforth refer to as the *setting case study*, focused on adult participants. Secondly, a case study focused on one or two children who attended the setting. From this point on, we will refer to this as the *child case study.* Child case studies focused on the child's own experience of inclusion within the pre-school. Children selected for these case studies were being supported by AIMs targeted to them, and/or universal supports. In this way, the case study was holistic because it aimed to capture the key components of the case [25]. At the same time, the approach sought to capture the essentials of what constituted the lived experience of the policy as it operated in pre-schools and was experienced by multiple participants [26], including the children themselves. PRs were able to describe potential links between the child's experiences of inclusion, and the setting's practices and engagement with AIM.

In detail, we explain our approach for engaging ECCE practitioners and describe the methods that were to be deployed to elicit and collect data in the case studies. We begin with an account of how we selected and supported the PRs who were engaged as co-researchers.

3.1. Recruitment of Practitioner Researchers (PRs) and the PR Development Programme

Seventeen practitioner researchers (PRs) were appointed through a selection process that was enacted in collaboration with the Ireland's leading organisation for ECCE professional advocacy—Early Childhood Ireland (ECI). Criteria for PR selection included higher level qualifications in ECCE (at a postgraduate level), experience of the policy, leadership of inclusion in a pre-school setting, and commitment to child-centred practices. When referring to child-centred practices, we mean respect for children's capabilities and agency, responsive teaching, commitment to play-based and child-led learning, and reflective practice. It was important that recruited PRs were positively disposed toward child-centred principles and were experienced in practicing them, because this would be essential to the deployment of the counter-hegemonic and inclusive elicitation method.

The research team made the final selection on who was to be appointed, and PRs who were appointed engaged in a professional development programme focused on ethics, research trustworthiness, deployment of the research instruments, and interpretation/write-up. The programme was designed and delivered by the research team working in collaboration with academics at Mary Immaculate College, a Higher Education establishment recognised as a leading provider of teacher and practitioner development in Ireland. During the PR development programme, PRs piloted the methods in their own settings and their experiences led to the refinement of the tools, and responsive inputs by the research team. For example, PRs asked for guidance on how to write interpretations that drew on multiple forms of data (interviews, photographs, fieldwork notes), and how to stay objective when they had seen practices that were not ideal. A PR community was established using an online forum and document store, and PRs were supported by each other and by researchers from the University of Derby and Mary Immaculate College. In summary, the professional development and support programme provided for PRs was as follows:

- *Professional Development Session 1:* Introduction to the AIM evaluation, the PR role, ethical protocols, and instrumentation for case studies of settings.
- *Professional Development Session 2:* Using the mapping method and its alternatives, conducting the pilot study, contacting your settings, and planning your time.
- *PR Activity*: A pilot study conducted in PR's pre-school setting.
- *Professional Development Session 3:* Reflection on the piloting of the instruments, preparing for fieldwork, reflection on initial contact, and planning with settings and families.
- *Drop-in sessions:* PRs were given an opportunity to discuss their initial contact and planning with settings and families, initial fieldwork, recording of the case study, and approach to completing the case study forms.
- *Ongoing support:* There was ongoing support in use of the tools, and critical reflection on the interpretation of data.
- *Financial support:* The PRs' work setting was compensated for their time with a payment of EUR 600.
- Data were collated and then interpreted by PRs, through reflection with other PRs and, academics leading the TR programme, and the authors.

We acknowledge here that EUR 600 was a small amount of funding for PRs, and this limited the extent to which we could involve them in the design of instrumentation, the interpretation of findings in the wider commissioned evaluation, and reporting. This meant that as co-researchers, their work was limited to the close-to-practice elements of the study. Ideally, in the spirit of co-research, their involvement would have been extended to whole of the project (e.g., methodological design, report writing, dissemination). Deeper and broader involvement would have extended PRs agency and potentially enhanced the benefits of their involvement. Nonetheless, we would argue that the steps taken to engage PRs in a commissioned evaluation of national policy was significant and demonstrated commitment to counter-hegemonic approaches by the research team and the commissioning body. To expound further on the method, we outline the sample for the case studies in what follows. We also acknowledge that, though we had appointed seventeen PRs, only 14 were able to deploy the methods because of the challenges created by COVID-19 and its impacts

(e.g., staff absence, pre-school closures), and the way these limited pre-schools' capacity to participate. Of these 14 PRs, one was able to implement the *setting case study*, but not the *child case study* because the child withdrew from the study.

3.2. The Sample for the Setting and Child Case Studies

Fourteen pre-schools were recruited to participate in the *setting case studies*, and fourteen children from these settings were selected to participate in the *child case studies*. Recruitment deployed purposive sampling using the following criteria. Firstly, selected pre-schools needed to be engaged in AIM, and registered by the DCEDIY as such. Secondly, selected pre-schools must have at least one child supported by AIM because of a disability. Thirdly, selected pre-schools had to combine to represent a diverse range of geographical areas and locations (e.g., city, rural). For thirteen out of fourteen case studies, PRs spent two full days at the setting collecting multi-modal data. In one setting, data collection had to be online and over the telephone because of COVID-19 restrictions impacting on the setting. Table 1 summarises the characteristics of the sample of the case studies of settings and children. (The children's names are pseudonyms).

As demonstrated by Table 1, two participating settings were community pre-schools (funded largely by the state), and twelve were privately owned. Eight were in urban areas and six were in rural areas. Participants included owner/managers, inclusion co-ordinators, practitioners, early years advisors, and parents/carers. From thirteen of the settings, a total of fourteen children participated in the *child case studies*, and their ages ranged from 3 to 5 years. Some children had not yet started pre-school but had been inducted, some were in their first year of ECCE, and others in their second. One child was accessing 'extended' ECCE, which is provided for children who need additional time in early education before moving into primary school.

When developing *setting case studies*, PRs engaged in planned or spontaneous interactions with adult participants. All interactions were based on schedules for semi-structured interviews, group discussions or conversations. Instrumentation was written to allow flexibility for face-to-face data collection or online data collection. This was because COVID-19 lockdown was possible at any point in the data collection period. PRs were able to select data collection instruments according to circumstances and opportunities in the setting. PRs contacted settings and families prior to collecting data to agree on the data collection activities that were to take place. This was important because of practical opportunities and constraints arising in each setting. For example, some settings were very small (having fewer than eleven children and two staff), and in others, staff workloads were a factor. Whilst in the setting (or interacting with practitioners online), PRs also collected data from documentary artefacts. The term 'documentary' is used in its widest sense to describe, for example, data that comprised the following:

- Descriptions of the built environment, including alterations made.
- Descriptions of artefacts and objects, including children's toys and play materials, certificates, and awards.
- Descriptions of materials on display in the setting, including photographs of children and their families, children's artwork, notice boards for families, including information on daily/weekly routine and tip sheets for parent/carers.
- Children's learning journals (i.e., practitioner records on the learning and activities of individual children).
- Assessment information, including the Aistear learning record (Aistear being the early childhood curriculum framework for all children from birth to 6 years in Ireland)
- Documents such as home-setting diaries or copies of policies.

