The Children's Right to Participate in the Comprehensive School Health Programme in Kenya – How can this right become a reality?

A participatory research project with children in three primary schools in Kiambu County in Kenya

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By Johanna Mahr-Slotawa (Dipl. oec. troph.) in May 2020
First supervisor: Prof. Dr. Oliver Razum
Second supervisor: Prof. Dr. Michael Wright

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List of abbreviations

ACRWC	African Charter on the Rights and Welfare of the Child
AMREF	African Medical and Research Foundation
AR	Action Research
BASE	Bielefeld Academic Search Engine
BMZ	Bundesministerium für wirtschaftliche Zusammenarbeit und Entwicklung
CLAN	Children's Legal Action Network
CRC	Committee on the Rights of the Child
CSHP	Comprehensive School Health Programmes
DH	Department of Health
FGD	Focus Group Discussion
FGI	Focus Group Interviews
GIZ	German Gesellschaft für Internationale Zusammenarbeit
GT	Grounded Theory
GTZ	Deutsche Gesellschaft für Technische Zusammenarbeit
HIV/Aids	Human Immunodeficiency Virus/Acquired Immune Deficiency Syndrome
HSP	Health Sector Programme
HPS	Health Promotion School
ICPHR	International Collaboration for Participatory Health Research
IERC	Institutional Ethics Review Committee
IHAA	International HIV/AIDS Alliance
IIED	International Institute for Environment and Development
ILO	International Labour Organisation
KAACR	Kenyan Alliance for Advancement of Children
KHSSP	Kenyan Health Sector Strategic and Investment Plan
KNBS	Kenya National Bureau of Statistics
KTN	Kenyan Television Network
MGLSD	Ministry of Gender, Labour and Social Development
MoH	Ministry of Health
MoPHS	Ministry of Public Health and Sanitation
MoE	Ministry of Education
NACOSTI	National Commission for Science, Technology and Innovation
NCCS	National Council for Children Service
NCLR	National Council for Law Reporting
NCST	National Council for Science and Technology
NGO	Non-Governmental Organisation
NHSSP	National Health Strategic Plan
OAU	Organisation of African Unity
OHCHR	Office of the High Commissioner for Human Rights
OMCT	World Organisation Against Torture
PAR	Participatory Action Research
PHAST	Participatory Hygiene and Sanitation Transformation
PHR	Participatory Health Research
PLA	Participatory Learning and Action
PO	Participant Observation
PRA	Participatory Rural Appraisal
SRH	Sexual and Reproductive Health
StC	Save the Children
UN	United Nations
UNCRC	United Nations Convention on the Rights of the Child
UNICEF	United Nations Children's Fund
WHO	World Health Organisation

1 Introduction

I observed a glaring gap between the definition of the children's right of participation in Article 12.1 of the United Nations Convention on the Rights of the Child (UNCRC) and its realisation within the Comprehensive School Health Promotion (CSHP) in Kenya. At the time of my research in Kenya, the CSHP was about to be implemented nation-wide in primary schools. Its policy defines children's participation right as one pillar. It refers to the UNCRC and states that *school children shall be allowed to actively participate in all fora to express their opinions in matters affecting their health and education* (MoPHS/MoE 2009a, p. 25). Nevertheless, within the CSHP, this right's realisation remains scattered and far from being implemented genuinely and sustainably (Wasonga et al. 2014). Many scholars have also observed this glaring gap in the realisation of children's participation right globally. They noted that state agencies increasingly recognise the importance of this right and involve children in designing programmes, in research, parliaments and public decisions (Theis 2010, Tisdall 2010). However, in most cases, children do not participate in important decisions affecting their lives. Their participation remains poorly understood and scholarly works around it are fragmented. Schools are especially accused of failing to promote children's participation (Hill et al. 2006, Rasmusson et al. 2010, Stern 2006). Bearing these tensions in mind, I initiated the Participatory Action Research (PAR) and defined its objective to investigate the social problem of negligence of children's right to participate in the CSHP. I determined this social problem in cooperation with the German Society for International Cooperation (Deutsche Gesellschaft für Internationale Zusammenarbeit, GIZ), which financed my research. I formulated my research question based on this problem as: *How can the children's right to participate within the CSHP in Kenya become a reality?*

My research results propose an approach for realising children's right to participate. This approach builds on Kenyan primary school children's (aged 10-13 years) own perspectives. They emphasised, for instance, that for the realisation of their right, they need to exhibit good behaviour. This would support their dialogical engagement with teachers and other pupils. A girl in Kiriri Primary School expressed it in this way: *When one is well-behaved and respects others they are accepted by people and then they can listen to your opinion* (g. K. No. 62). The children also accentuated specific actions, such as helping others, that support the realisation of their right. A girl in Makutano Primary School said that *children help each other like when we agree with others and do that thing* (g. M. No. 48). I combined such research results of children's views with

experiences I gained during the PAR with the Kenyan primary school children. The final results illustrate how children's participation right may be realised in accordance with Action Research (AR) principles. Such results resolve the overall social problem of my PAR, namely suggesting a precise approach on how to realise children's participation right within the CSHP. These results answer the overall social problem by addressing three problem areas: Is children's participation right, as defined in the UNCRC, appropriate for Kenya? Are current approaches applied to realise children's participation right meaningfully, that is, supportive of children's participation in 'all fora' of the CSHP by expressing their opinions? Can theoretical frameworks of children's participation be applied within school health promotion in Kenya? Other scholars, e.g. Hart R. (2008), MGLSD (2008), have also raised such questions concerning the implementation of the UNCRC's Article 12 globally. Therefore, my results contribute to the practice and to the theory of realising children's right to participation. Moreover, my study results contribute to the practice of AR with children.

Before describing my research, I clarify a few aspects of my PAR process. Since I initiated the PAR, it was not participatory in its initial stage. Nevertheless, I conducted the PAR in a highly participatory manner. There are two important factors of this participatory research process. First, my motivation to initiate the PAR arose from my background of nine-years of work experience, during which I specialised in participatory research with young people. These studies focused on health interventions abroad. None of them ever came to be designed as a complete PAR, but each included components of it, e.g. use of Participatory Learning and Action (PLA) methods (Mahr et al. 2001, 2005). Additionally, my motivation built on my enduring desire to improve children's participation in health promotion, my strong need to complement my professional experiences with children's participation in empirical research, mainly a PAR, and to gain further underlying scientific knowledge on children's right to participation. Second, I reduced the influence of my identity by employing two research facilitators who oversaw every research session with the children. They came from the same ethnic group as the children and were nearly fluent in their mother tongue. I guided them from the background and managed the PAR. Such roles contributed to reducing the presence of my identity: being a German PhD student, employed as an intern at the German Society for International Cooperation (GIZ) and working in cooperation with the Kenyan government ministries. In the next chapters, I provide more details about my role and that of the research facilitators. In these accounts, I use the first-person voice, so as to enhance the clarity of my role for the reader.

In the second chapter, I present my PAR along with a literature review to elaborate my research objective. The third chapter describes the PAR process and discusses the challenges faced. The fourth chapter presents the results of my research. The fifth chapter discusses these results, focusing on the appropriateness of the conceptualisation of participation in Article 12.1, the meaningfulness of current approaches to realising this right in Kenya and the theoretical contributions of my study results regarding children's participation frameworks.

2 Literature review and research objective

2.1 What is meant by the children's right to participate?

My research builds its objective of realising children's participation right in the CSHP on three arguments: first, Article 12.1 of the UNCRC; second, the New Sociology of Childhood, and third, health-promoting effects of children's participation. I describe the first argument in this section and the other two arguments in the subsequent section. Concerning the first, I elaborate on the definition of children's participation right in Article 12.1 on which my research relies. I integrate this definition with the African Charter on the Rights and Welfare of the Child (ACRWC), which also applies to the CSHP in Kenya. I use both definitions to complement the currently prevailing understanding of children's participation right as a dialogical process and as children's contributions to community life. Its interpretation as children's contributions to the community is dominant in my Kenyan research context.

2.1.1 Children's right to participate in the UNCRC and the ACRWC

Article 12.1 of the UNCRC defines children's right to participate as follows: *state parties shall assure to the child who is capable of forming his or her own views the right to express those views freely in all matters affecting the child, the views of the child being given due weight in accordance with the age and maturity of the child* (OHCHR 1989, p. 4*).* The Article is generally referred to as their right to be heard. Many scholars criticise this narrow understanding of the 'right to be heard' or the 'children's voice'. One response to such criticism is that the currently dominant perspective on children's participation regards it as a dialogical process (Lundy 2007, Mannion 2010, Percy-Smith 2006) (chapter 2.1.2). The General Comment on Article 12 defines participation in a broader sense as: *ongoing processes, which include information-sharing and dialogue between children and adults based on mutual respect, and in which children can learn how their views and those of adults are taken into account and shape the outcome of such processes* (UNCRC 2009, p. 5).

In some ways, the ACRWC adapts the UNCRC's interpretation of children's participation right to the African context (Newman-Black 1989). In Article 7, it stipulates this right as follows: *every child who is capable of communicating his or her own views shall be assured the rights to express his opinions freely in all matters, and to disseminate his opinions subject to such restrictions as are prescribed by laws* (OAU 1990, p. 4*).* Chirwa (2002) criticises the ACRWC for still embodying children as people in need of protection and as autonomous beings, which are both not typical African childhood

characteristics (chapter 2.5.1). In my research, I define a child *as every human being below the age of eighteen years*, referring to the UNCRC's Article 1 (OHCHR 1989, p. 2). The Children's Act of Kenya also uses this definition (NCLR 2012).

In reference to these legally binding definitions of children's right to participation in the next section, I elaborate its prevailing understanding as a dialogue. My results support this understanding of children's participation right as a dialogue. They also emphasise the understanding of this right as children's daily contributions to community life. Therefore, in the section that follows the next one, I elaborate on the more communal perspective on children's participation in Africa.

2.1.2 Understanding of children's right to participate as a dialogue

Children's participation is increasingly understood as an engagement of young people and adults in a serious dialogue and learning process (Chawla 2001, Fitzgerald et al. 2010, Hart R. 1992, Percy-Smith et al. 2010). Participation is considered a relational process which involves children engaging with other groups, including adults. The focus is on learning, relationships and children's everyday settings, so that children's participation is rooted in their everyday lived experiences (Pells 2010, Percy-Smith 2006, 2014a, 2014b). Subsequently, children are attributed knowledge, critical reflexivity and the exercise of power. Engaging with children in such a dialogue and inquiry and jointly developing creative responses to issues at hand makes their participation a collaborative process of learning (Fitzgerald et al. 2010, Hart R. 2008, Percy-Smith 2014a, Thomas 2007). Such a process recognises children as active citizens and competent agents (chapter 2.1.3). Based on this background, my results and the theories on children's participation that I present advance the understanding of children's participation as *a process of democratic and collaborative involvement in social processes in the context of everyday life* (Percy-Smith 2014a, p. 210).

2.1.3 Understanding of children's right to participate as contributors to community life

The call by Okyere et al. (2014) for a more holistic definition of the Convention's participatory right is in line with Percy-Smith's (2014a) understanding that emphasises children's involvement in social processes in the context of daily life. Both of these scholars demand this right to explicitly recognise and define ways in which children can and want to take part in family and community activities. Okyere et al. (2014) specify that this right may include expressing views as well as undertaking activities, such as sweeping, cooking and fetching water. They base this demand on research findings on local communities' understanding and practices of children's participation

in Nigeria. Okwany et al. (2011) posit similar perspectives on children's participation from Kenyan and Ugandan parents. These parents consider children's participation as closely related to children's active participation in daily family and community routines. They described participation as being able to see their children as competent and active contributors to the household functions and, subsequently, allowing the children space to air their ideas. A Luhya (community in Western Kenya) proverb underscores the significance of children's views thus: 'Do not ignore a child's views' (Okwany et al. 2011).

