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National Workforce Centre for Child Mental Health

Practical strategies for engaging children in a practice setting

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This paper is part of a suite of resources focusing on children's participation in decisions that affect them. **See all resources**

What is this resource about?

This resource introduces practitioners to practical strategies and ideas to consider when engaging children (aged 0–12 years) in a practice setting. It briefly discusses the relationship between children's engagement and children's participation in decisions that affect them, including the importance of effectively engaging children in practice in order to facilitate decision-making activities.

Who is this resource for?

This resource is for practitioners who work with children and their families, especially those who are early in their career, newer to working with children, feel less comfortable working with children, or are seeking new ideas for engaging children. Examples of practitioners that may find this resource helpful include general practitioners and allied health professionals.

Introduction

The *United Nations Convention on the Rights of the Child* (1989) contributed to a global transformation in how children are viewed, including their status and rights. This included acknowledging children as 'agents in their own right' (Kellett, 2011, p. 2). This movement has also required practitioners, organisations and policy makers to identify effective strategies for engaging with children so that they can express their views, be consulted and listened to, and meaningfully participate in decisions that affect them (Kellett, 2011).

What is effective engagement with children?

Practice considerations

- Actively engage children in clinical practice in order to encourage and enable their meaningful participation in decisions that affect their lives.
- Ensure that children's participation is voluntary, and that informed consent is obtained. Effective engagement of children can support these core obligations.
- Ensure that children's safety, protection, welfare and wellbeing are upheld when involving children.

For the purposes of this resource:

- **child participation** refers to the meaningful (i.e. active, safe and informed) involvement of children in decisions that affect their lives. For an introduction to child participation, including definitions and models, refer to *An overview of child participation: Key issues for organisations and practitioners*.

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children's engagement refers to the child being in a state of readiness that will enable them to interact meaningfully with the practitioner (and activities).

Children's engagement and children's participation are inter-related (Department of Communities and Justice, 2019; Kellett, 2011). It is through actively engaging children in clinical practice that practitioners can foster meaningful participation (Department of Communities and Justice, 2019). For example, effective engagement can encourage and enable the child to have their say and to have their perspective listened to, understood and considered (Department of Communities and Justice, 2019; Kellett, 2011). Vice versa, participatory activities seek to involve the child, give them a voice and ensure this voice is considered, which, in turn, can promote increased engagement (Department of Communities and Justice, 2019).

Elements of effective engagement (Department of Communities and Justice, 2019; Kellett, 2011) can include the child:

- being aware of, and attentive to, what is taking place in the session
- listening to, and taking in, what is being communicated
- feeling safe and comfortable enough in the child–practitioner relationship to interact and communicate their voice.

Importantly, activities that involve the participation of children must:

- be voluntary (NSW Advocate for Children and Young People [NSW ACYP], 2019)
- obtain informed consent (NSW ACYP, 2019)
- adopt a child–centred approach whereby a child's safety, protection, welfare and wellbeing are paramount (Department of Communities and Justice, 2019).[1]

The effective engagement of children by practitioners can facilitate these various obligations related to consent, voluntary involvement and children's safety.

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1.   The importance of a child-centred approach is ingrained in section 9 of the *Children and Young Persons (Care and Protection) Act 1998*. The Act states that actions and decisions about a child or young person must hold their safety, protection, wellbeing and welfare as paramount (Department of Communities and Justice, 2019). The *National Principles for Child Safe Organisations* (Australian Human Rights Commission, 2018) provide a national approach to embedding child safe cultures within organisations.

Strategies for practitioners to consider when engaging children

This resource presents strategies and ideas for practitioners to consider when trying to increase children's engagement in clinical practice. This is not an exhaustive list, should not be implemented in isolation, and is not intended as a formal practice guide. Rather, the appropriateness and use of the suggestions must be considered in terms of each child's individual situation and needs, with tailoring, monitoring and revision as needed.

The strategies are presented according to the following themes:

- A strengths-based approach
- Child-friendly scheduling
- Time and patience
- Physical environment
- Spoken and written communication
- Developmentally-appropriate explanations
- Non-verbal communication
- Play, creativity and imagination
- The uniqueness of each child.