This was augmented by in-depth interactions with children selected for the *child case studies*, the process for which is described in more detail later.

Table 1. Sample characteristics for setting and child case studies.

Case Study (CS)	Setting Type	Participant Role (Total Number Interviewed)	Level of AIM Accessed in Setting
CS1	Community, urban town	Room leader (1)	Universal 1, 2, 3 Targeted 4 and 7
Child	Joe 3 years old, first year of ECCE		
CS2	Private, rural	Owner/Inclusion coordinator, mother of case study child (2)	Universal 1, 2, 3 Targeted 4 and 7
Child	Ben 3 years 6 months old, first year of ECCE		
CS3	Private, urban town	Inclusion coordinator, Room leader and Owner (3)	Universal 1, 2, 3 Targeted 4, 5 and 7
Child	Sean 4 years old, second year of ECCE		
CS4	Private, rural	Owner/Inclusion coordinator and mother of the case study child (2)	Universal 1, 2, 3 (Planned targeted support: 4, 6 and 7)
Child	(a) Richard 2 years old, has not yet started pre-school. (b) Jenny 4 years old, second year of ECCE		
CS5	Community, urban city	Manager/Inclusion coordinator and practitioner (2)	Universal 1, 2, 3 Targeted 4 and 7
Child	Liam 3 years 2 months old, first year of ECCE		
CS6	Private, rural	Owner/Inclusion coordinator (1)	Universal 1, 2, 3
Child	Mary 4 years old, second year of ECCE		
CS7	Private, rural	Owner and room leaders (3)	Universal 1, 2, 3 Targeted 4 and 7
Child	Finn 4 years 6 months old, second year of ECCE		
CS8	Private, urban town	Owner/manager, and two practitioners (3)	Universal 1, 2, 3 Targeted 4 and 7
Child	Kiernan 3 years 5 months old, first year of ECCE		
CS9	Private, rural	Manager/pre-school room leader and mother of the case study child (2)	Universal 1, 2, 3 Targeted 4, 5 and 7
Child	Ruby 5 years 6 months, ECCE overage exemption		
CS10	Private, urban city	Manager/Inclusion coordinator, practitioner, and mother of the case study child (3)	Universal 1, 2, 3 Targeted 4 and 7
Child	Ciara 4 years old, second year of ECCE		
CS11	Private, rural	Manager/Inclusion coordinator (1)	Universal 1, 2, 3 Targeted 4 and 7
Child	Connor 3 years 6 months, first year of ECCE		

Table 1. *Cont.*

Case Study (CS)	Setting Type	Participant Role (Total Number Interviewed)	Level of AIM Accessed in Setting
CS12	Private, urban town	Manager/Inclusion coordinator (1)	Universal 1, 2, 3 Targeted 4
Child	Max 3 years old, first year of ECCE		
CS13	Private, urban town	Owner/manager, Inclusion coordinator, practitioner, Better Start EYS (4)	Universal 1, 2, 3 Targeted 4 and 7
Child	Tom 3 years old, first year of ECCE	Child	Universal 1, 2, 3 Targeted 4
CS14	Private, urban town	Owner/INCO (1)	Universal 1, 2, 3 Targeted 4 and 7
Child	Child withdrew from the case study but setting case study was completed		

The PRs worked with other members of the research team to develop some 'rules of engagement' that would ensure ethical entry and interaction with participants in the site, and effective engagement of children with disabilities. These included empowering participants by providing opportunities for them to voice their opinions, ask questions, and express concerns. It was important for PRs to validate the experiences of participants, even where the practices or perspectives they observed were not best practices in their own view. When working with children, it was important to be aware of power dynamics and ensure that interactions were child-led. We provide more details on how this was enacted in the case studies of children in what follows.

3.3. Developing Case Studies of Children and Their Lived Experience of Inclusion Using Counter-Hegemonic, Inclusive Methods

For case studies of children, PRs were asked to implement an ethnographic multi-modal mapping approach. Ethnographic mapping is a research method used in the social sciences to study and understand social phenomena, such as inclusion and participation, in a specific community and culture such as a pre-school. It involves observing, recording, and analysing various aspects of a community's life and collecting multi-modal texts as data. These modalities include utterances (e.g., conversations children in the community site), embodied responses (gestures, facial expressions, emotions), images (e.g., photographs or drawings), spatial data (maps, visual *representation*s of spatial and social dynamics), and artefacts (e.g., documents or objects in the site). The approach was based on established methods of mapping [27,28], where children produce maps of their school or community, and annotate them with drawings, photographs, and text in collaboration with the researcher and significant others. However, the approach was refined to be bespoke to the research questions, and responsive to the varied needs of the very young children it engaged, most of whom had disabilities. For example, the mapping was of the pre-school and in some cases, the child's family life, and the data collected and analysed focused on the child's experiences of full inclusion and meaningful participation in the pre-school. A multi-staged approach was implemented by PRs and is summarised in Table 2. The aim was to access children's own accounts of inclusion in a way that was accessible.

Table 2 shows how the method, when implemented fully, moved through various stages of development, and began in the security of home with families supporting the child through discussion of the picture book 'My Map Book' by Sarah Fanelli [29]. This book introduces young children to the idea of maps through illustrations of familiar physical and relational spaces in their own lives. For example, maps of 'my bedroom', 'my family', and 'my tummy'. Using the book, families worked with the child to create a map of their

pre-school. This progressed to the use of the map as a scaffold for child-led interactions between the PR, the child, and significant others (e.g., practitioners, family members) in the pre-school setting. When interacting with children, PRs were to apply child-centred practices to ensure that the child's voice was magnified as much as possible, and their perspective and experiences were validated, even where it was not possible to apply the mapping process fully. This was performed to achieve two main aims. Firstly, the aim was to develop a collaborative relationship with the child to foster dialogue. For example, in one case, the PR, child, and significant other performed a walking tour of the school using the map the child had drawn, with the child taking the lead. The PR took digital photographs of the spaces and equipment that the child pointed out, noting utterances and embodied reactions in these spaces. These were used as the material for conversing with the child about their experience and developing a co-produced spatial *representation* of the child's social relations and activities. It was important for the PR to avoid leading or interrupting the child, except for affirming or validating what they were communicating, or scaffolding for richer elicitation on a subject already raised by the child (e.g., how about you tell me more about the people you mentioned when we were here [pointing at image or map]). These practices are particularly relevant to a study that is designed to be research *about* inclusion and social justice enacted *as* inclusion and social justice [1]. Child-centred approaches hold principles that are about *redistributing power* in the child's direction (in this case the child with disabilities) [10]; a culture of *recognition* [11]; and the authentic *representation* of identity and lived experience within the community of interest (the pre-school) [14]. The mapping method is participatory and co-productive. It is participatory, because the child's frame of reference is primary, and it is co-productive because the child builds and interprets the map with the researcher.