According to Okwany et al. (2011), Kenyan and Ugandan parents' emphasis on children's involvement in daily routines is indicative of the intention to foster children's learning, in accordance with their evolving capacities. The parents explained this educational intention as, first, children's 'responsibilisation', which actively promotes their participation and involves their participation in household activities. It inculcates a sense of duty, builds resilience, self-esteem and essential life skills and enables children to develop positively at home and in school (Nsamenang et al. 2009, Okwany et al. 2011). Second, children get to use readily available farming implements and water pots as essential toys for learning. Nevertheless, the parents were keen to point out that the community did not expect children to produce enough food for consumption, a fact which a Luhya (Western Kenya) proverb reinforces thus: 'A child's farming implement cannot produce enough food for the mother' (Wambunya 2005). The educational aim of children's participation, according to Okwany et al. (2011), was acknowledged in the participatory nature of indigenous education. Children 'learn by doing' as they interact with multiple caregivers and engage in daily routines.

In Nigeria, children conceptualised their participation around their work and their contributions within households and the wider society (Okyere et al. 2014). On their part, Rwandan children understood their participation in terms of being more involved. Pells (2010) describes this as 'lived participation', which is rooted in structures and activities of children's daily life and part of an on-going series of building supportive relationships within their everyday environment.

The dominant understanding of children's participation as making community contributions could be rooted in non-Western countries' prevailing community-focused childhood perspectives (Caraveo et al. 2010, Percy-Smith 2012). This embedding supports Mason et al.'s (2010) contrasting views on children's participation within the Asia-Pacific region and the Western culture of Australia. The Asia-Pacific region perceives participation as making active contributions to prevailing situations. By contrast, the

Western culture of Australia sees participation as an investment in the children's future, e.g. educational activities meant to enhance good citizenship.

In this section, I have described Article 12.1 and its prevailing and more comprehensive understanding of children's participation as the first argument for my research objective. In the next section, I elaborate on my other two arguments: the New Sociology of Childhood and the health-enhancing effects of children's participation. These two arguments also elucidate the relevance of children's participation to the school health promotion context.

2.2 Why is the children's right of participation important within school health promotion programmes?

Many scholars (e.g. De Winter et al. 1999, Hinton 2008, Jerusalem et al. 2009) have highlighted the importance of children's participation for school health promotion, which is my research context. I use the arguments of such scholars to describe the relevance of realising children's right, concentrating on the New Sociology of Childhood and the health-promoting effects of children's participation. The arguments on the health-enhancing effects of children's participation are crucial for my research objective to realise this right within the CSHP. An additional argument for the importance of children's participation in health promotion is that the notion of participation is irrevocably linked to the practice of health promotion. The definition of health promotion in the Ottawa Charter emphasises community participation as its core, stating: *the process of enabling people to increase control over, and to improve their health* (WHO 1986a, p. 1) (Wright et al. 2010).

2.2.1 The New Sociology of Childhood

The New Sociology of Childhood emerged as a new paradigm on childhood in the 1980s. It situated the evolving focus on children's participation within the discipline of child development and within many initiatives with children. Children were increasingly seen as active social agents, in relation to other community members (Hinton 2008). This new paradigm developed out of numerous changes in the construction of childhood. The first of these changes was the recognition of childhood as a social construct. Distinct from biological immaturity, childhood is considered neither a natural nor universal feature of human groups, but appears as a specific structural and cultural component of many societies. The perception of childhood depends on each society's unique values, history, social and cultural beliefs (James et al. 1997, Prout et al. 1997). Second, childhood is seen as a variable of social analysis which can never be

separated from other variables, such as class, gender or ethnicity. As a product of culture, a variety of childhoods exists (James et al. 1997, Kehily 2008). Third, children are seen as actively involved in the construction of their own social lives and the society. They are acknowledged as social agents and no longer regarded as passive subjects of structural determinations. This rallying point of children's agency includes the fact that their individual voices and presence is now recognised and accounted for (James et al. 1997, 1998, Prout et al. 1997).

My research objective builds on these emergent childhood constructions, especially on the understanding of childhood as a social construct, and on the recognition of children as active social agents. However, this understanding of childhood challenges the other perspective of childhood prevailing in Kenya as a time of parents' control. One of the three problem areas that my research aims to address involves these two opposing childhood perspectives (chapter 2.5.1).

2.2.2 The health-promoting effects of children's participation

Various authors outline the promising potential of children's participation in the development of their personal resources. I present such scholars' arguments by outlining the health-enhancing effects of children's participation. I examine these effects within the three areas of enhancing children's health through their improved well-being, their better education and the change of views among adults.

Importantly, most of these argumentations are assumptions and very few are based on evidence. Reasons for this dearth of evidence include: tension on whether the importance of participation lies in the process or in its outcomes, complexity of reflecting participation, lack of documented impact assessment and of its impact (Arnott 2008, Cockburn 2010, Hartung 2012, Moses 2008). Certainly, children's personal resource development constitutes one area of focus of recent health promotion concepts, combined with the provision of knowledge (Jerusalem 2002, Jerusalem et al. 2009).

I begin by elaborating on those scholarly arguments that emphasise the potential of children's participation to promote individual health through improved well-being. De Winter et al. (1999) and Hartung (2012) describe participation as a powerful tool for developing effective coping-mechanisms and is, therefore, key to successful health prevention. De Winter et al. (1999) add that through these mechanisms, participation promotes children's development and psychosocial well-being. Hartung (2012) argues that participation promotes people's psychological and physical health by enhancing their individual health resources. All these scholars concur that the changes in social relations around young people, e.g. adults increasingly appreciating them, help

enhance their individual health resources, e.g. decision-making, judgement and conflict-resolution skills. They identify the health-enhancing effects of participation as self-confidence, self-awareness and self-determination, which they elucidate by drawing on the health concepts of: locus of control (Rotter 1966), self-efficacy (Bandura 1997), sense of coherence (Antonovsky 1997) and health literacy (Kickbusch 2006). Other scholars, such as Cook (2008), argue that the personal resources gained by children are health protective factors. Similarly, various other authors point out that, given the chance to participate, children are in a better position to seek advice, exit abusive situations or expose the abuse of rights (Tisdall et al. 2008, UNICEF 2002, Verheyde 2006). Most of these scholars draw their argumentation from surveys (e.g. Price et al. 1988).

Another group of scholars advocate for children's participation in schools as a means of improving the educational quality. Kränzl-Nagl et al. (2010) and Verheyde (2006) emphasise that participation helps children to learn more through practical experience. Subsequently, the heath-enhancing effects of participation include children's developed life skills, personalities and respect for others' views, which improve the quality of education. UNICEF (2002, 2006) enriches these arguments further by emphasising children's participation as a keystone for cohesive societies. As such, participation best prepares children for their roles in democracy, their contributions to communities and guarantees their development. Kränzl-Nagl et al. (2010) and Verheyde (2006) also point to such potentials of children's participation. They regard participation as an effective, even an indispensable tool for attaining the three aims of education: develop children's personality, talents and physical abilities; develop their respect for human rights, and assure their socialisation and interactions with the environment. Some surveys provide evidence for the education-improving effects of children's participation. For instance, Kirby et al. (2002) shows how good participatory work improves children's confidence, skills and opportunities to make friends. Similarly, Moses (2008) shows how children's engagement with decision-makers helps them grow as individuals. Moreover, Okwany et al. (2011) report that Kenyan parents emphasise the educational effects of children's participation, arguing that the children acquire capabilities needed for family and community routines (chapter 2.1.3).

A third group of scholars describes the potential of children's participation based on its benefits for adults, the community and programmes. Hart R. (2008) and Kränzl-Nagl et al. (2010) observe that adults increasingly seek children's views or share power with them, which they interpret as an outcome of adults experiencing over time children's

great potential. Both of these authors argue that such increased practices of children's participation enhance their devotion to the community. This effect helps to strengthen communities and social relationships and, over the long-term, children become competent and responsible citizens contributing to society's development. Cook (2008) and McNeish (1999) highlight the fact that children's participation enhances the efficacy of health promotion interventions. They argue that it leads to better adaptation of such interventions to local situations, increased ownership and sustainability.

In the next section, I provide examples of the application of children's right to participation in school health promotion programmes around the world including in Kenya. Such information is situated in my research findings within the context of current practices in children's participation. Many of these examples draw on the arguments, just described, on the importance of children's participation within school health promotion.

2.3 Examples of children's participation in school health promotion and in Kenya nationwide

This section presents examples of initiatives and programmes that have realised children's right to participation. The first sub-section examines the few examples within school health promotion programmes. The second provides particular examples within the CSHP in Kenya and the third describes the overall examples in Kenya. I classify these overall examples into five levels of children's participation, based on a model adapted from United Nations Children's Fund (UNICEF).

2.3.1 Children's participation within school health promotion programmes

The internationally promoted Health Promotion School (HPS) Initiative of the World Health Organisation (WHO) is one example of a programme that incorporates children's participation within school health promotion. The initiative describes children's participation as a core principle (Barnekow et al. 2006): it aims to strengthen pupils' own control over social and systemic determinants (principle of the Ottawa Charter); it defines making decisions by encouraging genuine student participation and specifies teachers' task as that of facilitating pupils to help themselves, rather than determining the process for them (Gray et al. 2006). Simovska (2007) posits that this initiative has increasingly integrated children's participation into health education. Best practice examples of children's participation within the HPS Initiative outside Europe have been documented by Dubé (2006), Gadin et al. (2009), Meresman (2005), Mukhopadhyay et al. (2005), Unkovska (2005). Examples in Europe are Simovska's (2008) developed conceptual frameworks for children's participation in health promotion, which draw on

case studies of European schools that are part of the HPS Initiative (chapter 2.7.1). England's hospital services rightly highlight children's participation thus: a key principle is that children must be consulted, which, unfortunately, is said to be rarely practised (Coyne 2006, DH 2003). The Child-to-Child approach is another example of a globally applied school health promotion concept that emphasises children's participation (Bailey et al. 1992, Gibbs 1997).

In the next sub-section, I describe children's participation within the CSHP in Kenya, which forms the background for my research objective, namely improving the realisation of children's right to participation within this programme.

2.3.2 Children's participation within the CSHP in Kenya

The CSHP policy defines children's right to participation as one pillar, along with the rights of survival, development and protection, in accordance with the UNCRC and the ACRWC. The CSHP policy makes reference to this right as follows: *children are entitled to the freedom to express opinions and to have a say in matters affecting their social, economic, religious, cultural and political life*. Specifically, *school children shall be allowed to actively participate in all fora to express their opinions in matters affecting their health and education* (MoPHS/MoE 2009a, p. 25). The policy emphasises the use of participatory approaches and the impartation of life skills. It targets a holistic health approach by addressing the eight thematic areas of: life skills, gender issues, child rights/responsibilities, sanitation, nutrition, disease prevention, special needs and school environment. The CSHP operationalises the National School Health Policy and the respective National School Health Guidelines (MoPHS/MoE 2009a, 2009b). Both documents were developed based on the National Health Strategic Plan (NHSSP II) and global strategies (e.g. WHO's HPS Initiative) and were inspired by successful school health programmes, especially a life skill-oriented programme, in China (diary 1:22) (MoH 2014, MoPHS/MoE 2009a, WHO 1997).

The CSHP is set to be implemented nationwide in primary schools in Kenya. It is intended to be implemented as part and parcel of each school's health club. The Ministry of Public Health and Sanitation (MoPHS) coordinates the nationwide implementation of the CSHP and international organisations and non-governmental organisations (NGOs) finance it. The GIZ supported the MoPHS and the Ministry of Education (MoE) technically and financially in the development and implementation of the CSHP. It also financed the implementation of the CSHP in 160 schools in Kisumu and Vihiga Counties, all of which were completed by 2013. By end of 2013, the CSHP

implementation had reached approximately 400 primary schools and was, at the time, set to be implemented in another 250 schools (diary 3:35). Important for my research are the results of the pilot study of the CSHP documents (CSHP policy and CSHP guidelines) in 2009. 30 primary schools in the Eastern Kilifi and Kwale Counties were piloted and the documents finalised after obtaining positive practical experience (Wasonga et al. 2014). One outcome of this pilot phase was the development of an additional CSHP Handbook that provided practical guidance in rolling out the programme to the agents at local school and community levels (MoPHS/MoE 2009c). The pilot phase in 2009 revealed some disparities between the actual state of children's participation during implementation and the bottom-up approach envisaged in the CSHP policy (Wasonga et al. 2014). One of the persons responsible for the programmes in the MoPHS gave an example of such disparities: the CSHP mandates pupils' representatives to be part of each school's health committee, whose main task is to develop the Action Plans to implement the CSHP in each school (diary 3:34). Children are, however, rarely involved in developing these Action Plans (diary 1:10, 4:12). Such tensions are one of the problems which my research aims to address with its objective to seek to advance the realisation of children's right to participation in the CSHP (chapter 2.6). Important for this objective are examples reported of the realisation of this right in the CSHP in Kenya: children's parliaments, children monitoring the cleanliness of school latrines or other hygiene issues (diary 1:13) (Wambui 2012, Wasonga et al. 2014).