A strengths-based approach

Practice considerations

- Adopt a strengths-based approach that identifies and harnesses a child's strengths.
- Remember that children are more than their vulnerabilities or difficulties.
- Consider strengths such as the child's skills, personal characteristics, resources, values and hopes.

A strengths-based approach is a holistic way of working, adopted by many practitioners, whereby the focus is on the child's strengths, competencies and resources (Department of Communities and Justice, 2019). The focal point is not the child's difficulties, and they are viewed as more than just their deficits (Department of Communities and Justice, 2019).

This approach requires practitioners to identify and harness a child's individual strengths, including their skills, personal characteristics, resources, values and hopes (Department of Communities and Justice, 2019). Through implementing a strengths-based approach, practitioners can also strengthen engagement and participation with children and families (Department of Communities and Justice, 2019).

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Strategies that may assist with engaging and involving children through a strengths-based approach include:

- asking the child and/or their family what the child's strengths are. Strengths to consider include skills, talents, personal characteristics and values (Department of Communities and Justice, 2019)

- identifying, emphasising and discussing the child's strengths and areas in which they are doing well. This should be done in a way that is clear and accessible to the child (Department of Communities and Justice, 2019). Practitioners may wish to use various resources that can assist in the identification of children's strengths, such as picture cards[2]

- highlighting and celebrating the child's successes, even if these seem unimportant or unremarkable to others. For example, celebrating when a child reaches a specific reading level after considerable effort, even if this level remains below that of their peers

- using language that is positive to encourage engagement. Carefully choosing the right wording can be beneficial and empowering (Department of Communities and Justice, 2019).

Child-friendly scheduling

Practice considerations

- Consider the best time of the day for the child to be seen.
- Keep interactions shorter and more frequent, rather than longer and less frequent.

Practitioners can optimise a child's engagement through child-friendly scheduling (Queensland Child & Family Commission, 2019). This involves considering the time of day for the session and length of the interaction.

The time of day a child is seen can affect their level of engagement (Kellett, 2011). Children, especially young children (aged 0–6 years), can tire easily and tend to become more fatigued throughout the day (Kellett, 2011). Seeing children in the late afternoon is unlikely to be as effective for engagement and communication (Kellett, 2011). Practitioners should also avoid scheduling sessions during a child's nap or meal times, as tiredness or hunger may reduce their capacity to engage (Kellett, 2011).

A child's ability to listen, communicate and engage can also be affected by their emotions (Clark, 2011). Hence, practitioners should consider whether a child's current emotional state will promote engagement – or whether it is best to postpone. Parents and carers (and even children) can be a key source of information about a child's daily routine and their input can inform child-friendly scheduling (e.g. When is nap time? What time of day is the child typically most rested?).

It can also be helpful to consider the length of the interaction. Children, especially young children, have attention spans that are shorter than most adults, as well as lower thresholds for boredom (Kellett, 2011). Consequently, children are likely to benefit from shorter and more frequent sessions, rather than longer and less frequent sessions (Kellett, 2011).

Time and patience

Practice considerations

- Be patient and be prepared to allocate extra time to allow children to communicate and meaningfully engage.
- Don't underestimate the length of time that children may need to communicate. If children feel hurried or pressured to speak, they may be less likely to engage.

Listening to and speaking with children cannot be hurried, especially with younger children (Clark, 2011). Adults that have had minimal or no exposure to communicating with children may underestimate how long children typically need to provide an answer (Kellett, 2011). If children feel rushed or pressured to speak, they are less likely to communicate or get involved (Day, 2008).

To meaningfully communicate and engage with children, practitioners must be patient and allocate additional time than what might typically be spent (Clark, 2011; Day, 2008; Kellett, 2011). They should also give children sufficient time to communicate; this includes being comfortable with silences and allowing the child to speak without interruption (Department of Communities and Justice, 2019; NSW ACYP, 2019; Raising Children Network, 2019a).

It can also be beneficial to give children time to become familiar with the environment before starting formal interviews or assessments (Mitchell-Lowe & Egglestone, 2009). For example, consider allowing the child to safely explore the room and any child-friendly activities while speaking with adults; this will help them to settle in before beginning formal activities.