Table 2. Summary of the mapping process.

Stage	Activity
1	At home with the family, the child and parent/carers share a book 'My Map Book' by Sarah Fanelli and talk about life at pre-school. The child is invited to draw a map of their pre-school.
2	At pre-school with the family/known practitioner, child, and PR: a walking tour of the pre-school with the map, noting the child's points of interest, utterances, emotional and embodied reactions
3	PRs take photographs of places, spaces, people, and artefacts of relevance to the child, noting utterances
4	At pre-school with the child: The PR engages in a focused conversation with the child, using the map, photographs, and any collected artefacts, to further support the elicitation of lived experiences
5	The PR interprets the texts in ways that are as a priority, close to the child's meaning and experience, and secondarily, related to the country's policy definition of inclusion as equity, an experience of being welcomed, belonging, able to participate fully, and able to grow/progress

The process drew on a growing tradition of ethnographic methods in research with young children influenced by Deleuzo–Guattarian formulations of meaning and reality, and the manner of their materialisation in social contexts [30]. The semiotic position recognises multi-modal texts (signs, symbols, gestures, images) as tools for the construction of meaning, and posits that such texts are not an outcome of an innate or natural order, but of the processes through which people accomplish social outcomes in the context of their day-to-day instantiation [31]. The mapping approach would enable young children with disabilities (including those who are not yet verbal or do not yet use written texts) to communicate something of the lived experience of inclusion, as a social, bodily, and place-based phenomenon. In the mapping approach, there was an opportunity to represent the shifting realities of young socialities and subjectivities as these relate to *included* bodies

and becoming [32,33]. In this way, the mapping approach could enable the *representation* and amplification of a complex lived experience of relevance to an evaluation seeking to understand the impact of AIM on children's full inclusion and meaningful participation. The method had the potential to enable children to communicate their experience using visual and spatial texts and did not rely on speech. It was adapted to suit the preferences and abilities of each child. For example, one child communicated without speech, and through drawings, photographs, and taking the researcher to sites of interest (such as corners of the pre-school she enjoyed, and outdoor areas where she enjoyed time with friends). Others used speech more fully and chose to role play experiences of playing with their friends for example. In one case, the child's older sibling was the significant other who supported her map making and interaction with the researcher.

3.4. Data Collation, Analysis, and Interpretation Applied by the Practitioner Researchers

To ensure the consistency of approach and the collection of data relevant to the questions posed by the commissioned evaluation, two templates were used by the PRs. One, to collate data and findings from the *child case study* (where the multimodal map was used as the elicitation method) and one to collate findings from the setting case study (where documentary artefacts, interviews, and conversations were used as data collection methods). The template for the *setting case study* was structured into five thematic areas linked to the research questions in the broader evaluation. The five thematic areas for data analysis and interpretation were as follows:

1. Perspectives on the principles and purposes of the policy active in the setting. This was to better understand what people in the setting understood about AIM's rationales, and how they defined terms used in the policy such as 'full inclusion' and 'meaningful participation' in the context of their setting.
2. How the setting was using the universal and targeted supports provided by AIM (see Figure 1) to develop inclusion. This was to investigate how the policy was being implemented, and what the settings themselves wanted to achieve through participating with the policy.
3. How people in the setting described the benefits of the policy to children, staff, parents, and families to gather descriptions of impacts that were unfolding in context.
4. What people in the setting perceived as the aspects of the policy had worked well, and the aspects that needed to develop so that the setting could enhance its practice further.
5. To investigate why the settings were participating in the policy, and what extensions to the policy they imagined as beneficial (e.g., extending the policy to support younger children, for more hours or for older children).

The templates for the *child case studies* included prompts and guidance such as 'example topics to write about in this section' and 'include direct quotes where you can.' In the *child case study* template, PRs recorded a contextual description of the child and the methods used to collect the data (e.g., map text and images, photographs, data from the walking tour). PRs were asked to report findings and interpretations of the child's lived experience of inclusion and participation under the six core elements of Ireland's *Diversity, Equality, and Inclusion (DEI) Charter and Guidelines for ECCE* [34] so that interpretations could be linked to policy, but in ways that centralised the voice of participants. The PRs deployed the following co-produced interpretations of the DEI charter's six elements when writing their interpretations.

1. *Provision:* This refers to the provision of early childhood care and education services that are inclusive, accessible, and responsive to the diverse needs of children and families. It involves creating environments and programs that support diversity, promote equality of opportunity, and foster a sense of belonging and participation for all children.
2. *Role of Practitioner*: The role of the practitioner involves implementing inclusive practices, respecting diversity, and promoting equality and inclusion in all aspects of their work. Practitioners play a critical role in creating inclusive learning environments,

supporting children's individual needs and interests, and facilitating positive peer interactions and relationships.

3. *Peer Relationships*: Peer relationships refer to the interactions, friendships, and social connections among children within the early childhood setting. Practitioners support the development of positive peer relationships by fostering a sense of community, promoting empathy, and understanding, and addressing any issues or conflicts that may arise among children.

4. *Emotive Response*: Emotive response involves recognizing and responding sensitively to children's emotions, feelings, and experiences, including those related to diversity, identity, and inclusion. Practitioners support children in understanding and expressing their emotions, validating their feelings, and promoting empathy and acceptance towards others.

5. *Physical Environment:* The physical environment encompasses the design, layout, and materials within the early childhood setting. It includes considerations such as accessibility, safety, comfort, and the representation of diversity. Practitioners create inclusive physical environments that reflect and celebrate diversity, provide opportunities for exploration and learning, and accommodate the needs of all children.

6. *Resources:* Resources refer to the materials, tools, and supports available within the early childhood setting to enhance learning and development. This includes books, toys, learning materials, assistive technologies, and community resources. Practitioners ensure that resources are diverse, inclusive, and culturally responsive, reflecting the backgrounds, experiences, and interests of all children, families, and communities.