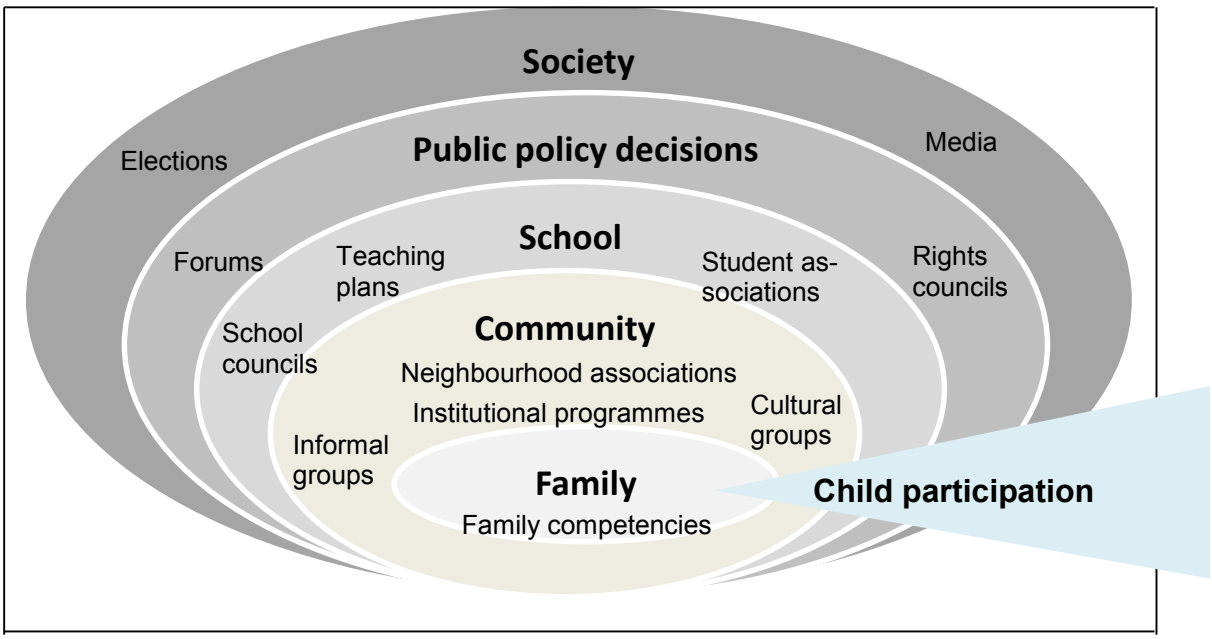
The next section presents an overview of the initiatives in Kenya that aim to realise children's right to participation. It tries to set this aim of the CSHP in the context of the right's overall realisation in Kenya. I use UNICEF's four levels of children's participation to structure the presentation of such initiatives. As such, in the next sub-section, I elaborate on these four levels prior to my overview.

2.3.3 Levels of practicing children's participation

UNICEF's (2002) levels of participation constitute one way to examine the current status of children's participation today. It describes children's participation at family and community levels, e.g. research initiatives, cultural groups; their participation at the school level, e.g. school councils, educational programmes; children's participation at the level of public policy decisions, e.g. children's parliaments, rights councils and at the level of society, e.g. city design, media (Figure 1) (Francis 2001, Taylor et al. 2008, Theis 2010).

My research context of CSHP intends to realise the children's right to participation on the school level, particularly within the student associations of health clubs. This level also includes children's participation at the family and community levels.

Figure 1: UNICEF's (2002) model on children's participation at different levels



2.3.4 Initiatives aiming to realise children's participation in Kenya

The initiatives that aim to realise children's right to participation in Kenya cut across all the five levels of UNICEF's model: society, public policy decisions, schools, community and family (Annex: Table 7).

On the level of the society, the Kenyan media contributes to the realisation of this right by giving children spaces to air their views, e.g. Club Kiboko on the Kenyan Television Network (KTN), Angel's Café on Citizen Television (diary 1:14/17) (UNICEF 2010).

At the level of public policy decisions, children participate on the national rank through various forums: a National Child Committee, a temporarily active Child Participation Committee and the Children's General Assembly. During each forum children are said to contribute their views to policy development and reporting mechanisms, e.g. periodic UNCRC reports (diary 4:46, 5:12-13/32/37/51) (UNICEF 2010). In an interview, a coordinator of the Children's General Assembly told me that children's views are, nevertheless, not represented in the Assembly (diary 5:12). In addition to such forums, Kenya's Guidelines for Child Participation aim to realise this right across the entire nation. The sustainability of the implementation of such guidelines remains difficult for most NGOs, as I was told. NGOs are said to foster ad hoc participation of children (diary 8:21). There are also other forums for children's participation at the county level

in Kenya, such as the Child Assembly, the Day of Children's Voice and the Day of the African Child. These forums have reportedly facilitated children in expressing their views, e.g. communicating the changes they desire to national and local politicians. Each county's Child Assembly usually elects six representatives to the national Children's General Assembly (diary 5:30/32-33/36/52). However, I was told that this selection needs to be improved, as adults are the ones who conduct the election of children (diary 5:12). At the international policy level, there have been forums for children's participation in which some children discussed the UNCRC report in Geneva, with others attending conferences, e.g. Africa Fit for Children in Addis Ababa (diary 5:37) (UNICEF 2010).

At the level of schools, several initiatives promote children's participation. School Councils have been set up in most secondary and primary schools, pursuant to the requirement for nationwide implementation in Kenya's Education Act of 2013. Most schools have set up children's school parliaments, with support by NGOs like World Vision. There are at least 1,000 Child Rights Clubs strewn across Kenya's different counties, supported mainly by NGOs, such as the Kenyan Alliance for Advancement of Children (KAACR), PLAN International, Children's Legal Action Network (CLAN), Save the Children (StC). Different approaches are used to facilitate children's management and ownership of these clubs (diary 4:43/47, 5:8-13, 5:30, 8:23) (UNICEF 2010). Concerning these approaches, it was important for my research, which sought to facilitate children's participation in such clubs, to draw lessons from the experiences of the NGOs mentioned. As such, two NGO representatives I interviewed emphasised the need to train teachers thoroughly to facilitate children's clubs and to combine children's training with a training for their parents (diary 5:9/30). Additional initiatives are school health clubs that the MoPHS established nationwide and the Participatory Hygiene and Sanitation Transformation (PHAST) Initiative promoting children's participation within some school health clubs. Wamalwa (2005) describes participatory learning approaches that schools could use for the topic of hygiene.

Apart from such initiatives, there are local practices at community and family levels, in which Kenyan parents encourage children's participation in a range of activities related to their everyday routines. Children assist in household chores, including cooking, washing, babysitting, mentoring and teaching younger siblings and contributing to community activities (chapter 2.1.3). In valuing children as active members in families and communities, adults provide them with room to be heard, e.g. using sayings, metaphors, proverbs or speaking through intermediaries. Intermediaries comprise

children's rich context of extended family network of 'fathers' and 'mothers' through which they can communicate with parents, thus avoiding direct confrontation and presumed disrespect (Chirwa 2002, Okwany et al. 2011) (Annex: Table 7).

In the next section, I specify my research context. This is important background information for my subsequent elaboration of the research objective and presentation of the research results. I begin by describing Kenya's legal framework for children's participation. Secondly, I describe Kiambu County's socio-economic situation. The section then ends with a description of the German Development Cooperation's support to the realisation of children's right to participate in Kenya.

2.4 The specific context of my research

2.4.1 Legal framework of children's right to participate in Kenya

The UNCRC and the ACRWC are legally binding documents that were ratified by Kenya in 1990 and 2000, respectively. Both documents emphasise children's participation rights: the UNCRC in Article 12, complemented by Articles 13, 14, 15, and the ACRWC in Article 7, complemented by Article 4 (OAU 1990, OHCHR 1989). Since then, various legislations have attempted to enforce these state obligations for Kenyan children. First, the Children's Act of 2001 (revised 2010/2012) and the Constitution of 2010 domesticate and incorporate the UNCRC and the ACRWC provisions into Kenyan law (NCCS 2011). The Children's Act encourages child participation and, in Article 12 (b), it particularly stipulates the need for the promotion of children's participation in education (NCLR 2012). Second, the National Children's Policy of 2008 (renewed in 2010) guides the Kenyan government in implementing the Children's Act (NCCS 2010). This policy sees children's right to participation as an integral component on its own and as a means to achieve other rights (UNICEF 2010). Third, the National Council for Children's Service (NCCS) develops the Guidelines for Child Participation as part of its mandate to exercise supervision of and control over the realisation of children's rights and welfare in Kenya (chapter 2.3.4). These formulated guidelines are meant to *help those working with and for children to uphold the right to meaningful participation of children in matters that affect them at the family, community, national and international levels (NCCS 2007, p. 6)*.

2.4.2 The socio-economic situation in my research area of Ndeiya

I conducted my research in Kiambu County, in the administrative unit of Ndeiya which is located in the Limuru sub-county (chapter 3.3.1). Geographically, Kiambu County is characterised by hills, plateaus and high-elevation plains. Its main economic activities are tea, dairy, maize and sheep farming. I examine Kimabu's socio-economic situation further by describing its demographic characteristics. I present these characteristics under the five development challenges which the Kenyan National Bureau of Statistics (KNBS) documents for Kiambu. I highlight most of the statistics in relation to the whole country of Kenya. The total population of Kiambu County was projected to be 1,766,058 in 2012 and expected to reach 2,032,464 by 2017. The rise in population is attributed to the county's high population growth rate of 2.81%. Out of Kiambu's total population, 269,534 were projected to be primary school children aged 6-13 years as of 2012 (County Government of Kiambu 2015). In 2006, Kenya had 12.8 million children aged 6-17 years, accounting for 35% of the national population (KNBS 2006). Kiambu County's specific unit of Ndeiya is quite small with a total population of 29,958 projected for 2012 (KNBS 2009).

The first major development challenge in Kiambu County is the widespread poverty. In 2015, the estimated number of poor people in the county was 21.75% of the entire population (County Government of Kiambu 2015). Ndeiya is said to be one of the poorest areas of the county, with 60% of its population being poor. Among the reasons proffered to explain this high poverty level in the area are the semi-arid climate and the shortage of various infrastructures (KNBS 2009). In the whole country of Kenya, 19.1% of the people were poor as reported in 2006, which represented a decline from 29.6% in 1997 (KNBS 2006).

The second development challenge described for Kiambu County is the low enrolment, especially at the secondary school level. The net enrolment rate in primary schools stands at 99.7%, while for secondary schools it is at 69.3% (County Government of Kiambu 2015). In Kenya, about 11.1 million children are in school (86.1%), while 1.7 million are out of school (KNBS 2006). In Kiambu, the primary school enrolment for boys and girls is fairly equal, whereas the rate of transition to secondary school is higher for girls than that for boys (KNBS 2009). This situation is specific to Kiambu because in Kenya slightly more boys than girls are reported to have attended secondary school (KNBS 2010). Boys in Kiambu often fail to transition to secondary school as they are attracted to manual jobs after completing primary education.

Such manual jobs constitute one of the causes of Kiambu County's third development challenge, namely children's insecurity. The boys in Kiambu work mainly in the tea or coffee estates or in the matatu (minibus) industry. One risk is that some of these children will end up in crime. Another risk with these kinds of jobs is child labour. An estimated 14,500 children have been reported as being child labourers in the former administrative district of Kiambu West (KNBS 2009). One major cause of child labour was found to be low household spending power, hence poverty (KNBS 2006). Economically-active children were less likely to attend school than those who were not (ILO 2008). A second cause of children's insecurity is the prevalence of HIV/Aids in Kiambu County. In the former district of Kiambu West, approximately 6,881 children have been rendered orphans or vulnerable, due to HIV/Aids. This situation has forced most of these children to drop out of school and exposed them to high risks of child labour, prostitution, early marriages and vagrancy (KNBS 2009).