The importance of sufficient time to become comfortable

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2. One example is the *Strength Cards*®, which can be used for identifying, talking about, and reflecting on strengths (St Luke's Innovative Resources, 2019a).

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with the environment and process has also been reflected in qualitative research on children's views regarding child and adolescent mental health services (Mitchell-Lowe & Eggleston, 2009). For example, children commonly expressed that increased familiarity with the environment and process helped them to feel less anxious.

Practitioner patience and extra time are particularly important for supporting certain subgroups of children to be able to engage. For example, some children, when faced with a new practitioner and/or setting, may experience anxious feelings or be slower to warm. Children with communication difficulties are also likely to need extra time and support to communicate and engage (Clark, 2011).

Physical environment

Practice considerations

- Create a child-friendly physical environment to maximise children's engagement (e.g. offering developmentally appropriate children's activities and child-friendly furnishings).
- Consult with children when creating child-friendly facilities and clinical spaces, as they are a valuable source of information.

The physical environment can affect a child's ability to engage in multiple ways and is important for practitioners to consider when attempting to communicate and engage with children (Department of Communities and Justice, 2019). Whether the interaction occurs in the child's setting (e.g. home, kindergarten, school) versus the practitioner's setting (e.g. clinic room) can influence the degree to which a child engages (Kellett, 2011).

For interactions in a clinical setting, practitioners and organisations should be mindful of creating child-friendly environments that maximise the potential for engagement (Clark, 2011; Mitchell-Lowe & Egglestone, 2009). There are a range of environmental changes that may help children feel more comfortable. Providing entrances, reception areas and clinic rooms/spaces that are welcoming (rather than daunting or intimidating) can help to engage children (Kellett, 2011). It is important that these spaces feel comfortable, safe and positive for children. Examples of how this might be achieved include:

- offering child-friendly furnishings, such as comfortable floor cushions or child-sized chairs and tables
- offering children's activities (see below for further information)

- ensuring that staff, including those at reception, are warm and friendly
- displaying colourful paintings and drawings, including those by children
- ensuring that there is adequate lighting, rather than shadows and darkness (Mitchell-Lowe & Egglestone, 2009).

Offering child-friendly activities that are age- or developmentally-appropriate can also help to encourage children to engage with practitioners (Harris & Manatakis, 2013; Mitchell-Lowe and Egglestone, 2009). Examples of such activities include:

- pencils/crayons with drawing paper, colouring pages or children's activity sheets
- children's books
- toys
- stickers and stamps.

Practitioners could investigate a child's interests beforehand to tailor activities (e.g. colouring sheets related to a favourite movie).

The importance of providing a child-friendly environment is echoed in qualitative research on children's voices regarding child and adolescent mental health services (Mitchell-Lowe & Eggleston, 2009). For example, children highlighted the need for bright clinical spaces with adequate lighting and importance of offering age-appropriate children's activities. Children themselves should be consulted when trying to ensure that facilities and spaces are child-friendly, as they are a valuable source of information and feedback (Clark, 2011; Harris & Manatakis, 2013; Mitchell-Lowe & Egglestone, 2009).

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Spoken and written communication

Practice considerations

- Ensure that spoken and written communication is clear, accessible and tailored to a child's age or developmental level.
- Be mindful that accessible verbal communication may be especially important for particular children (e.g. children with disability, children from culturally and linguistically diverse backgrounds).

Verbal communication is communication that uses words (both spoken and written). To engage children effectively, practitioners must ensure that language and explanations are clear and appropriate (Department of Communities and Justice, 2019; Kellett, 2011; NSW ACYP, 2019). This includes carefully tailoring one's communication to different ages and developmental levels (Department of Communities and Justice, 2019). Further to this, formal language, jargon, and acronyms should be avoided (Department of Communities and Justice, 2019; NSW ACYP, 2019).

Qualitative research exploring children's perspectives on child and adolescent mental health services has also suggested that the use of understandable, developmentally appropriate language is important to children (Mitchell-Lowe & Eggleston, 2009). A detailed discussion of how to communicate with children, including in an age-appropriate manner, is beyond the scope of this paper. Please refer to 'Further reading' for additional resources on this topic.