PRs also uploaded raw data to illustrate their findings. For example, children's maps, embedded videos (on the map), recordings of walking tours or conversations, maps of the child's movement around the pre-school, and documentary artefacts such as creative work produced by the children or documents in the setting. Figure 3 is an extract of one of the maps co-produced by the PR with the child with their family (parent and older sibling). The map combines six pages which include images, embedded videos and audio, and annotations. The children's faces are not shown.

Figure 3. Example of map text produced by child, family, and researcher. The images are of places that matter to the child and were gathered by the child/family or child/researcher and assembled onto the map to support conversations with the child on their experiences of these places.

3.5. Analysis of the Data Collected by the PRs for the Evaluation

The data had already been subject to analysis and interpretation by PRs themselves. They drew on the data to make interpretations of children's lived experience of inclusion and participation in the child case studies, and how AIM was perceived and implemented by the pre-school community in the setting case studies. The process of interpretation was collaborative, and PRs worked with each other and the academic team to revisit, review, and revise these interpretations before submitting their final versions of the case studies. This was to add rigour to the analysis in the context of a reflective co-research community. Following this, researchers at the University of Derby used a workbook to analyse the corpus of the case study data, and to identify themes and patterns of relevance to the questions posed in the evaluation, with rigorous checking and validation of the analytic process.

3.6. Analysis of the Data Collected by the PRs for This Paper

For the purposes of this paper, our data analysis focuses on the extent to which the method applied to the *child case studies* was counter-hegemonic (Q3). Given our claims about the potential of our methodological approach to be socially just at the point of implementation, the question of how far the approach achieved this is an important one. To investigate this question, we revisited all raw data (maps, images, recordings, videos), the *child case study* templates, and any reflections written by PRs. Thematic Analysis [35] was used to analyse this data, initially by two researchers who blind-coded text and imagery using NVIVO. Comparison of the two thematic maps resulted in the creation of a coding frame which was then used to re-code the data. The researchers completed this process independently. We did not use a Kappa coefficient to assess levels of agreement because we found it was not a good fit with the analysis of multi-modal data. However, following the implementation of the coding frame, we identified differences in our coding decisions and resolved them through rigorous critical discussion.

4. Results

The rigorous and iterative process of thematic analysis resulted in the identification of three themes and ten subthemes which we summarise in Figure 4 below.
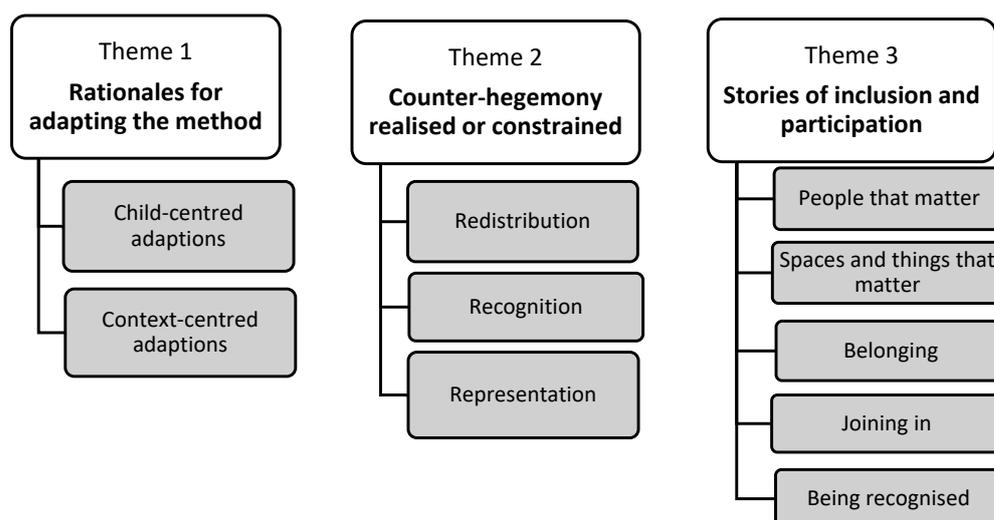

Figure 4. Findings: Thematic Map.

As shown in Figure 4, Theme 1 contains PRs' descriptions of adaptations to the method deployed to understand children's experiences of inclusion and participation, and their rationales. Under the subtheme 'child-centred adaptations' in Theme 1, we find rationales that were responsive to the abilities, needs, and preferences of the child. In the case of

'context-centred adaptations', there were rationales that were predominantly external to the child, such as the influence of the setting's view on the best way to collect data about the child's inclusion and participation or time constraints impacting on the PR and/or members of the pre-school community. For example, it may not have been possible to enact stage 1 of the mapping method (engagement of the family at home, see Table 2). Theme 2 contains accounts of counter-hegemonic impacts, by which we mean amplifications of the child's voice and power in the process. The third theme draws together data from the child case studies which tell the story of children's inclusion and participation in the pre-school in the context of AIM. The subthemes combine to represent the spaces, people, and things that mattered to children.

Theme 1: *Rationales for adapting the method.*

PRs adapted the approaches used, in response to the child, or because of influences external to the child. Four of the thirteen PRs who completed the *child case study* used an alternative to the mapping activity to elicit children's stories of inclusion and participation, or in two cases, more distant observations of the child from which the child's experience could be inferred. We begin with rationales that we identified as being predominantly external to the child. For one PR, there were contextual reasons for the adaptation because she had liaised with the setting prior to the visit to the pre-school, and the staff had advised that the mapping approach would not work well with the selected child, Kieran (3 years old, supported by AIM Levels 4 and 7), but suggested that observations including a 'flow chart' approach would provide a viable insight into his preferred play areas, his interactions with other children, and his emotive responses in the pre-school. Though active in pre-school and enjoying some games of chase with a preferred adult, Kieran was non-speaking, and the pre-school were introducing a Picture Exchange System to help him to express his wants. The pre-school informed the PR that joint attention was in a very early stage of development [Kieran, *child case study*, approach section]. Kieran was diagnosed with autism spectrum disorder (ASD) two months before the PRs engagement with the setting. For these reasons, though the child's needs were informing the rationale, it was the view of setting staff that had primary influence, rather than the PRs own interactions with the child. We do not question the wisdom of this decision, nor the other decisions made by PRs about adaptation of the methods used, rather we report these findings as a way of understanding constraints. In the case of another non-speaking child, Connor, the PR reported that 'the child quickly became overwhelmed by the introduction of a new adult to the group, so I worked with the child in the group as a whole, asking questions about the setting.' [Connor, *child case study*, background section]. After some attempts to engage the child in interaction, the PR chose to observe the child from a distance, and infer from his interactions his lived experience of inclusion and participation. Though this was a response to the child's needs in situ, the decision seemed to be influenced by the difficulties the PR encountered in establishing interactions with him. We note that the PRs account of method did not include liaison with parent/carers in the formation of a map, and this was because the setting had advised that this would not be successful. For three PRs, time or other practical constraints had an impact on how they adapted the method. In the case of Ben, the PR used conversations with his mother and observations of the child in his pre-school to infer his lived experience of inclusion and participation. Another PR had used a combination of discussion with staff and parent–carers, with interactions with the child. These interactions were through talking about the child's own drawings done in situ, and eliciting responses from the child using a social stories book created for Ben by the setting. Like Kieran and Connor, Ben had communication difficulties, and used single word utterances in his conversations.