The prevalence of HIV/Aids is also described as a fourth development challenge for Kiambu County, which has a HIV/Aids prevalence of 4.6%. Inadequate health facilities and water supply comprise the fifth development challenge for Kiambu. Despite these challenges, Kiambu has a high literacy rate of about 95.4% (County Government of Kiambu 2015).

2.4.3 German Development Cooperation's support for the realisation of children's right to participate in Kenya

GIZ's Health Sector Programme (HSP) in Kenya has assisted the MoPHS and MoE to develop the CSHP since 2009 and financed the implementation of the CSHP in 160 schools in 2012 (diary 1:9) (GTZ 2010) (chapter 2.3.2). The GIZ financed and facilitated my research as part of its assistance to the CSHP. These interventions fall under the following of the GIZ HSP's overall objectives: support the Kenyan government in its reform processes to improve the country's health system.

The GIZ based the HSP in Kenya in order to encourage the realisation of children's participation right in the CSHP within the following agreements: First, fulfilling human rights principles is an important target in all GIZ interventions (GIZ 2016). Second, a strategy in which the German Society for International Cooperation (GIZ) outlines its objective and action framework to enhance the realisation of children's rights in its partner countries. It mandates the enforcement of such rights at the local, institutional and political levels and, in particular, urges children's participation in the respective three levels of programmes, institutions (e.g. schools) and the democratic state (BMZ 2011, 2014, Frische 2008a). Third, recommendations by Simon (2012) complement

such agreements with detailed instructions for enhancing the realisation of children's right to participation in the GIZ's partner countries. My research objective incorporates the following of these recommendations: focusing on health and education sector, as both already recognise children as a target group; acknowledging children as individuals in their own right; building upon GIZ's valuable experiences with youth participation (e.g. Frische 2008a, 2008b), and accepting that enhancing children's participation right is challenging, as it portends radical changes in the views of institutions and adults (Simon 2012). For my research, the GIZ's HSP in Kenya proposed the subject of Sexual and Reproductive Health (SRH) to test some of my results' approaches to realise children's right to participation, since this is one of its priority intervention areas (GIZ 2011).

With the above background information in mind, in the next section I describe the particular problem that my research aims to address. From this stated problem, I present my research objective in the subsequent section.

2.5 The problem that my research addresses

The CSHP defines the right of children to participate as one of its objectives, referring to the UNCRC and ACRWC (chapter 2.3.2). There are scattered examples of this right being implemented in the CSHP, e.g. children's parliaments. However, a challenge remains, regarding its authentic and sustainable realisation nationwide (Wasonga et al. 2014). The great gap between the envisioned participatory policy implementation of the CSHP and its actual implementation in schools is an example of this challenge, which the CSHP's pilot phase revealed (in 2009) (chapter 2.3.2). The Concluding Observations of the Committee on the Rights of the Child (CRC) confirm that most organisations in Kenya struggle to achieve this right. In accordance with Article 12.1, the CRC stresses the need for Kenya to promote and implement the principle of respecting children's views and their participation in all matters affecting them (CRC 2001, 2007). I defined the social problem that my research investigated as the negligence of children's participation right in the CSHP in Kenya. This problem builds on my situation, just described, my own observations of the glaring gap between the envisioned realisation of this right in CSHP's policy and its actual implementation in schools and on the interest of the GIZ's HSP in supporting the MoPHS further to realise the right of children to participate in the CSHP.

My research addressed this social problem by responding to three problem areas, which I posed as questions. First, is the realisation of children's right to participation, as defined in the UNCRC, appropriate for the non-Western, African and, particularly Kenyan cultures? Second, are globally applied approaches to realising children's participation right effective and meaningful? Third, can theoretical frameworks of children's right to participation be applied within school health promotion programmes in Kenya? Other scholars and I see these to be the most relevant problem areas for targeted genuine implementation of children's right to participation in the CSHP (Okyere et al. 2014, Twum-Danso 2010, UNICEF 2010). In the next sub-sections, I expound on each of these three problem areas.

2.5.1 Is the UNCRC's definition of children's right to participation appropriate for the Kenyan culture?

Parents in Kenya understand children's participation in relation to their active participation in the daily routines within the family and community contexts (Okwany et al. 2011). This understanding is also prevalent in other African settings, e.g. Nigeria and Ghana (Okyere et al. 2014, Twum-Danso 2010). Okyere et al. (2014) calls for a more holistic definition of children's right of participation than that of the UNCRC. This definition must include allowing children to express their views as well as the activities they undertake to play an active part in their families and communities (chapter 2.1.3). Such a broad understanding of children's right is also highlighted by Hart R. (2008) and Percy-Smith (2014a), scholars I drew on in my research. Similarly, many other scholars describe how the understanding of children's right to participation is rooted in the particular perspectives on childhood in each context, referring to the New Sociology of Childhood (e.g. Twum-Danso 2010, Veerman 1992) (chapter 2.2.1).

In Kenya, I observed the two dominant perspectives on childhood, which many scholars describe for non-Western countries. One regards childhood as a period of dependency and parental control, a period that never ends and is characterised by respect, obedience and subservience to adults (Okyere et al. 2014, Twum-Danso 2010). For instance, in Kenya, children are usually said to 'be regarded as to be seen, but not to be heard' (diary 2:49) (UNICEF 2010). The other perspective considers childhood as a period when children are expected to take on responsibilities and contribute to household and communities. For example, in Nigeria activities, such as cooking, cleaning and caring for siblings, are seen as integral to what it means to be a child (Okyere et al. 2014). Similarly, in India, such activities are considered to be preparation of children for adult responsibilities (Bray et al. 2007, Rampal 2008).

Moreover, in Uganda and Kenya, parents described childhood as a stage for socialisation and skills development meant to transform young people into fully independent and responsible adults. A Baganda (Uganda) proverb sums up the presumed central role of children thus: 'small trees strengthen the forest' (Okwany et al. 2011). Referring to these two opposing perspectives on childhood, some scholars criticise the UNCRC for embodying values of a 'normal' childhood that are foreign to Southern countries (Fyfe 1989, Hart R. 2008). They advance their arguments by comparing non-Western perspectives on childhood with those in the West. According to them, first, children in the South take on active roles in their communities, demonstrating significant abilities as capable citizens (Liebel et al. 2010, Malone et al. 2010); the West tends to see the child as lacking agency and in need of protection (Malone et al. 2010). Second, more collective non-Western cultures do not perceive children as autonomous individuals; in the West a version of individualistic childhood dominates (Boyden 1997, Chirwa 2002, Hart R. 2008, Rampal 2008). Third, some African parents choose the model of a working child; the West tends to emphasises schooling as the only model of proper childhood (Alber 2012, Thelen et al. 2010).

The above arguments and the dominant perspective on childhood in Kenya, of a period of parental control, question the appropriateness of UNCRC's Article 12.1 for the CSHP. However, I formulated my research objective to realise children's participation right in the CSHP on the assumption that the UNCRC's Article's 12.1 implementation is appropriate for Kenya. Okwany et al. (2011) reinforce my assumption, portraying children's participation as deeply rooted in Kenyan and Ugandan cultures. They also refer to the Yoruba (Nigeria) proverb which states: 'if you start something and fail to involve the children in it, it will surely fail'. My research sought to appraise the viability of my assumption. Therefore, it elaborates further the two opposing perspectives on childhood portrayed in my research area as well as the broad understanding of the UNCRC's participation right emphasised by many scholars (e.g. Hart R. 2008, Okwany et al. 2011, Okyere et al. 2014, Percy-Smith 2014a, Twum-Danso 2010) (chapter 2.1.3, 5.3).

2.5.2 Are approaches applied to realise children's participation meaningfully?

The meaningfulness and effectiveness of current approaches to children's participation is also a subject of many scholars' critique. One of their main criticisms is the domination of adults in the implementation of children's participation, for which those scholars proffer two arguments. First, non-European countries interpret children's participation

more in terms of their contributions to everyday community and family life. However, the practices of children's participation tend to be narrowly focused on public decision-making rather than on the wider spectrum of activities characterising children's everyday lives (Okyere et al. 2014, Percy-Smith 2014a, Stoecklin 2013, Thomas et al. 2010). Second, children are often consulted, but adults make the final decisions on the actions to be taken. The practices of children's participation give children 'a voice', but hardly involve them in developing creative responses to the issues at hand. Therefore, the children remain as actors with very limited agency. As the causes of children's non-involvement in developing actions, scholars identify the following shortcomings in current approaches to children's participation: dialogue and social learning spaces with adults, adults taking children seriously, listening to their views and responding authentically to them (Fitzgerald et al. 2010, Hart R. 2008, Percy-Smith 2014a, Taylor et al. 2008). Additionally, Percy-Smith (2014a) points to the failure to appreciate the direct link between children's participatory competence and their natural way of engaging, learning and acting in their environment. For him, this is the main cause of the shortfall in meaningful approaches to child participation.

In response to the critique, of those scholars, I ensured that children dominate the implementation of their participation right in my research. My experiences confirmed the need for approaches to children's participation to focus on those shortcomings that scholars described: first, on spaces for dialogue and social learning between children and adults and, second, on children's wider spectrum of activities characterising their everyday lives. Consequently, my research elaborates on these two areas of focus in approaches to children's participation. This is intended to fill the glaring gap I observed in the CSHP's policy's definition of this right and its actual realisation, including enabling children to participate actively in 'all fora' of the CSHP by expressing their opinions (MGLSD 2008) (chapter 5.4).

2.5.3 Can theoretical frameworks of children's right to participation be applied within school health promotion in Kenya?

Very few scholars discuss the practice or present frameworks for children's participation within health promotion, e.g. Simovska (2008), Pridmore (2000). Nevertheless, children's participation strengthens the children's personal resources, which is one aim of current health promotion concepts. For my research, I drew on the few such frameworks and on other overall frameworks on children's participation. I present all these frameworks in the section after the next, structured into the two focus areas that my results revealed: frameworks emphasising community contributions, frameworks

emphasising a dialogical process and frameworks emphasising community contributions and a dialogical process for realising children's participation (chapter 2.7). Of particular importance for my research is Percy-Smith's (2014a) framework and also what he urges as a theory on children's participation: all frameworks do not yet form a coherent body of theory on children's participation; such a theory needs to be generated from field practices (Percy-Smith et al. 2010).

These two conditions provided my study a chance to formulate a theory on children's participation from two strands of arguments: first, only a few of the current theoretical frameworks on children's participation have been created out of field practices in schools and nearly none in African schools and, second, building my approaches to children's participation on its existing frameworks needs to take diverse challenges into account. I identified three groups of such challenges for my results' theoretical contributions, which built on my Kenyan school context: first, nearly none of the frameworks present African-specific perspectives. Instead, Western viewpoints dominate. Second, public systems are usually heavily hierarchical and controlled by central governments. As such, professionals who try to implement children's participation in such hierarchies tend to find themselves in a paradoxical situation of being disempowered by the system (Percy-Smith 2014a). Third, various deficits in my research context question the application of most frameworks. The deficits mainly concern such issues as valuing children's participation, clear operational procedures, human and institutional capacities for children's participation and disseminating good practices for participation (UNICEF 2010).

My research intends to contribute to the theory on children's participation by responding to the two strands presented: first, it develops its contributions out of field practices within African schools and, second, it takes my three defined areas of challenges into account. I built such theoretical contributions on elaborating my conclusion that most existing frameworks on children's participation can be applied in my research context of Kenyan school health promotion (chapter 5.5).

In summary, my research addresses the three problem areas by first seeking to adapt the articulation and practice of children's right to participation, specifically in Kenyan and African contexts (chapter 5.3). Secondly, it seeks to develop meaningful approaches to realise this right within Kenyan primary schools (chapter 5.4). Third, my study seeks to contribute to the theory on children's participation based on a possible application and advancement of existing frameworks within school health promotion in Kenya (chapter 5.5).