Ensuring accessible verbal communication is especially important for some groups of children. For example, for children of culturally and linguistically diverse (CALD) backgrounds, language can act as a barrier to effective engagement and meaningful participation (Department of Communities and Justice, 2019). For these children, and their families, specific communication strategies may be needed to optimise communication, engagement and participation, such as the use of interpreters and/or translators (Department of Communities and Justice, 2019; NSW ACYP, 2019). Another example is children with disability, who may require communication aids specific to their disability to engage effectively (e.g. communication boards/books, e-communication technologies). Additional resources on communicating and engaging with these groups can be found in 'Further reading'.

Not only can language that is inaccessible to the child impact negatively on their engagement with a practitioner; it can also harm the child–practitioner relationship and intensify existing unequal power relationships (Kellett, 2011).

Developmentally-appropriate explanations

Practice considerations

- Provide children with clear, developmentally-appropriate explanations about your role and what will happen in session/s (if deemed appropriate).
- Use explanations to minimise misunderstandings by children of what will happen. Explanations may also lessen any worries or distrust.

To maximise children's involvement and engagement, practitioners should provide clear, developmentally-appropriate explanations about their role and what will happen in the session/s (if deemed appropriate) (Department of Communities & Justice, 2019; NSW ACYP, 2019). Examples include offering spoken explanations or handouts that are understandable to the child (Kellett, 2011).

Sometimes children may have incorrect understandings of what will occur, which might negatively affect their engagement. For example, a child might assume that being taken to a clinic room means that a negative event is about to take place (e.g. an injection, a painful procedure). Developmentally-appropriate explanations can help foster accurate expectations in children and may increase feelings of safety.

By clarifying their role and expectations, practitioners may also lessen any worries or distrust that a child has towards the practitioner (Department of Communities & Justice, 2019). Practitioners going beyond their name and sharing a few small details about themselves (e.g. sharing a favourite hobby or sport) might also help engage children and encourage a more equal power relationship, especially when children are expected to reveal information about themselves (Kellett, 2011).

In some circumstances, children may express perspectives, ideas and preferences that cannot be acted on (Clark, 2011; Edbrooke-Childs et al., 2016). When this happens, providing explanations can help children to still feel informed and valued, and may communicate that their views have still been heard (Clark, 2011; Edbrooke-Childs et al., 2016; Harris & Manatakis, 2013).

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Non-verbal communication

Practice considerations

▪ Reflect on your own non-verbal communication towards the child and the child's non-verbal communication towards you.

▪ Consider the potential impact of your non-verbal communication (e.g. facial expressions, tone of voice, body language) on a child's level of engagement.

To effectively engage children, practitioners must not only consider their verbal communication, but also their own non-verbal communication (Department of Communities and Justice, 2019). Non-verbal communication refers to the ways that we can communicate that do not involve language. Examples (Harris & Manatakis, 2013; Raising Children Network, 2019b) include:

- eye contact
- facial expressions
- tone of voice
- gestures
- body language
- personal space.

Practitioners should reflect on non-verbal communication in both directions. That is:

- a practitioner's non-verbal communication towards a child; and
- a child's non-verbal communication towards a practitioner.

When considering a child's non-verbal communication, a practitioner must use all their senses to attend to what – and how – the child is communicating (Clark, 2011). This is because many children, especially young children, might not communicate verbally (Kellett, 2011). Carefully attending to what children are trying to tell you through non-verbal cues can allow you to respond in a way that encourages them to engage with you (Clark, 2011; Harris & Manatakis, 2013). For example, a soft tone of voice and reduced eye contact might mean that a child is feeling shy or anxious, so would benefit from additional time, patience and encouragement to engage.

Offering non-verbal opportunities for children to express their perspectives, views, emotions and preferences can also promote engagement (Department of Communities and Justice, 2019). Examples include the use of:

- visual arts, such as drawing, painting and sculpture (Clark, 2011; Harris & Manatakis, 2013)

- communication boards and books that contain pictures or symbols, allowing children to communicate via pointing or directing their gaze (Department of Communities and Justice, 2019)
- picture cards that children can manipulate or point to, such as cards that display different feelings (Clark, 2011).[3]

Practitioners should also consider the potential effect of their own non-verbal communication on a child's level of engagement. Non-verbal communication has the potential to help a child feel safe and comfortable, and to build a positive child–practitioner relationship (Department of Communities and Justice, 2019). On the contrary, certain non-verbal cues may make the child feel afraid and controlled (Department of Communities and Justice, 2019).