Where PRs had been able to use the mapping method as the primary means of eliciting the child's experience (as was the case with nine PRs), we also saw adaptations being made, but without exception, these were centred on the child's needs and preferences. That is, they were more directly influenced by the PRs' own knowledge of the children, and this

may indicate the value of the method in building a dialogic relationship by degrees. Where we use the term 'dialogic', we are referring to a relationship that involves open, reciprocal communication, and where thoughts, feelings, and perspectives are shared. For the PR, this means prioritising understanding, trust, and collaboration, so that the connections are strengthened. For example, the mapping activity with Jenny (age 4) also included her sibling Richard (age 2) who was getting ready to start at pre-school. The PR spent time with the parent to explain how the mapping activity would work, and the parent took pictures of home and school and using the 'My Map Book' [29] worked with her children to develop a map of their experiences. Then, using these artefacts, the PR interacted with the children with the support of the parent, and they group did a walking tour of the pre-school together. She recorded her interactions. In this example, the map was collaboratively built with the parent and the children and included the video interactions, which the children enjoyed listening to and prompted further conversation. For another child, (Mary, age 4, AIM universal support), the PR drew on two maps made by the child before her visit to the pre-school, one map of the setting, and one map of her bedroom. She had also painted a picture of herself. The PR used these to prompt elicitations during a walking tour of the school, with the child taking control of the direction of the tour and the discussion. For another child (Ciara, age 4, AIM level 7), the PR did not have an opportunity to work with the family on the mapping task but supported the child in making one in the setting. Ciara preferred to work with other children while doing this, and the PR responded to this preference by working with all three children to draw a map of the setting. Ciara then took the PR on a walking tour of the setting which the PR audio recorded, and the PR and child referred to the map to inform the discussion.

In summary, this theme contains descriptions of how the methods used and data collection tools deployed, were adapted to the child's needs and preferences (for the most part), or in response to contextual factors and constraints (for the least part). For some PRs, the conditions in the setting or constraints in their own or others' time meant they could not deploy the mapping approach but found other ways to understand how children experienced inclusion and participation in their pre-schools.

Theme 2: *Counter-hegemony realised or constrained.*

This theme contains examples of counter-hegemonic actions or outcomes. We will report the findings under each of the three subthemes (*redistribution, representation, recognition*).

4.1. Redistribution

Data was categorised as *redistribution* when the child held control over the direction of the interaction action, and because of the PRs' responses, also held the power. At first, we coded all instances where the PRs had followed the child's lead, and this happened in all 14 case studies. However, we refined this so that only instances where PRs facilitated the child's ownership during data collection were coded as *redistribution*. Where the PR was sensitively following the child's lead as they engaged with the day-to-day activities of the pre-school, these were not coded as *redistribution* since they were not directly associable with elicitation. We found examples of *redistribution* in the data for 11 of the 14 child case studies. *Redistribution* was evident in all 10 of the case studies where the mapping approach was used, and in 1 of the 4 case studies where it was not. An example of how this was represented in the data was in the case of Max (age 3, supported by AIM level 4, learning EAL), where we can observe that the PR had carefully interacted with Max while he was engaged in activities of his choice and followed his lead. The decision not to engage Max with the mapping activity was because he wanted to do something else. The following extract from the *child case study* shows how this unfolded as an example of *redistribution*.

> The child began to play with playdough, which they got very focused on. When we moved on to trying to draw a map, an audio story began to play for the other children. This agitated the child, who clenched their fists and gripped the pencil very tight, looking in the direction of the audio story. The child's hand was then

rubbed [by a pre-school staff member] to try and calm him and bring him back to the playdough... Once the story was over, music began to play, where the child put the mapping activity down and went over to dance with the rest of the group. The child enjoyed this, which could be observed by his smiles and laughter. He then went over to a dolls house to sit down and play. [Max, *child case study*, provision section]

The extract above is from 1 of the 4 case studies where the mapping approach was not used, and we can observe that the decision to delete the mapping task was because the child was engaged elsewhere. In this case, though, the PR was engaged in closer interactions with the child and made decisions based on their emerging knowledge of Max. Another example of *redistribution* was in the data for the case study of Mary (age 4, AIM universal support). The PR followed Mary's lead, and the map seemed to have scaffolded this interaction, even where the PR was not involved in its creation.

[Mary] had her maps drawn. She gave me a picture she had drawn of herself, a map of her bedroom at home where she sleeps, and a painting of a garden. The first thing Mary showed me on her map was the 'Lora Rua' (a squirrel). Mary showed me his bushy tail and went to the shelf and got me the toy squirrel from the shelf. Mary said, 'this is his busy tail' and she was excited to show me the sun she had drawn in the corner of the map. Mary said, 'I will make you a sun' and she went to the shelf and a jigsaw of the sun, and we made it together... She showed me a book on our walking tour of the pre-school and showed me the book 'The Hungry Caterpillar' and shared the story book with me and said, 'he was not a caterpillar anymore, he was a butterfly'. [Mary, *child case study*, provision section]

The example above shows how the PR followed the child's lead very closely, and responded in ways that elicited important insights into how Mary participates in pre-school activities. In summary, *redistribution* was observed in all the case studies where the mapping activity was deployed, and in one where it was not.

4.2. Representation

In the case of *representation*, data was coded as such when it provided an insight into the child's experiences and perspectives. Examples of *representation* were found in all 14 case studies but were more likely to include the child's own utterances (things the child said) or indications (things the child pointed out or led the PR to) about what mattered to them where the mapping method was used. In case studies where a map was not deployed, the PRs were more likely to draw well-informed inferences about what the child was experiencing in pre-school. To put this another way, *representation* of children's perspectives and opinions was more likely in the context of the mapping approach. An example of *representation* is provided in the following illustration, where Richard (age 2, about to join the pre-school and likely to receive targeted support) and Jenny (age 5, AIM Universal support) and their mother have assembled drawings and photographs about their life in pre-school and at home. Figure 5 shows the map about home, and when narrating the map to the PR, Jenny said to the PR: "That is my daddy riding on the bike ... the horses eat that grass but they [cows] eat that grass. That is [my brother] because he's tiny and he's jumping on the bid." During a conversation with Jenny about the map, we observed an important insight about her view of pre-school as a place that is hers, but her brother comes to visit. She does not imagine that they will be in pre-school together, or that her brother and she will have the same friends. She is also beginning to prepare the setting for his arrival so people will be ready to look after him. The following content from the *child case study* for Jenny relates the PRs experience of this interaction:

Figure 5. Family map created by Richard and Jenny with their mother and the PR.