2.6 My research objective and question

My research aims to respond to the three problem areas I have already elaborated. All three areas address my research objective, namely to investigate the social problem of negligence of the children's right to participate in the CSHP. I formulate my research question based on this problem as: *How can the children's right to participate within the CSHP in Kenya become a reality?*

I operationalised this question in the research area of Ndeiya by conducting a Participatory Action Research (PAR) design with primary school children (chapter 3). I split my research objective into the three empirical objectives which my PAR sought to examine: 1.) to identify children's understanding of their right to participate within the CSHP; 2.) to define approaches and concepts on how the right to participate can be realised within the CSHP, and 3.) to test some of the defined approaches to realising this right on the subject of SRH. These empirical objectives aim to respond to my three defined problem areas: the first objective to my first problem area (chapter 2.5.1) and, in combination, the second and third empirical objective to my second and third problem areas (chapter 2.5.2, 2.5.3). The interim objective of my research was to use the data obtained to provide recommendations to the Kenyan MoPHS on how to realise the children's right to participate in the CSHP nationwide.

The subsequent first and second section outline my operationalisation of the three empirical objectives. The third section elaborates the final aim of my research to contribute using the study findings from the field to theory on children's right to participate. Distinctively, my findings contribute to this subject with children's perspectives and from my Kenyan research context. The fourth section describes my research's adding to the practice of AR with children.

2.6.1 Identifying children's understanding of their right to participate within the CSHP

One empirical objective of the PAR was to make out children's understanding of their right to participate (chapter 4.2). Such findings aimed to address my first defined problem area. They helped to adapt the articulation and practice of children's participation to the specific Kenyan, African conditions and thereby shed light on the appropriateness of implementing the UNCRC's Article 12.1 within such contexts (chapter 2.5.1). The research sessions with the children operationalised this empirical objective first, by collecting data on children's perspectives on their right to participate within the school, home and community and, second, seeking their views on their participation in the CSHP and how it could be realised. This second subject allowed the children to

define actions they needed to see happen in their health clubs to realise their right. Six summary models outlined the children's actions and showed each group's specific views on how their right could be realised (Example 1: Figure 6/7, chapter 3.5.3.3 and Annex: Figure 13). At the end of the PAR, the children gave recommendations on this second subject on how their right could be realised in the CSHP nationwide (interim results: series of posters summarises their recommendations) (chapter 3.5.1, Annex: Figure 14). A third subject we discussed with the children was their understanding of childhood, which related to my first problem area, to determine the prevailing perspectives on child participation (chapter 2.5.1). In addition to children's sessions, we held discussions with parents and teachers to gather their views on children's right to participation and childhood. Their feedback helped me to make comparisons with the children's views (chapter 3.6.2).

2.6.2 Defining concepts on how to realise children's right to participation in the CSHP

The other empirical objective of my PAR was to define concepts and approaches on how to realise children's right to participate in the CSHP (chapter 4.2, 4.3). These findings sought to address my second and third research problem areas. The purpose was to find meaningful approaches to realising the children's right in the CSHP in Kenya (chapter 2.5.2, 2.5.3). Of great importance to my study was that children predominantly defined such concepts (e.g. their recommendations). The following elements of my PAR design operationalised this second empirical objective: First, discussions with the children during research sessions included topics of their views on their right to participation and its realisation, their self-initiated actions on their desired changes, and their recommendations to realise their right (chapter 2.6.1, 3.5.1). Second, we tested some of their recommended approaches on the topic of SRH. This testing was my third defined empirical research objective, whereas the GIZ HSP in Kenya predetermined the topic of SRH (chapter 2.4.3). Third, I defined children's participation as one quality criterion of the PAR. It sought to elevate participation to the level of co-learning and partial delegation of decision-making (chapter 3.2.1, 3.8.1). Fourth, I conducted weekly discussions with the two research facilitators during which we reflected on the PAR process and held interviews with selected experts involved in the implementation of this right in Kenya (chapter 3.4.1, 3.6.3). Fifth, I started the process of data analysis with the children and research facilitators in Kenya and finalised it by myself back in Germany (chapter 3.7.1, 3.7.2). Sixth, I abstracted children's concepts (e.g. their recommendations) and combined them with

their understanding of their right during my final data analysis in Germany (chapter 3.7.2.1, 3.7.2.2). Combining my abstractions with the experiences I had gained during the PAR led to my decision to draw on AR principles to finalise my resultant approaches on how to realise this right in the CSHP (Puzzle model 2: Figure 11, chapter 4.3). A final puzzle model summarises my results on this approach (Puzzle model 3: Figure 12, chapter 4.4).

2.6.3 Contributing to the theory on the children's right to participation

My research sought to contribute to the theory on children's right to participation. These contributions also aimed to address my third defined research problem and utilised my findings on all three empirical objectives (chapter 4.3, 4.4). I summarised my results' contributions to the theory on children's participation in the final puzzle model. This puzzle model depicts my approaches to realising this right, which are in accordance with the AR principles and characteristics. The puzzle model elaborates and contributes to the theory on children's participation first, through my results on children's understanding of and concepts about their right and its realisation (chapter 2.6.1, 2.6.2) and, second, the outcome of my reflections on the PAR (Puzzle model 3: Figure 12, chapter 4.4). Such results add to the much-needed theoretical basis for forging an agenda for children's participation. They do that, above all, in the context of school health promotion (Percy-Smith et al. 2010, Thomas 2007).

The process of abstracting my empirical findings to derive such theoretical contributions was long. It started during the PAR and ended during my non-participatory data analysis in Germany (chapter 3.7.1, 3.7.2). It was guided by my decision to draw on AR principles to formulate my approaches on how to realise the children's right. I enriched my approaches with existing frameworks on children's participation, although very few have been developed out of field practices in African schools. This very fact led to the three categories of challenges I outlined as part of my third research problem (chapter 2.5.3). Two particularly important frameworks for my results were Percy-Smith's (2014a) use of AR principles and Hart R.'s (2008) propositions for children's participation in the Global South (chapter 2.5.3, 2.7). I was, however, able to gain first-hand experiences on all three of these groups of my defined challenges, since I generated my theoretical input from my PAR field practices. My discussion of such experiences also contributes to the theory on children's participation (chapter 5.5).

2.6.4 Advancing the practice of AR with children

A secondary aim of my research was to add to the practice of AR with children, particularly, primary school children (chapter 4.1). I conducted the PAR in accordance with Greenwood et al.'s (2007) Cogenerative AR model, which delineates two distinctive phases for the AR process (Figure 2, chapter 2.8.3). After conducting my PAR, I realised that I had split the research process into four phases. I modified the Cogenerative AR model based on this finding. This modified AR model contributes to the practice of AR with children, as well as my additional defined criteria for AR with children.

In the next section, I present current theoretical frameworks on children's participation and selected theoretical principles. I examine those relevant to my research, since: first, I drew on the frameworks during my abstracting of research results (chapter 2.6.3, 3.7.2.2); second, I used the theoretical principles to reflect on my PAR as part of my results; third, I built my results' focus on understanding children's participation as a dialogical process and as their daily community contributions on the frameworks, and, fourth, my results complement the theoretical basis of such frameworks for children's participation (chapter 2.6.3, 5.5).

2.7 Current theoretical frameworks on children's participation

Theoretical frameworks on children's participation have advanced over the last decade. However, it is important to note that children's participation still lacks a distinct theoretical basis (Percy-Smith et al. 2010). What existing frameworks have in common is that they all recognise the limitations of simply listening to children and the need to look at different forms of dialogic spaces and at questions on the nature of power relations, democracy and citizenship. Based on such similarities, I present the existing frameworks under three groups of those that emphasise the understanding of children's participation: first, as a dialogical process and children's contributions to the community; second, as a dialogical process, and, third, as children's contributions to the community. My results contribute to the theory on children's participation by prioritising these two focus areas in the understanding of children's participation. In line with those frameworks that focus on a dialogical process, my research results advocate for collaborative relationships. Moreover, in line with those frameworks focusing on children's community contributions, my research results highlight children's everyday lives, actions and agency (Percy-Smith et al. 2010, Stoecklin 2013, Tisdall 2008).

2.7.1 Frameworks on children's participation emphasising a dialogical process and community contributions

The frameworks on children's participation by Percy-Smith (2014a, 2014b) and Simovska (2007) emphasise a dialogical process and children's contributions to community. Both of these scholars developed their frameworks from their practices in children's participation in schools; Simovska especially focused on school health promotion programmes. I elaborate the two frameworks, especially Percy-Smith's in greater detail, since I drew on his use of AR principles (chapter 2.6.3, 3.7.2.2).

Percy-Smith (2014a, 2014b) reframes children's participation as a collaborative involvement in social and reflexive processes within everyday life. He conceptualises children's participation as a reflexive process of learning and change. As such, participation occurs in relation to children's social world and is a relational process that acknowledges them as competent social agents. Percy-Smith (2014a) uses five AR principles to develop this conceptualisation, describing AR as a participatory process of learning and action. He posits several arguments on how the AR approach manifests children's participation. First, he argues that AR is a paradigm that mirrors the aspirations of anarchism. Second, AR emphasises an elaborated process, beyond simple notions of voice. Third, AR principles provide a guide to the participation process in any context. Fourth, the participatory approach of AR has synergies with his proposal to regard children as natural action researchers, making reference to the early participation theories that saw children as naturally and reflexively engaging, learning and acting in their environment (Freire 1970, Illich 1970, Ward 1978).

Percy-Smith (2014a) complements his use of five AR principles to conceptualise children's participation by deriving for each principle a practice to realise children's participation in schools. I drew on his five AR principles and defined practices for developing the approaches I extracted from my research results on how to realise children's right (chapter 2.6.3, 3.7.2.2). The first principle states that AR is rooted in learning from experience. In this sense, children's participation is a practice that emerges and is experienced when children engage and learn through actions. In schools, this would mean children are able to pursue situations spontaneously as they arise. Second, AR is a reflective process that includes inquiry. Consequently, participation is a reflective process during which inquiry helps to develop knowledge and skills. In schools these skills would enable children to make alternative choices for actions. Third, critical reflection is essential in AR. Equally, children's participation develops their capacity for critical reflexivity. In schools, children would be able to

practice agency in response to reflecting their experience. Fourth, AR provides spaces for dialogue and social learning. Such spaces offer crucial opportunities for children's participation, especially through a social learning process taking place (Percy-Smith 2006, 2012, Wildemeersch et al. 1998). Schools would provide opportunities for children to engage with adults in such spaces characterised by social learning on projects of joint concern (chapter 2.7.2). Fifth, AR focuses on actions and change. This action-focus quality of children's participation would require schools to practice participation as *an appreciative strength-base paradigm that roots solutions and responses in the collective responsibility of all those concerned; it necessitates an acknowledgement of children's agency and competence in taking action as well as their right to have a say* (Percy-Smith 2014a, p. 214).

Percy-Smith (2014a) underlines three prerequisites for schools that desire to realise children's participation: understand participation as a collaborative engagement in projects of mutual concern; facilitate students' to voices influence key decisions, and establish a culture of participation through changed attitudes towards children.

Simovska (2008) envisions genuine participation of children. Genuine participation encourages children's autonomy, critical consciousness and potential to live their identities as active health agents. In genuine participation, students are supported to reflect and act to bring about positive health changes to their environment. My results did not build directly on Simovska's (2008) conceptualisation. However, her views were important for my research since hers is one of the few frameworks on children's participation within health promotion and it has much in common with Percy-Smith's (2014a) framework.

Simovska draws on insights from case studies of European schools as part of the HPS Initiative (chapter 2.3.1) and summarises her conceptualisation in a model (Annex: Figure 15). This model elaborates 'genuine' participation by comparing it to 'token' participation, based on two differentiating definitions of participation as 'having a part or share in something' and as 'taking part in'. For this comparison, the model defines three points of differentiation: First, the *process of learning,* in which genuine participation focuses on knowledge building by investigating the health subject with children and creating a common understanding. Token participation focuses instead on the acquisition of curriculum content. Second, the expected *learning outcomes,* wherein genuine participation is acquired by social learning experience and interactions and determined by students' choices; those of token participation are, instead, based on the acceptance of pre-existing healthy lifestyles. Third, *the target* in genuine

participation is on changing individuals in context; token participation instead targets individuals with a view to changing their lifestyles (Simovska 2007, 2008).