Body language that conveys a sense of physical strength over a child may make them fearful, and foster disengagement (Department of Communities and Justice, 2019). For example, movements that are harsh, jarring or jabbing might be viewed as threatening (Kellett, 2011).

The child–practitioner height difference created by a standing position might also decrease engagement (Kellett, 2011). Height differences can be easily addressed (Kellett, 2011) through:

- sitting down (e.g. using a child-sized table and chairs)
- sitting on the floor together (e.g. using floor cushions)
- squatting at the child's level.

Practitioners could also adopt a relaxed body posture and open seating arrangement, rather than being protected behind a table while the child is more exposed and vulnerable (Kellett, 2011), to encourage communication and engagement.

Finally, tone of voice and facial expressions are also worth considering when engaging children. Using a tone that is warm and pleasant is more likely to be effective than a loud, booming voice (Kellett, 2011). Facial expressions are also important – for example, smiling with a relaxed expression can communicate to a child that a practitioner is welcoming, open and willing to listen (Kellett, 2011; Raising Children Network, 2019b). Nodding your head can also show the child that you are actively listening to what they are saying (Raising Children Network, 2019b).

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3. An example of a picture cards resource is *The Bears* cards, which can be used with children to identify feelings (St Luke's Innovative Resources, 2019b).

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Play, creativity, and imagination

> **Practice considerations**
>
> - Use methods that involve play, creativity and imagination to engage children and promote participation. Examples include visual arts, storytelling, role play and pretend play.
> - Observe and listen while children create and play – the process is as important as the final product.

Strategies involving play, creativity and imagination can help to engage children, including for longer time periods (Clark, 2011; Harris & Manatakis, 2013; Kellett, 2011). These approaches can also give children more natural opportunities to clarify, express and communicate their views, ideas, feelings and wishes (Clark, 2011). 'When adults deeply engage in children's play … children [may] respond with their own deep level engagement, enthusiasm and playfulness' (Harris & Manatakis, 2013, p. 61).

A range of methods exist for engaging children through play, creativity and imagination, including in participatory activities (Clark, 2011; Harris & Manatakis, 2013; Kellett, 2011). Common examples in the research literature are outlined below.

Visual arts

The visual arts offer a range of engaging methods for allowing children, including young children, to communicate their views, ideas and preferences (Clark, 2011; Harris & Manatakis, 2013). Artistic methods should be selected based on a child's interests or preferences (Harris & Manatakis, 2013). Examples include drawing, painting, creating collages, and sculpting. For older children, opportunities to express their experiences and views via photography or videography can be helpful (NSW ACYP, 2019).

'Listening to children while they are in the process of creating is often as important as talking about the final product,' and this includes observing their non-verbal communication (Clark, 2011, p. 5; Harris & Manatakis, 2013). It is vital to spend time with the child, clarifying and understanding the meaning underlying their artistic piece. Seek more detail from the child, rather than making assumptions about what has been created, what it signifies, and its purpose (Clark, 2011; Harris & Manatakis, 2013).

The visual arts can be particularly helpful for engaging, communicating and consulting with children who find conversations difficult (e.g. those with verbal communication problems) (Clark, 2011).

Storytelling

Storytelling can help engage children, particularly very young children, and can allow them to communicate in a way that feels safer and less intimidating (Harris & Manatakis, 2013; Kellett, 2011; NSW ACYP, 2019; Queensland Child and Family Commission, 2019). Dolls, finger puppets, or favourite toys can be useful tools for facilitating storytelling, and might be used to represent the voice of the child and/or adult (Kellett, 2011). If there is upsetting or potentially embarrassing information that a child wishes to communicate, these tools (e.g. puppets, dolls) might allow them to divulge this in a way that feels safe (Kellett, 2011).

Pretend play and role play

Pretend play and role play are fun activities that can increase children's engagement and help gather information about their views, experiences and preferences, particularly in very young children (Clark, 2011; Harris & Manatakis, 2013; NSW ACYP, 2019). The safety offered by communicating using an alternative identity might be appealing to some, and may lead them to express emotions, views and thoughts with increased openness (Clark, 2011; Kellett, 2011).