> [Jenny] talked a lot about minding [Richard] when he comes to the pre-school, and how the practitioners (specifically 2 in the setting) will mind him too. She has started to identify the smaller children in her group and has talked to them about Richard and how they can play with him. She talked about key friends she plays with, and describes them as her friends, with Richard having a different set of friends who are younger. She seems protective of her "little brother" and is now starting to discuss boundaries of play "my friends" "his friends". [Jenny, *child case study*, emotive responses section]

In summary, there was evidence of *representation* in all the case studies, though it was more prevalent in case studies where the mapping approach was used than in those where it was not. This was because where the mapping approach was used, PRs seemed to be able to infer from the children's own narrations, their perspectives, and experiences, whereas when it was not, inferences were from the child's day-to-day engagement with the setting, as observed at some distance.

4.3. Recognition

Multimodal texts were categorised into this sub-theme when a culture of respect was evident. By this, we mean the acknowledgment and valuing of children's contributions, unique qualities, and worldview. In summary, when interactions and data were affirming and salient as *representation*s of the children's own frame of reference. It was difficult to avoid dual categorising texts as *recognition* or *representation* because there are close connections between one and the other. For example, when representing a child's description of their social world, we are also recognising it and affirming by valuing it for its own sake. This is not surprising given the gestalt in Fraser's triune model of social justice [8] and the way in which the three elements are represented as interactions. Data identified under this subtheme were more prevalent in case studies developed from the mapping approach than in case studies where an alternative was used. It stands to reason that, where a PR is closer to the child, and interacting in the context of a dialogic relationship, they are more likely to (a) experience the 'essence' of the child, and (b) see and hear the world from the child's perspective because the child is 'speaking' it during the interaction.

An example is the following account by a PR of her conversation with Joe:

He drew a map of his school with a great emphasis on the big red door which he thought was hilarious, as he drew his head bouncing through the door to go to school and we laughed together as he talked about this part of his map, and did so joyfully. [Max, *child case study*, physical response section]

Here, the PR is responding to the child's map, and we can observe the humour and joy of the interaction. In this way, the PR seemed to be accessing the child's emotional experience of school and recognizing and then affirming the symbolism of the nursery door. With Joe, the PR also talked with Joe about George, a puppet who had an insulin pump like Joe's. She talked about what George meant to him and learned that for Joe, George was like him and helped him to feel okay about being 'different.' Another example was in the case study of Ciara, who drew a map with five sections, one showing things in her pre-school that mattered to her (including some 'slime' and water in the sensory tray), three showing people that mattered to her and a large rainbow. PR elicited conversation using the map, and Ciara led her to a painting of a rainbow that all the children had worked on. The PR recognised the importance of people and senses to Ciara and followed the child's lead into discussions of these, spending as much time immersing in these sensory experiences as Ciara wanted. There were some examples of *recognition* in the data collected through alternative methods, but these were descriptions of the child from a distance and included adults' views on the child's viewpoint and experience. Though PRs worked hard to interpret these through the child's eyes, the essence of the connection was stronger in the mapping data. In summary, *recognition* was prevalent in the data, particularly where the data collection included the mapping method. It was hard to separate *recognition* from *representation*, and some data was dual-coded. This is not surprising given that Fraser [8] conceptualises social justice as an interacting triune which is more than the sum of its parts. Table 3 provides enumerations for the data coded as *redistribution, representation,* and *recognition* for child case studies supported by a mapping approach, and those where an alternative elicitation or observation method was used. This data in this table is presented cautiously because our approach has been qualitative, but we offer the enumeration as a way of illustrating the prevalence of counter-hegemonic activity across the two methods.

Table 3. Enumeration: data coded as redistribution, representation, recognition.

	Mapping Method (Mean)	**Alternative Method (Mean)**
Redistribution	16 (2)	2 (0.5)
Representation	28 (3.5)	8 (2)
Recognition	4 (0.5)	0 (0)

Table 3 indicates that in terms of prevalence, the mapping activity provided more scope for *redistribution* and *representation* during the enactment of data collection and so may achieve research *as* inclusion more effectively, at least in the context of this study. In terms of *recognition*, it was only in the use of the mapping method that this was achieved, where across the case studies where mapping was used there was an average of 0.5 occurrences per case study, whereas in the alternative method, there were none.

Theme 3: *Stories of inclusion and participation.*

This theme comprised five subthemes which were people that matter, spaces and things that matter, belonging, joining in, and being recognised. There is not scope in this paper to present and discuss each of these at length, since descriptions of inclusion and participation in the *child case studies* were many and varied. The full research and technical report for the commissioned evaluation explores these in-depth [2]. However, it is important to provide some examples. From the children's perspective, the places, people, and things that brought them comfort or enjoyment were of particular interest. For example, Joe was keen to show the PR and he said, 'This is where I sit with my teacher and my friend for lunch' and enjoyed talking about the 'lovely tablecloth' and the flowers on the

tables. Outdoor spaces were also important to children. For example, Jenny and her friends had created a chicken area underneath a bamboo tree. They would pretend to swaddle the chickens (which were represented by sticks) and gather food from them. PRs observed and then interpreted participation in three main ways—when children were choosing things to do that they enjoyed and seemed to have meaning to them, where children were doing things with their peers (like riding bikes, painting, dancing, singing), and where children were participating in more structured activities with others.

In summary, there were multiple descriptions of inclusion and participation in preschools, and when using the mapping approach, these descriptions were closer to the child's own perceptions than they were when other approaches were being used. The full research and technical report for the AIM evaluation provides detailed accounts of findings related to the inclusion and participation of children in pre-school [2].