Percy-Smith and Simovska describe a social learning process as central to children's participation taking place within dialogical spaces. Equally, my results emphasise a social learning process to facilitate children's participation during dialogical encounters. In the next sub-section, I explain Wildemeersch et al.'s (1998) social learning model. I chose her model since it describes the dimensions that make up such a social learning process. The dimensions helped me to reflect, as part of my results, on the social learning process taking place during my PAR. I explain her model focusing mainly on the information that I used for my reflections (chapter 4.3.1, 4.3.4.2).

2.7.2 Social learning facilitates children's participation within dialogical processes

Wildemeersch et al. (1998) describe social learning as *a reference to learning through participatory systems such as groups, networks, organisations and communities, in conditions which are new, unexpected, uncertain, conflictual and hard to predict* (p. 252). Central in social learning is the optimal use of the group's problem-solving potential. Wildemeersch et al. (1998) describe four processes that make up social learning through four tensions. In her model, four basic axes designate these tensions: first, that action moves to and fro between need and competence; second, that reflection is a product of opposition between distance and identification; third, that communication swings between unilateral and multilateral control, and fourth, that co-operation oscillates between consensus and dissensus. I describe these four axes further. First, for the axis of actions, the driving force from the discrepancy between an initial condition and the objective emerges. The group mobilises a variety of resources, such as knowledge, competencies and money, to overcome this discrepancy. These actors acquire, restructure and develop their competencies within their interactions and contexts. Of importance is the need to strike a balance between competence and needs, or competence motivation and need motivation. Only then will the actors experience their actions 'making a real difference' (Wildemeersch et al. 1998). Second, the axis of reflections is predominantly understood as critical reflectivity. This means that actors question the validity of particular opinions, actions and feelings (Habermas 1981). Of importance is the reflective and conscious creation of common points of reference. These points facilitate the aspiration of shared meaning and the significance towards collective practices, hence the actors' affiliation and identification. Both impact the group's actions during the social learning process. Third, the axis of communication

is described by the mechanisms that stimulate or inhibit the process. Communication-inhibiting mechanisms include the actors' efforts to unilaterally control the situation, the task and others. All actors operate here with their own hidden agendas. Unilateral should be replaced by multilateral control. In this way, competitive norms are replaced by cooperative ones and the interaction climate is directed towards collaboration, which stimulates communication. A tension between unilateral and multilateral control is presented as particularly significant when experts are involved. The explanations for this include the fact that modern expertise is self-reproducing so, independent of actual results, a person's expertise transforms complex problems into solutions that fit into one's own definition of reality. Thus, the competencies of lay actors are only recognised in as far as they express the discourse of expert rationality. Fourth, for the axis of co-operation, explicit or implicit processes of negotiation are central. Negotiations are efforts to reach agreements about the goals to be achieved and the means to be mobilised. Groups trying to achieve particular goals in a co-operative way are continually involved in negotiations. They negotiate differences in perception, interpretation and interest. Co-operation is given if the group's actors strike a balance between consensus and dissensus through a constructive debate (Wildemeersch et al. 1998).

Wildemeersch et al.'s (1998) model further elaborates the roles that people can play to enhance and inhibit social learning. It introduces the intertwined issues of creativity, power and responsibility to describe the way in which these roles come to the fore. Explaining the issue of power further, it is elaborated as an actor's capacity to act, referring to Cervero et al.'s (1994) three features of power. First, power exists as a feature of certain enduring social relationships. In social learning processes, actors have different capacities to act, owing to the set of their social relationships. Second, power always involves reciprocity between actors. During the learning processes, power is not given or taken away; it is always negotiated. Third, the outcome of a power relationship is always contingent. The capacities to influence outcomes are pre-given, but these do not determine the results of a process, as social learning is always based on negotiations (Wildemeersch et al. 1998).

Hence, power is a crucial factor for all actors involved in a social learning process. I reflect on this factor in my results to elaborate how this learning process facilitates children's participation. I used Foucault's (1983) conception of power, specifically as used by Gallagher (2008) to conceptualise children's participation. Gallagher (2008) explains that Foucault understood power as a *situation in which one 'entity' acts towards another entity so as to influence the actions of that entity* (p. 402). I used three

features of Foucault's concept to reflect on power during my PAR: power is exercised through various actions, within local practices and involves a relationship. These three features explain Foucault's thinking of power as a general term for certain actions, not as a 'thing'. For him, power is distributed throughout society and exercised via a multitude of local practices. One cannot 'have' power, but one exercises it over this or that entity; as such, it always involves a relationship between at least two entities.

The two frameworks and the theoretical principles I have discussed focus on relationships. In the next section, I present theoretical frameworks that conceptualise children's participation by emphasising dialogical processes, which also show a relational focus. Similarly, my results highlight children's and adults' relationship to facilitate a dialogical process. Therefore, my reflections on the PAR place emphasis on such relationships.

2.7.3 Frameworks on children's participation emphasising a dialogical process

One framework portrays children's participation as a dialogical process by conceptualising it as a 'struggle over recognition' (Fitzgerald et al. 2010). It describes a dominating monological approach to children's participation for the first (1960s to 1970s) and the second (1980s to 1990s) key historical moments in the advancement of the concept of participation. The framework describes a shift from this monological to a dialogical approach to children's participation for the current third historical moment. This moment focuses on children's participation as a 'struggle over recognition'. Fitzgerald et al. (2010) attribute this shift to the changing definition of recognition which, according to philosophers, is facilitated through dialogue. Based on this definition, they draw attention to the relational and mutual nature of children's participation. For such relations, they refer to the constitution of dialogical spaces that apply norms of recognition, inter-subjectivity and respect for children (Fitzgerald et al. 2010).

Another framework theorises children's participation directly as a relational and spatial practice (Mannion 2010). Mannion builds on the ways in which participants and spaces trigger changes. He reasons these changes in relations, identifications and spaces that are all reciprocally linked: they co-evolve. He argues that participants' identifications co-emerge within the places they actively try to create. Based on this view, children's participation is an unfolding intergenerational performance during which the keys are identification, spaces and power struggles. Children's participation is made possible through a change of associated identifications between children and adults, their improved relations across generations and the emergence of knowledge within

intergenerational and interpersonal dialogues. For such dialogues the explicit creation of new intergenerational spaces is essential (Mannion 2010).

A necessary relational change to facilitate children's participation through a dialogical process is to listen to their voices. This change includes giving children a voice, which is also emphasised in the theoretical perspectives of Freire (1970) and Hadfield et al. (2001). I describe both of these perspectives in the next section, as I used them in my results to reflect on relational changes that facilitate children's participation (chapter 4.3.2).

2.7.4 Listening to children's voices facilitates their participation within dialogical processes

Freire's (1970) Pedagogy of the Oppressed stresses a dialogical approach to education. His pedagogical approach builds on people's own perceptions of developing their political consciousness from below. Freire describes it thus: *through looking critically at the world in a dialogical encounter with others, the individual…discovers how to participate in the transformation of the world* (p. 14 ff.). Freire sees education as a dialectical process of exchange between the educator and the learner. This dissolves the repressive order of the traditional distinction between the two of them (Butler 2008). In my results, I refer to Freire's envisioned relational changes to facilitate opportunities for the voices of the oppressed to be heard. The fact that Freire's perspective informed the field of children's participation further justifies my reference to it (Malone et al. 2010).

Hadfield et al. (2001) identify three typologies of young people's voice, which are useful in defining projects. The three broad types of voice are: authoritative, critical and therapeutic. I only used the typology of critical voice to reflect on my PAR in my results. The defining characteristics of this voice are: it develops through dialogue and interaction; attempts to challenge existing basis; is used by young people to influence power relations with adults and its outcomes challenge other people's views or practices and present alternatives (Hadfield et al. 2001).

In the next section, I present five theoretical frameworks on children's participation that emphasise their contributions to the community. All of these frameworks refer to societies in the Global South and accentuate or build on children's contributions to family and community life. They aim to understand children's participation as their community contributions, which I also emphasise in my results. In my results, I highlight such an understanding to realise children's participation through actions.

2.7.5 Frameworks on children's participation emphasising their community contributions

Hart R. (2008) urges the necessity to develop new conceptualisation on children's participation, which build on non-Western cultural contexts. In this sub-section, I examine his arguments, which he bases on the understanding and practices of children's participation in the more collective cultures of the Global South. Children in these contexts *are raised from an early age to see themselves deeply as members of a community with a responsibility to the development and care of others* (Hart R. 2008, p. 27). I greatly relied on his arguments during my final data analysis. I derived my results on approaches to realise children's participation partly from such daily practiced informal participation by children.

Hart R. (2008) advances his two arguments by criticising the many existing models on children's participation (e.g. Karsten 2012): First, most models are based on the Western perspectives on childhood and, as such, their focus on individual agency might not be appropriate to more collective cultures. Second, most models focus on children's formal participation in programmes. None of them represents children's informal participation, although children take on roles of great competency in their daily community lives. Children's informal participation is important to take them through a form of apprenticeship with adults or participation in work, e.g. maintaining water wells. Based on his arguments, Hart R. advocates among the cultural contexts of the Global South for an understanding of children's participation right that entails their responsibilities. He further criticises the common ways of exercising children's informal participation in those cultures: adults, and not the children themselves, initiate or design such actions. As such, Hart R. wonders where children's individual right to make their own choices lies. Therefore, he suggests the need to practice such informal participation by fostering dialogue between adults and children (Hart R. 2008).

Similar to Hart R.'s (2008) theoretical framework, the framework of children's participation advanced by Taylor et al. (2008) stresses the practice of dialogue to facilitate children's community engagement. However, Taylor et al. (2008) build on the importance of networks and relationships. They suggest the need to create spaces for children and adults to come together to engage, interact and learn. Such spaces would, according to Taylor et al. (2008), create opportunities and help children to engage in the communities, especially community development. Apart from creating dialogical spaces, their wider understanding of children's participation involves facilitating

children's autonomous social actions within their daily lives and recognising multiple forms of participation (Taylor et al. 2008).

Two other theoretical frameworks on children's participation broaden the understanding of children's community contributions at the political level. Hart J.'s (2008) framework emphasises that participatory initiatives should engage with political issues. He criticises the localisation of many participatory initiatives, as these constrain children's potential to contribute to development. UNICEF's depiction of child participation, for example, disregards socio-economic conditions (Figure 1, chapter 2.3.3), whereas these conditions entrench poverty and necessitate children's involvement far beyond the relationship circles presented (Hart J. 2008). Hart J.'s criticism of localisation of participatory initiatives also applies to my study's aim to realise children's participation at the school level. However, this aim does not relegate their contributions to political levels. Children's political engagement could be one long-term effect of their realised participation at school level, e.g. contribute to development.
The framework by Theis (2010) emphasises children's citizenship. Such increased citizenship competences could also be one long-term effect of my results' suggested realised participation. For example, increased citizenship skills would equip children for what Hart J. (2008) calls political engagement. Theis (2010) outlines, as conceptual approach to children's participation, two attributes for citizenship: citizenship rights and practices. The first, children's civil rights, constitutes essential instruments which enable children to take on more active roles in their communities and to influence public decisions. The second attribute, children's citizenship practices, entails active exercise of rights through democratic actions and civic responsibility. In this way, children learn and develop their citizenship competencies (Theis 2010).

All four of the presented frameworks emphasising children's community contributions are grounded in the recognition and strengthening of their agency. Stoecklin's (2013) framework focuses on the nature of children's agency. Different than the other scholars, I do not use his framework in my reflections or discussion of my research results. However, the suggested approach to children's participation in my results emphasise what Stoecklin (2009) elucidates as the five components that make up children's actions. His framework uses action theories and stresses the need to acknowledge the cumulative and recursive nature of action in order to grasp children's agency. With this purpose in mind, he developed the actor's system model. The model describes actions as the evolving outcome of the links between five components of personal experience: activities, relations, values, images of self and motivations.

These components act in the actor's system model as lenses through which the actors, hence the children, may read and give meaning to reality. Based on the premise of observing children's evolving capacities the model allows for a proper understanding of their agency (Stoecklin 2013).

In addition to children's agency is children's action competence, an essential requirement of all the frameworks presented emphasising the realisation of children's participation through community contributions. The approaches to children's participation suggested in my research results urge the inclusion of these two requirements. Therefore, the part of my results that reflects my PAR includes reflections on these two requirements. For my reflections, I adopted the theoretical principles of Jensen et al.'s (1997) action competence and Fuchs' (2001) relational perspective on agency (chapter 4.3.4, 4.3.5).