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The uniqueness of each child

Practice considerations

- Children are unique so be flexible and varied in your approach to engaging them.
- Tailor engagement strategies to each child, based on their needs and interests, with monitoring and revision as required.

Children are diverse and each child is unique (Kellett, 2011; NSW ACYP, 2019). Attempts to engage children should be tailored to the individual child. Approaches that treat children as a group of similar individuals are less likely to be effective (Kellett, 2011). Rather, a diversity of skills and approaches, in conjunction with practitioner flexibility, are needed to engage children (Department of Communities and Justice, 2019; Harris & Manatakis, 2013; Kellett, 2011). Consequently, the strategies outlined in this resource should be carefully tailored to each child's situation and needs, with monitoring and revision as needed.

Practitioners must also be mindful that there are some groups of children for whom engagement strategies may need to be carefully tailored to consider specific needs and issues of relevance (Baker et al., 2013). This tailoring can be critical for supporting meaningful participation and inclusion. These groups include:

- children from culturally and linguistically diverse backgrounds
- children who are refugees and migrants
- Aboriginal and Torres Strait Islander children
- children with disability and/or additional needs
- children who have experienced adversity.

Refer to the following section for additional information.

Engaging and involving specific groups of children

While a detailed discussion of engaging specific groups of children is beyond the scope of this paper, examples of issues to consider are briefly addressed below. Refer to 'Further reading' for additional resources that discuss the engagement and participation of these groups.

CALD and Aboriginal and Torres Strait Islander children

Attempts to engage children should take into account a child's language and culture, and should promote inclusion and non-discrimination (Department of Communities and Justice, 2019). This is especially important when engaging with children from culturally and linguistically diverse backgrounds, Aboriginal and Torres Strait Islander children, and refugee and migrant children (Kellett, 2011). For some cultural groups, such as Aboriginal and Torres Strait Islander communities, historical factors will also need to be acknowledged and considered. Practitioners can use the expertise of culturally-specific services and organisations to generate additional ideas and strategies for optimising communication, engagement and participation of children from a specific culture (Baker et al., 2013; Department of Communities and Justice, 2019; NSW ACYP, 2019).

Children with disability

Children with disability are likely to require considered approaches to engagement and participatory activities. For example, in some cases a child's ability to communicate may be affected, including their ability to understand information and to express their views, feelings and preferences (Department of Communities and Justice, 2019). Children with disability may need strategies tailored to their disability to enable or optimise their engagement and participation. Examples of supports include the use of a sign language interpreter for children with hearing loss or the use of Braille materials for children with vision impairment (Department of Communities and Justice, 2019; Kellett, 2011).

Children who have experienced adversity

Children can be exposed to many forms of adversity, including family and domestic violence (FDV), child maltreatment, housing instability and parental mental illness. These children will require careful, considered strategies to promote their engagement, as otherwise they may contribute less or disengage altogether. For example, practitioners should ensure that the environmental setting provides children with a feeling of safety and security, both psychologically and physically, to maximise their engagement and participation (Baker et al., 2013). For an exploration of issues to consider when involving children in the child protection system, refer to *Children's participation in decision-making processes in the child protection system*.

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Beyond the practice setting: Ideas for engaging children in service design, delivery and evaluation

This resource introduces practitioners to strategies for promoting children's engagement in an individual practice setting. However, a range of engagement methods also exist to support organisations and governments with incorporating children's voices in collective decision making about service design, delivery and evaluation. These collective engagement methods must be selected with careful consideration of the needs and interests of the specific group involved (e.g. age range, developmental level, interests) (Baker et al., 2013).

Importantly, any attempts to engage and consult with children must uphold and prioritise children's safety, needs and wellbeing (NSW ACYP, 2019). This includes the responsibility of individuals, organisations and governments to minimise any potential risk to children in engagement and participation activities, as well as to have appropriate procedures and processes to minimise risk (NSW ACYP, 2019).[4]

Some examples of methods that can be used by organisations and governments to engage children in collective decision making are provided below.