5. Discussion

This paper has raised three questions about research design for counterhegemony. The first was focused on the theories that we used to achieve a potentially counter-hegemonic methodology in the context of inclusive education (Q1), the second was about the way these theories were practically applied (Q2), and the third focused on how effectively the methods, once applied, did achieve counter-hegemony. Our aim was to make a significant contribution to data and debate about how to evaluate national focus on inclusion in ways that emulated inclusion as a project of social justice. In relation to Q1, this paper has described a methodological approach used in the evaluation of a national, high-profile policy for inclusive education in early education in Ireland, the Access and Inclusion Model (AIM) [2]. We have explained how the case study element of our research was about educational inclusion, at the same time as functioning as educational inclusion [1]. In a context where the meanings of inclusion are contested and dilemmatic [3–5], we chose to draw on Fraser's model of social justice [8] and synthesise it with conceptualisations of educational inclusion [10] to enact a research process with young children with disabilities, that enabled *redistribution* of power from researcher to child, *recognition* of the uniqueness of the child and their essence, and *representation* of the child's voice and perception in a national policy context [11–13]. The aim was to achieve a counter-hegemonic research process that challenged existing power distributions in ways that validated the child as a knower of truth, and Practitioner Researchers (PRs) as experts whose relational proficiencies were rightly recognised as relevant to research about inclusion [21,24]. This was in a context where the ECCE workforce had been feminised [17] and, consequently, its expert status denied [20,21] with implications for pay and status [18,22]. In relation to Q2 (practices used in the research), PRs were to deploy a multi-modal mapping method [27,28], selected because of its potential for eliciting children's lived experiences of inclusion, and making abstract concepts that unfold in the social world such as inclusion material [30] in ways that had meaning for children [31] and could be interpreted. Our methodological design assumed that the mapping method would be counterhegemonic through elevating the child's voice in a dialogic relationship where the child held the power over the content and direction of the interaction. As it turned out during implementation, four PRs were not able to use the mapping method at all but used more distant observations of the child in their pre-school. Two PRs had used a version of the mapping method but not the full process described in Table 2. These findings tend to illustrate how the PRs were able to adapt methods in ways that enabled them to understand the child's experience of inclusion and participation. They also show that the mapping method was more difficult to enact when children had difficulties with speech that were sometimes difficult for PRs to respond to in the time they had in the setting. This illustrates how PRs may need more time with children and with families to build up a dialogic relationship. This leads to important questions about how the mapping method could be developed to elicit a dialogic conversation that does not use the spoken word, and how pre-school staff and PRs could be encouraged to have confidence in its potential in circumstances where children are non-speaking. It

also raises questions about how sufficient our research design was in taking account of the time and resources needed to make the mapping method work well. These questions are worth asking because where the method is failing with children whose voices may be in most need of amplification, we cannot claim that we are achieving research about inclusion when some children cannot participate. These questions are also worth asking because of another significant finding in this paper. That is the potential of our approach for achieving counter-hegemony within the theoretical framing we have described. This brings the paper's third question into view: to what extent did the approach achieve counter-hegemony?

Notwithstanding concerning shortfalls in reach and practicability, the findings indicate that where the mapping method was deployed, even where it was adapted, *redistribution*, *representation*, and *recognition* (or the 3Rs) were more likely to occur. For example, in the case of Joe, the map-based walking tour of the pre-school had helped the PR gain insight into how important diabetes was to Joe's identity, and how much comfort he gained from his peers' knowledge and acceptance of this difference. Joe's joyful relationship with pre-school was also understood from his map, and the picture on his map of his head bouncing through the pre-school door helped us to know something rich about his joyous experiences. These insights into Joe's identity and emotional world, in our view, are indicative of a culture of *recognition* being enacted through the research process [12]. Equally, in the case of *redistribution*, the map created the starting point for child-led conversation and activity. For Mary, the creative task of drawing a map of her bedroom and a picture of herself and a garden enabled the dialogic relationship to start with value to come closer to the child's experience. The findings indicate that deploying all stages in the mapping approach is a useful way to build a dialogic relationship with a child and, hence, to elicit their perspectives, but that the full approach is not used as easily when children find it difficult to speak with the PR because of a disability or because they are in the process of learning to speak English as an Additional Language. This implies that the mapping activity provided more scope for *redistribution* during the enactment of data collection and may achieve research as inclusion more effectively, at least in the context of this study. However, these data demonstrate how PRs' skill and experience as practitioners enabled them to adapt dexterously to children and different contexts, and to harvest useful accounts of inclusion and participation (see Theme 3) that were sensitive to circumstances.

Table 3 contained some cautious enumeration of the data coded to *recognition*, *representation*, and *redistribution*. We use the word cautious, not because we doubt the rigor of our analysis, but because we used a qualitative approach with a relatively small sample, and initially, it was common for data to be dual coded as, for example, *recognition* and *representation* or *redistribution* and *recognition*. Deciding that a unit of meaning was either one or the other was challenging and not always wholly satisfying. However, Table 3 does provide a defence for the counter-hegemonic claims we have made about our methodological approach. The mapping method was used, it was more successful in achieving the 3 Rs at the point of implementation, as evidenced in the data. It is also important to note that where the mapping approach could not be used, PRs' close-to-practice expertise meant they were able to adapt their approach to circumstances in ways that still harvested useful accounts of inclusion and participation relevant to the evaluation of AIM. The findings indicate that deploying a multimodal mapping approach is a useful way to build a dialogic relationship with a child and hence to elicit their perspectives, but that it cannot yet be used as easily when children find it difficult to speak with the PR because of a disability or because they are in the process of learning to speak English as an Additional Language. However, there is a need to develop the mapping method so it can be used more fully and flexibly with all children. It is not just being close to practice that matters here, but being close to the child. By this, we mean being in a dialogic relationship that enables practitioners to access the child's world as authentically as possible. A dialogic relationship takes time to build, and our findings demonstrate how (a) the time allocated to PRs to complete the case studies may be insufficient in some contexts and for some children, and (b) that when time is sufficient

to build this relationship, counter-hegemonic actions can take place. On balance, it has become clear that the mapping process does offer a useful scaffold for building a dialogic relationship between a child and a PR who is external to the setting that they attend, but that this may take time. Beyond the evaluation of AIM, we would argue that multimodal mapping as a means of investigating inclusion could be a powerful catalyst for inclusive practice if it were in the hands of the practitioners who work with children on a day-to-day basis. We want to emphasise that we see practitioner engagement with this approach as dialogic, rather than as an evaluation of a setting's inclusive performance, that is, as a performative exercise [23]. Instead, we see this relationally, with the map being a tool for coming closer to children's experience of inclusion and participation, and through this knowledge, developing practices that perpetuate social justice to deeper and deeper levels. Our findings suggest that it is worth pursuing the introduction of the mapping method to the sector, as a practitioner research tool that investigates inclusion in ways that may deepen it. The skill of the PRs as co-researchers, when using or not using the mapping method, meant that the evaluation data contained accounts of inclusion on the child's own terms. We were able to view inclusion as the people, spaces, and things that mattered to children. Theoretically, we support the argument that inclusion and meaningful participation do indeed have a myriad of meanings [3,4], but in the case of the AIM policy, we suggest that the focus should be on what matters to children. Our understanding of progress in social justice in the context of AIM is best understood and presented in the children's vernacular. At the same time, where practitioners are involved in collecting data, and interpreting it at the distal (national evaluation) and proximal (own practice), the findings can extend into a vernacular of practices bringing catalytic validity to research about inclusion [15]. Our rationales for the research design had also adopted a feminist framing since we wanted to counter the feminisation of the ECCE workforce and validate the expertise of the workforce through engaging PRs as co-researchers in an evaluation of a high-profile national policy. Analysis of how much this rationale has resulted in counter-hegemonic outcomes for the PRs has been beyond the scope of this paper, but a personal reflection has been provided by Sheridan et al. [36] to indicate how the experience of co-research has impacted professional identity and practice. We continue to work with our PR community to co-produce insights and resources of value to a practice community who are pursuing inclusion in the context of national policy, and who may gain from the conscientization we have pursued and achieved in our work together [16]. Here, we continue to be motivated by our praxiological intentions for impact and our wish for catalytic validity [15].