Before I present these principles in the next section, I complement my presentation of theoretical frameworks on children's participation. In my research, I do not refer to frameworks that highlight participatory government. However, these frameworks still resonate with my results' focus on changing relations and children's agency (e.g. Arnott 2008, O'Tolle et al. 2008, Tisdall 2010). I refer in my research to two of the various overall models on children's participation, which Thomas (2007) describes as dominating the theoretical discourse on children's participation (e.g. overview by Karsten 2012). I used Wright et al.'s (2010) stage model of participation to define my PAR's envisioned participation levels (chapter 3.2.1). The model differentiates nine degrees of power given to the target group to support decision-making. It groups the nine degrees into four stages as follows: non-participation, pre-stages of participation, participation and beyond participation. I used Wong et al.'s (2010) model in my discussion, as it is specific to health promotion. It distinguishes participation by three intergradient degrees of empowerment, namely adult control, shared control and youth control.

In the next section, I describe Jensen et al.'s (1997) and Fuchs' (2001) theoretical principles.

2.7.6 Supporting children's action competence and agency facilitates their participation through community contributions

I used Jensen et al.'s (1997) action competence concept because it is clear and precise. The concept is a formative ideal for environmental education. It defines competence as associated with being an able, willing and qualified participant. Actions must be intentional and one must always make up one's mind. This view then leads

Jensen et al. (1997) to define two elements of actions: first, one decides to do something and, second, actions must be targeted towards solutions to the focused problem and address its causes. Based on these elements of actions, the essential components of the action competence concept are: skills, knowledge, commitment, vision and action experience. Skills concern being able to cooperate, read and make oneself clear. Knowledge concerns pupils' acquiring of information on what the problems are, how they arose and what solutions exist. Commitment relates to the promotion of pupils' motivation and drive, which are needed to transform knowledge into actions. Visions deal with pupils' ideas about their future lives and action experience stresses the benefits of taking concrete actions (Jensen et al. 1997).

Pupils' capacity to act, now and in future, is included in Jensen et al.'s (1997) action competence concept. James et al. (2004) describe this capacity within their definition of agency as follows: *children's capacity to act and to recognise that these actions have consequences* (p. 24). Having defined the concept of agency, I now present the relational perspective on agency that I used in my research. I chose this relational perspective on agency for two reasons: first, it reinforces and corresponds with my relational approach to children's participation in my research results and in the other frameworks and, second, it is commonly used with children's agency within current literature. This perspective interprets agency as an outcome of social relationships, not as a precondition (Eßer 2014, Fuchs 2001, Hungerland et al. 2014, Raithelhuber 2012). Fuchs' (2001) elaboration of this relational perspective explains clearly the relationship among the variables that attribute agency. His variables were able to guide my results reflecting on children's agency during my PAR.

The conceptual core of Fuchs' (2001) agency theory is the human person. He elaborates his variables from a sociological focus, using the network analysis. He sees having agency as part of human nature and personhood. It requires consciousness, free will and reflexivity. Agency and structure are, however, not essential properties that some persons have. They are attributions and dependent variables that are more likely, in some situations, occasions and networks than in others. Fuchs (2001) uses Luhmann's (1992) second level of observation to turn agency and structure into variable devices. This switch allows us to observe if first-order observers use either agency or structure to account for social causes or outcomes. The outcome of attributing agency depends on the levels and relations between observers. Variables and covariates explain these levels and relations. One variable is the amount of discretion granted to workers in certain positions, networks or structures. Another variable is

intention. It is encouraged if persons are given high discretion, e.g. in a more permissive and pluralist environment, in contrast to a repetitive and disciplined setting that curbs discretion and intention. A covariate is when observers take an intentional stance towards a system or worker. They take a more interpretive approach towards making sense of the workers, instead of a deterministic approach. Such an interpretive approach attributes a rich inner life to the workers. This means the observer starts to believe that the workers have some internal or mental centre where they think, imagine and decide. This rich inner life granted to workers leads to another covariate of agency: the expected or observed capacity of the worker or system to surprise. In situations where something unpredicted happens, the workers may have agency. Consequently, granting agency indicates the observer's readiness to expect more surprises from the workers. The workers might be granted the faculties of spontaneity, creativity and originality, which supports the accumulation of surprises. Other covariates that bolster agency in the area of education are a small group size and intimate relations. These allow for giving care to students' individualism and particular talents and challenges students to discover and invent themselves (Fuchs 2001).

In the next sub-section, I describe the last theoretical principle that I used to reflect on my PAR as part of my results: Jesus et al.'s (2005) integrated model of teacher motivation. My results consider facilitators, e.g. teachers' motivation, as a crucial factor for the realisation of children's participation right (chapter 4.3.6.2).

2.7.7 Teachers' motivation to facilitate the realisation of children's participation

Jesus et al.'s (2005) integrated model of teacher motivation seeks to provide a theoretical framework for teacher motivation. It considers professional engagement as a primary indicator of teacher motivation. It describes the influence of a series of cognitive-motivational variables on teachers' engagement and their functional relations. The relations are based on cognitive-motivational theories, e.g. self-efficacy (Bandura 1977) and intrinsic motivation (Deci 1975). One central variable is the teacher's goal value. The model presents how this goal value changes depending on a teacher's professional results. Jesus (1995) uses additional variables to present such changes. These variables build on his empirical assumption that low teacher motivation follows settings in which highly valued goals are coupled with a low expectancy of goal attainment. The model explains these variables and their sequential relations using specific hypotheses: first, professional engagement is positively influenced by the variable of goal value and by the variable of expectancy of success; second, goal

value is influenced by the variable of intrinsic motivation, and, third, intrinsic motivation is influenced by the variable of efficacy expectations. An example of the causal relations between the three variables is that low efficacy expectancy can lead to reduced intrinsic motivation and, therefore, to a reduced goal value of professional activities (Jesus et al. 2005).

In the next section, I describe the AR approach. The AR approach was very relevant to my research for a number of reasons: first, I built my results' approaches to realise children's participation right on AR principles, referring to Percy-Smith's (2014a) conceptualisation of children's participation (chapter 2.7.1); second, my research was designed as a PAR with primary school children in Kenya, PAR being one of an enormous array of AR approaches, and, third, the PAR approach informed the field of children's participation (Malone et al. 2010). Therefore, AR was relevant for my study as an applied research design and as a means to make my theoretical and practical contributions to children's participation.

2.8 The Action Research approach

In this section, I first elaborate on the AR approach by presenting the definition I adapted for the study. Secondly, I specify the applications of AR with children. These form background information for my PAR and my secondary research objective of advancing the practice of AR with children (chapter 2.6.4). In the third sub-section, I present my envisaged AR process. I referred to Greenwood et al.'s (2007) Cogenerative AR model (Figure 2) based on three reasons: it consists of a clear structure of two AR phases, which helped me to plan out my PAR; it focuses on cogenerative learning arenas for a successful AR, as I experienced in my PAR that such arenas are crucial for children's participation, and Greenwood et al.'s (2007) understanding of AR as a democratic practice, which stresses features that are essential for children's participation: be open, participatory and fair to all participants and give them increasing control. In the fourth sub-section, I highlight the PAR approach, including particularities of its application with children. In all the four sub-sections, I concentrate on the relevant information for my PAR design (chapter 3) and my results of reflecting the PAR (chapter 4.3).

2.8.1 Definition of Action Research

Action Research is a 'family' of approaches. Its richness and diversity has been highlighted by Reason et al. (2008). In my research, I use the definition of AR given by Greenwood et al. (2007) as *a research strategy that generates knowledge claims for the express purpose of taking action to promote social analysis and democratic social change* (p. 5). This definition is based on the equation of democracy, which includes the creation of arenas for lively debate and for decision-making that respects and enhances the diversity of groups. Greenwood et al. (2007) posit that AR uses many conventional social science techniques, but it arranges the research process in a distinctive way. Most importantly, AR is a conjunction of the three elements of action, research and participation. These elements are further specified in Reason et al.'s (2001) definition of AR as *a participatory, democratic process concerned with developing practical knowing in the pursuit of worthwhile human purposes. It seeks to bring together action and reflection, theory and practice, in participation with others, in the pursuit of practical solutions to issues of pressing concern to people, and more generally the flourishing of individual persons and communities* (p. 1).

2.8.2 The use of Action Research with children

Much of the AR conducted with children has been in the two fields of education and programme implementation. In the field of education, AR has enjoyed widespread success, and related approaches have helped to expand AR (e.g. Baumfield et al. 2013, Elliott 1991, Macintyre 2000). However, much of this AR takes place in relation to adults more than to children's education. The ARs conducted in schools have mostly been heavily teacher-centred, with only a few having been open to student engagement (Greenwood et al. 2007, Herr et al. 2005). One positive example involved schools in Namibia in which teachers used AR as a means of abiding with the national school syllabus' emphasis on learner-centred education (Dahlstrom et al. 1999, Tubaundule 1999). Those teachers described their positive experiences with AR as being able to: enhance student's self-reliance, their curiosity and ability to independently develop solutions, improve the education process, and encourage girls to participate in class as much as the boys do (Liswani 1999, Mayumbelo et al. 1999). According to them, children's ability and willingness to take part in AR depend on giving them clear guidelines, teachers' encouragement and facilitation of learning opportunities that are free from stereotypes (Tubaundule 1999). In the field of programme implementation, AR has become a common approach to implementing child-targeted interventions globally (e.g. Hart R. 1997, Johnson et al. 1995, Nieuwenhuys 1996). In such research,

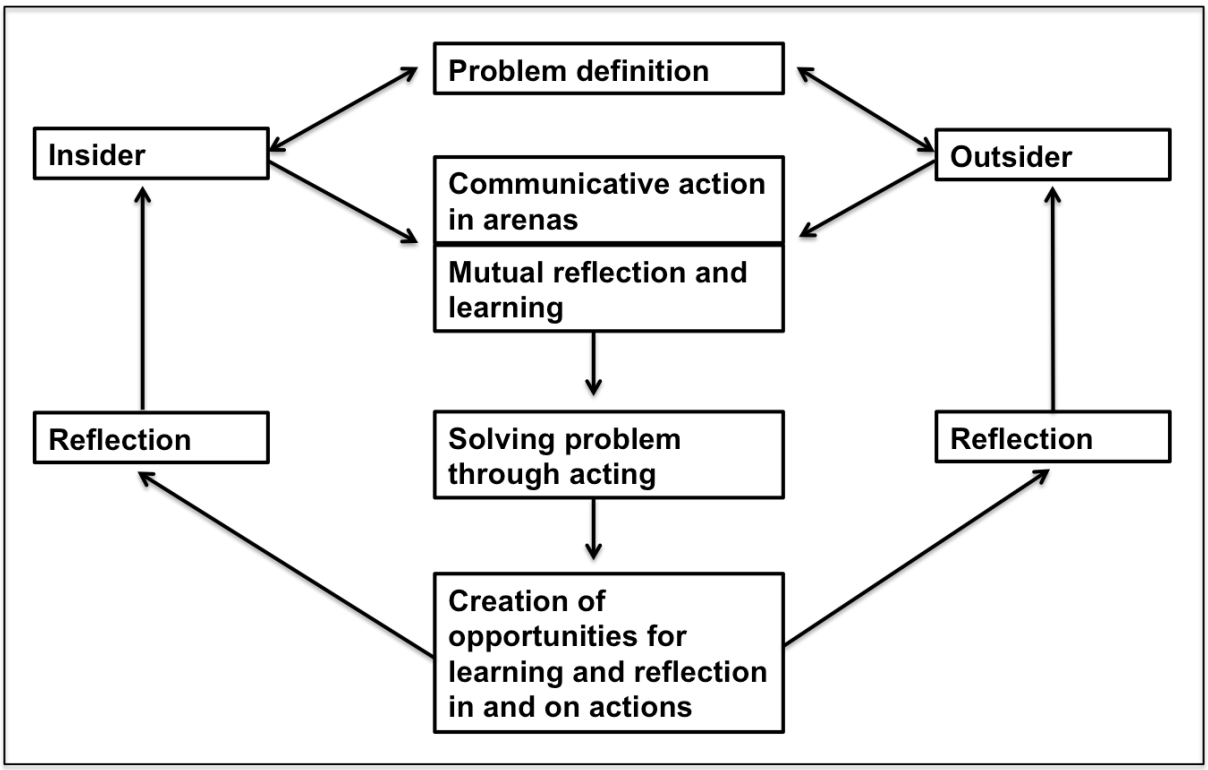
the PAR approach is mostly used (e.g. Kesby et al. 2007, Molina et al. 2009) (chapter 2.8.4).