Observation

Observing children can help to gather children's voices, especially for non-verbal or pre-verbal children (Clark & Moss, 2001; Clark & Moss, 2005; NSW ACYP, 2019). This method should not be used alone, as it only gives an adult viewpoint of children's lives (NSW ACYP, 2019).

Interviews and focus groups

Conducting interviews or focus groups with children can assist with incorporating their voices into collective decision making (Clark & Moss, 2001; Clark & Moss, 2005; NSW ACYP, 2019). These methods might be preferred by some children over creative approaches, as they may feel as if they are being treated like adults and that their voice is being given greater legitimacy.

Audio, photography or videography

Allowing children to communicate and engage through their own recordings (e.g. taking photographs of things that are important to them, such as locations or items)

(Baker et al., 2013; Clark & Moss, 2001; Clark & Moss, 2005; NSW ACYP, 2019).

Visual arts

Enabling children to express their voice through visual arts, using a medium that captures their interest (Harris & Manatakis, 2013). Examples include drawing, painting, murals, sculptures and carvings.

Performing arts

Supporting children to communicate their views through performing arts with the help of a performing artist or teacher (Harris & Manatakis, 2013). Examples include performances, role play, music, song and dance.

Children as storytellers, tour guides and mapmakers

Children's engagement and participation can be promoted through the use of storytelling (Harris & Manatakis, 2013). This could include allowing children to act as tour guides and to direct the content/recording of a tour (e.g. a tour of their day-to-day life; a tour of a centre to obtain their views or suggestions for change) (Clark & Moss, 2001; Clark & Moss, 2005; NSW ACYP, 2019; O'Kane, 2013). The content of tours could also be recorded on a map, which children can add to (NSW ACYP, 2019).

This information is not intended to be comprehensive. Please refer to 'Further reading' for additional resources which aim to support organisations and governments with engaging children in collective decision making.

Conclusion

Children's engagement in practice and participation in decision-making processes are inter-related. Through adopting strategies that aim to enhance children's engagement in the clinical setting, practitioners can facilitate children's meaningful participation and provide children with the opportunity to have their voices heard, understood and considered (Department of Communities and Justice, 2019; Kellett, 2011).

Importantly, children's engagement and participation activities must always be child-centered and voluntary – with children's safety, protection and wellbeing as paramount (Department of Communities and Justice, 2019; Kellett, 2011; NSW ACYP, 2019).

Through actively practicing, extending and sharing strategies for engaging children, practitioners and organisations can play a valuable role in promoting the meaningful engagement and participation of children.

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4   The importance of a child-centred approach is ingrained in section 9 of the Children and Young Persons (Care and Protection) Act 1998. The Act states that actions and decisions about a child or young person must hold their safety, protection, wellbeing and welfare as paramount (Department of Communities and Justice, 2019). The National Principles for Child Safe Organisations (Australian Human Rights Commission, 2018) provide a national approach to embedding child-safe cultures within organisations. The Office of the Advocate for Children and Young People (2019) also provides detailed information for organisations on upholding children's safety, duty of care, minimising risk, and obtaining consent when engaging children.

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More from Emerging Minds

- An overview of child participation: Key issues for organisations and practitioners (practice paper)
- Supporting children's participation in shared decision-making in child mental health care (practice paper)
- Practical strategies for engaging children in a practice setting (practice paper)
- What is effective professional practice from the perspective of children and young people? (short article)
- <u>Engaging with Children: A Foundation</u> (e-learning course)
- <u>Engaging children as partners in practice to support their mental health and wellbeing</u> (webinar)

Further reading

Children's engagement and participation

- Baker, D., Chapman, M., Cruickshank, L., Fleming, M., McInnes, K., Nicol, G., & Norman, F. (2013). *Engaging children in decision making: A guide for consulting children.* <u>Available here</u>.

This guide was developed to assist individuals, organisations, and governments in engaging and consulting with children about decisions that affect their lives. It includes practical strategies and discusses engaging with specific groups of children.

- Clark, A. (2011). *Why and how we listen to young children.* London: National Children's Bureau. <u>Available here</u>.

This resource offers practical strategies to assist practitioners with listening to, and engaging with, children. It also discusses the benefits of listening to children's voices.

- Department of Communities and Justice.(2019). *Engaging children, young people and families.* Sydney: New South Wales Government. <u>Available here</u>.