6. Conclusions

This paper has described the counter-hegemonic methodological approach applied to the evaluation of a high-profile national policy of inclusion for children with disabilities in Early Childhood Education and Care (ECCE). This policy, termed the Access and Inclusion Model (AIM) has been operational in Ireland since 2016. AIM seeks to enable the full inclusion and meaningful participation of young children with disabilities in mainstream ECCE. Universal and targeted supports are provided by the state to build the inclusive capacity of ECCE, including state-funded professional development (universal), and support for individual children who would not experience inclusion without it (targeted, e.g., additional staff to reduce the adult to child ratio in the pre-school). The evaluation of the policy implemented a mixed methods investigation into the implementation and impact of the policy. This included surveys, interviews, and case studies, and the study engaged over 2000 participants. The outcomes of the full evaluation have been published by the Department for Children, Equality, Disability, Integration and Youth (DCEDIY) [2].

The counter-hegemonic element of this large-scale evaluation was designed into to the case studies of pre-schools who were participating in the AIM policy, and children who were supported by it. The methodological approach to the evaluation of AIM included the recruitment of seventeen practitioners as co-researchers, who deployed a participatory, child-centred, multi-modal mapping method to investigate children's lived experience

of inclusion and participation in their pre-schools. The rationales for the methodological design were counter-hegemonic in two ways. Firstly, the engagement of Practitioner Researchers (PRs) in the evaluation of a high-profile national policy for inclusion was deliberately resistant to feminising discourses operating on the ECCE workforce to reduce their status. It intended to affirm this community's expertise whilst validating the relevance of relational skills to the investigation of inclusion. Secondly, the participatory method applied to the case studies of children was designed to elevate their voice, and put front and centre, their lived experience of inclusion and their perspective on the spaces, people and things that really mattered to them.

In this paper, we have defended our claim for counter-hegemony carefully and thoroughly with reference to theory and method. We argued that inclusion as a concept, is a near synonym with social justice and drew on Fraser's triune model of social justice [9,10] to explain how research *about* inclusion can operate *as* inclusion where it pursues (and achieves) *redistribution* of power, *representation* of lived experiences, and *recognition* of uniqueness for marginalised individuals or communities. In the evaluation of AIM, these communities were identified to be young children with disabilities (the group supported by AIM) and practitioners in a feminised workforce.

An important question for this paper was whether our methodological design, when implemented, was counterhegemonic in effect, and for this question we focused on children. We applied rigorous thematic analysis to the texts and imagery collected by PRs, including the *child case study* templates, and the documents, recordings, pictures, and artefacts gathered by them to inform their interpretations of children's inclusion and participation. The aim was not to check up the PRs interpretations (since PRs developed these interpretations in the context of a critical and reflective community), but to test whether *redistribution*, *representation*, and *recognition* had been achieved. Our findings provide clear support for the claim that the engagement of PRs as co-researchers applying multi-modal mapping did result in counter-hegemony. The methodological approach helped to ensure that power was *redistributed* because children were positioned as important contributors in the research, and their subjective experience of inclusion was positioned as truth telling and truth knowing by (a) the PRs interactions with them and the data they collected and (b) the reporting of these findings in the full technical and research report for AIM [2]. In the spirit of *recognition*, PRs were responsive to children's preferences and needs, and they valued the child's story through following their lead and noting something of the essence of the individual. And finally, children with disabilities were *represented* because they were seen as experts in their own inclusion and their stories were amplified with a concern to find ways to advance inclusive practice from their accounts. However, we also found that the time and resources given to PRs to complete the child case studies were sometimes insufficient to achieve the dialogic relationship needed to access children's own perspectives authentically, particularly where children were non-speaking or learning to speak English as an additional language. In these cases, it was not possible for PRs to use the mapping approach but, nonetheless, the PRs adapted their method to circumstances and accessed meaningful stories of inclusion and participation of value to the AIM evaluation. We do not question the wisdom of decisions to adapt the method, though an important finding was that when the mapping approach was used, *redistribution*, *representation*, and *recognition* were more prevalent. The method was a useful scaffold for building a dialogic relationship and getting close to the child's lived experience of participation and inclusion, as expressed in their own terms.

This paper makes a notable advancement in both data and discourse regarding the evaluation of high-profile national policies centred on inclusion. Firstly, it provides theoretical backing for researchers and policymakers seeking to advocate for the credibility and appropriateness of participatory, co-research methodologies. This is particularly pertinent in a context where cost–benefit analyses, randomised control trials, and 'objective' metrics are favoured and assumed to hold greater validity and defensibility as measures of impact. Secondly, it makes a significant methodological contribution by offering a comprehensive

and transparent overview of the participatory methods employed to effectively evaluate the implementation and impact of AIM. We have advocated for multi-modal mapping as an elicitation approach with the potential for counter-hegemonic impact. Moreover, the paper has reported the challenges and limitations associated with such approaches, recognising their practical significance to the policy and research community. We continue to work with our PR community, to pursue catalytic validity, and provide for practitioners and policy makers, tools that are relevant to investigating *and* advancing social justice.

We call on policy makers and researchers to prioritise the participation of close-to-practice researchers *and* children in policy evaluations in the ECCE sector, not least to secure authentic, and actionable accounts of how well such policies are working on the ground, but also to ensure that the way that inclusion is investigated is congruent with the dynamic of social justice. We also commend the Department for Children, Equality, Disability, Integration and Youth (DCEDIY), for their openness to inclusive counter-hegemonic approaches to research design since these are far from traditional in evaluations of high-profile national policies.

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