This website provides an introduction to engaging children, young people and families. It discusses key principles of engagement, how to engage specific groups, and strategies to improve engagement. Practice points for clinicians are provided.

- Harris, P., & Manatakis, H. (2013). *Children's voices: A framework for children and young people's participation as valued citizens and learners.* Adelaide: University of South Australia in partnership with South Australian Department of Education and Child Development. <u>Available here</u>.

This framework provides research-based tools and resources for supporting the engagement and participation of children and young people. Those who will find this framework helpful include early childhood educators and professionals, researchers and policy makers.

- NSW Advocate for Children & Young People. (2019). *Engaging children and young people in your organisation.* Sydney: NSW ACYP. <u>Available here</u>.

This resource was developed to assist organisations with meaningfully engaging and involving children in their collective decision-making processes. It includes practical checklists, case studies and important information related to ethics, duty of care, child safety and consent.

Communicating with children

- Kolucki, B., & Lemish, D. (2011). *Communicating with children: Principles and practices to nurture, inspire, excite, educate and heal.* New York: United Nations Children's Fund. <u>Available here</u>.

This resource provides information on how to communicate effectively with children from different age groups, which can have important flow-on effects on children's engagement.

Aboriginal and Torres Strait Islander children

- Baker, D., Chapman, M., Cruickshank, L., Fleming, M., McInnes, K., Nicol, G., & Norman, F. (2013). *Engaging children in decision making: A guide for consulting children* (p. 16.). <u>Available here</u>.

This practical guide contains a section on engaging and consulting with Aboriginal and Torres Strait Islander children (see p. 16).

- Department of Communities and Justice . (2019). *Engaging children, young people and families.* Sydney: New South Wales Government. <u>Available here</u>.

This website contains a section on engaging with Aboriginal children, families and communities (see section 2.5). It includes practice points for clinicians and organisations. Further readings are provided.

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- Emerging Minds. (2019). *Working with Aboriginal and Torres Strait Islander families and children.* Available here.

This toolkit is designed to support non-Aboriginal practitioners in mainstream organisations to engage with Aboriginal and Torres Strait Islander children and their families.

- NSW Department of Community Services. (2008). *Brighter futures: Engaging with Aboriginal children and families.* Available here.

This resource offers non-Aboriginal practitioners with essential contextual information about working with Aboriginal children and their families. It offers practical ideas and strategies for promoting engagement.

Children who are refugees, migrants and/or from culturally and linguistically diverse backgrounds

- Baker, D., Chapman, M., Cruickshank, L., Fleming, M., McInnes, K., Nicol, G., & Norman, F. (2013). *Engaging children in decision making: A guide for consulting children* (p. 18.). Available here.

This practical guide contains a section on engaging and consulting with children of culturally and linguistically diverse backgrounds, including migrants and refugees (see p. 18).

- Department of Communities and Justice . (2019). *Engaging children, young people and families.* Sydney: New South Wales Government. Available here.

This website contains a section on engaging with children and families who are migrants or refugees (see section 2.6). It includes helpful practice points for clinicians and organisations. Further readings are also provided.

Children with disability and/or additional needs

- Baker, D., Chapman, M., Cruickshank, L., Fleming, M., McInnes, K., Nicol, G., & Norman, F. (2013). *Engaging children in decision making: A guide for consulting children* (p. 20.). Available here.

This practical guide contains a section on engaging and consulting with children with disability (see p. 20).

- Department of Communities and Justice . (2019). *Engaging children, young people and families.* Sydney: New South Wales Government. Available here.

This website contains a section that discusses engaging children with disabilities (see section 2.3). It includes helpful practice points for clinicians and organisations.

Children who have experienced adversity

- Baker, D., Chapman, M., Cruickshank, L., Fleming, M., McInnes, K., Nicol, G., & Norman, F. (2013). *Engaging children in decision making: A guide for consulting children* (p. 22.). Available here.

This practical guide contains a section on engaging and consulting with children who have experienced adversity (see p. 22).

- Emerging Minds. (2020). *Adverse Childhood Experiences (ACEs) Toolkit.* Available here.

This toolkit provides information, advice and tools for practitioners who work with children who have experienced adverse childhood experiences (ACEs).

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