2.8.3 Action Research process

I adopted Greenwood et al.'s (2007) Cogenerative AR model as the description of the AR process. This mode considers AR as a process of two analytically distinctive phases. The first phase clarifies the initial research problem. The second phase initiates and continues a social change and meaning construction process. Only the second phase focuses on actions, which varies from most other scholars' description of the AR process as a cycle or spiral (e.g. Lewin 1946, Mertler 2009, Stringer 2007). These cycles focus merely on the actions carried out during an AR and include: develop an action plan, carry out actions, observe the effects of those actions and reflect on those effects for further action planning (Herr et al. 2005).

Greenwood et al.'s (2007) Cogenerative AR model was originally designed for use with adults (Figure 2). Therefore, it was important for me to adapt it carefully to my study's social setting of primary school children in Kenya. I defined this adaptation as my secondary research objective (chapter 2.6.4, 4.1).

Figure 2: Greenwood et al.'s (2007) Cogenerative Action Research mode



I start the presentation of Greenwood et al.'s (2007) AR process with outsiders' and insiders' roles and, thereafter, specify its first and second AR phases.

The Cogenerative AR model identifies two main groups of actors: the insiders who are the focal point of every AR and the 'owners' of the problem, and the outsiders who are the professional researchers seeking to facilitate a co-learning process. The mutual relationship between these two actors is one core value of AR. Therefore, every AR seeks to adjust its central feature of power relations to a more equated level (Greenwood et al. 2007). Such relations could take three forms, according to Anderson et al.'s (2000) continuum of positionality: insiders in collaboration with outsiders; insider-outsider team, and outsiders in collaboration with insiders. Cogenerative AR is a collaborative research, in which, as Tolley et al. (1996) describes, outsiders increasingly take a 'we know – they know' attitude. At the beginning of the AR, outsiders often take the role of consciousness raisers. They gradually let go of control during the AR, so that insiders can increasingly learn how to guide their change process. The dynamic tension between insider and outsider is the basis for each AR's cogenerative process, according to Greenwood et al. (2007).

The first AR phase is the beginning of the mutual learning process between the insider and the outsider. Its objective is to clarify insiders' and outsiders' professional knowledge and to define the research problem jointly. This learning process leads to new and shared knowledge and to an initial working definition of the mutually agreed-on problem under study. Social learning takes place through collaborative dialogue and critical reflections. It is of great importance for insiders and outsiders to value the learning process. The AR features that ensure that insiders benefit from such a process are: focus on local knowledge and real-life situations; shared decision-making at every AR stage, and insistence on taking each insider's voice seriously (Chambers 1997, Greenwood et al. 2007, Herr et al. 2005). Greenwood et al.'s (2007) understanding of local knowledge includes insiders' expertise and reflections on their actions. The focus of the original AR design was also on creating knowledge by solving problems in real-life situations (Lewin 1946). Such a focus on insiders' real-life situations allows the knowledge gained to be useful, to be descriptive of their world and informative on how their world could be changed, the features of which Argyris et al. (1985) describe for AR.

The second analytical phase of AR begins with the creation of an 'arena' for communicative actions. Such arenas are created in the form of meetings or workshops and by the use of social science research techniques. Greenwood et al. (2007) describes the creation of these arenas as a great challenge. The objective of this second phase is to continue the process of meaning construction and to initiate social change. The

ongoing mutual learning and reflection process results in actions to solve the jointly agreed-upon social problem. Actions are said to be the only sensible way to test new social knowledge. Their aim is to alter the initial situation and to promote democratic social change. In order to encourage participants' (insiders') active involvement, actions should exhibit the following features: increase participants' self-management, their ability to control their own destinies and be of vital importance for them (Greenwood et al. 2007, Herr et al. 2005). Giving participants a greater amount of discretion also supports their involvement (Fuchs 2001) (chapter 2.7.6). The collaborative learning continues throughout the outsiders' and insiders' reflections being fed back into this process. Their reflections shape further arenas for new dialogue and mutually agreed actions, as the Cogenerative AR model envisions (Greenwood et al. 2007).

An AR process focuses on mutual dialogue, participants' real-life, their agency and actions, as I have elucidated. These exact components were affirmed in my results on children's views and in my experiences during the PAR for realising children's participation right. This affirms my decision to build the suggested approaches to children's participation on AR principles in my final results, making reference to Percy-Smith (2014a). In the next sub-section, I describe the particular AR approach of a PAR that I adopted as was my research design with primary school children in Kenya (chapter 3). I also point out the similarities between the PAR and the approach for realising children's participation right suggested in my results, which further affirm my decision to build on AR principles.

2.8.4 Participatory Action Research

In my research, I defined PAR as *a form of action research in which professional social researchers operate as full collaborators with members of organisations in studying and transforming those organisations. It is an ongoing organisational learning process, a research approach that emphasises co-learning, participation and organisational transformation* (Greenwood et al. 1993, p. 177). PAR was an attempt to make research the agent of transformation in rural communities. Its key objective was to rebalance power relations in a more egalitarian way by focusing on structural reforms of society. Freire (1993) formulates the need to listen to the voices of the oppressed as one of PAR's objectives. Compared to the overall AR approach, PAR was initially designed for political agitation. The term Southern PAR was often used to describe the fact that PAR practitioners were aligned with the poor and oppressed of the world. Their answer to overcoming poverty was to reduce inequalities and oppression. The practice of PAR

levels the playing field between outsiders and insiders. A cogenerative dialogue transforms both views by creating a shared understanding of local conditions, which informs practical interventions. The external researcher (outsider) is often a consciousness raiser who analyses the conditions of oppression, walks shoulder-to-shoulder with the local people (insiders) and develops an agenda for change, building on the insiders' knowledge (Greenwood et al. 2007, Molano 1998, Swantz 2008).

I see many similarities between the PAR approach and the approach to realising children's right suggested in my results. These similarities reinforce my decision to build my results' suggested approaches on AR principles (chapter 2.6.3, 4.3). First, my approach shares the intentions of PAR. PAR came into existence as a critique of inequalities and practice of liberation; power was the central problem addressed and social changes focused on rebalancing power relations (Greenwood et al. 2007). Second, the relation-oriented PAR standards are also affirming to my approach: engagement in dialectical processes that build on people's own perceptions; operating with them as full collaborators, and ensuring all agree on intended actions. The critical discussions on the limitations of participatory approaches are, in addition, important for the approach to the realisation of children's participation suggested in my results (Hinton 2008, Thomas 2007). These limitations concern mainly the exercise of power. They criticise participatory decisions for reinforcing the interest of the already-powerful (Cooke et al. 2001, Kothari 2001, Taylor 2001).

2.8.5 The use of Participatory Action Research with children

PAR is a common approach used in implementation of child-targeted interventions (chapter 2.8.2). Scholars describe PAR as a useful tool when working with children as it seeks to: engage them in defining their problems and solutions; reduce power imbalances between them and adults; recognise their rights; protect them from exploitive research; adapt research to contexts and cultures, and strengthen research findings (Chen et al. 2010, Langhout et al. 2010, Liegghio et al. 2010, Porter et al. 2010). Scholars identify specific requirements and recommendations to overcome challenges faced in using PAR with children. One challenge that remains, however, is the fact that children's views might generate conflicts, as children question adults' roles, institutional norms, cultures or the community. Scholars define the need for specialised skills, attitudes and expertise as requirements for PAR in such research (Clark 2010, Langhout et al. 2010, Maglajlic 2010). Particularly for Africa, some scholars describe the challenge of establishing collaborative relations between adults and children. To address this challenge, they recommend that researchers examine the complex

networks of power relations that are part of the wide range of adult-child collaborations and to bear in mind that adults might perceive the focus on children's views as suspect. A second challenge that those scholars describe is PAR's long timeframe. In non-Western countries, this timeframe might generate a conflict between children's other responsibilities. Conversely, a shorter timeframe might not be sufficient to build collaborative relationships. They recommend balancing the time commitments for PAR with children's daily tasks. A third challenge scholars refer to is children's elevated expectations. They suggest the need to define clearly all the possible and realistic benefits of PAR at the beginning (Langhout et al. 2010, Porter et al. 2010).

I shall revisit the particularities and challenges of PAR with children when discussing my PAR design in the next section (chapter 3), especially when reflecting on the challenges and ethics of my PAR design (chapter 3.8). In the subsequent section, where I present my research results, I also reflect on particularities of my PAR process with children (chapter 4.3).

3 Methodology

3.1 Overview of research design

My research sought to improve the realisation of children's right to participate within the CSHP and to contribute to the theory of this right. It aims to answer the following research question: *how can the children's right to participate within the CSHP in Kenya become a reality*? (chapter 2.6). I chose a PAR design for a number of reasons. First, I could draw on my various experiences in participatory research with children in the Global South (chapter 1). Second, the PAR allowed me to gain first-hand experience in realising children's right to participate. Third, based on their research findings in Kenya and Uganda, Okwany et al. (2011) suggested promoting a dialogue on children's rights with local communities in order to contextualise these rights. The PAR design facilitates exactly such a dialogue (chapter 2.8.4).

Before I describe my PAR process in detail I will give an overview of it (Figure 3). It is important to clarify that the children did not initiate the PAR. I initiated it. Therefore, the research problem was evident at the beginning of the PAR, namely the neglect of children's participation within the CSHP, was not a problem that greatly concerned the children. Their experiences of participating in the PAR raised their interest in the PAR's objective to realise their participation right in the CSHP. Children's participation during the PAR was intended to reach the level of 'co-learning' and 'partial delegation of decision-making', e.g. they decided on organisational issues or on preliminary data during the first analysis steps (chapter 3.7.1, 4.3.1.3). The GIZ financed the field research of the PAR. The PAR process started in July 2010 with my liaisons with the GIZ in Germany (Figure 3). As part of this research preparation, I worked out the PAR design. The preparations continued when I visited Kenya for the first time from February to April 2012 for the pre-testing and ethical clearance of my research. I visited Kenya for the second time to conduct the field research, from August 2013 to January 2014. I used the Cogenerative AR model as a framework for the PAR (Greenwood et al. 2007) (Figure 2, chapter 2.8.3).

The PAR started with the organisation of the data collection. This included facilitating the sampling and assembling the research team. Data collection took place during field research lasting for 4½ months, beginning in September 2013 and ending in January 2014. The data collection focused on the children. It was collected in 17 research sessions held at each of the three schools sampled. Two research facilitators, one female and one male, conducted every session in collaboration with the respective key

persons in the three schools. This helped to limit my influence on the research process. The data collection with the adults concerned two additional discussions held with children's parents at every school. I also interviewed each key person, the additional teachers and selected experts in the field of children's right to participate (chapter 3.6). As part of the data collection process, I conducted weekly meetings with the two research facilitators (chapter 3.4.1). The process of data analysis was split into two parts: the first took place in Kenya during the field research period of the PAR. This process, which involved the children and research facilitators, produced preliminary results of the PAR (chapter 3.7.1). In the second part of data analysis, I analysed the data for the final results in a non-participatory way. This part took place in Germany and I did it alone. This final analysis took a long time, starting February 2014 and ending January 2016. I finalised the results in April of 2017, after discussing them with the female research facilitator in Kenya (via Skype) (chapter 3.7.2.4). The following diagram presents the overview of the PAR process (Figure 3) and a detailed description is given in the subsequent sections.

The detailed description in the subsequent sections first presents my research preparation and organisation processes. I then explain my sampling process, the research team and the data collection process with children. Thereafter, I describe my complementary data collection with adults as well as the data analysis process. I end the section by reflecting on my PAR design, focusing on challenges and ethical concerns.

Figure 3: Overview of Participatory Action Research (PAR) process and structure of its description

July 10-July 13	**Research preparation in Germany (liaison with GIZ and research design)** - I approached GIZ with my research subject and selected HSP in Kenya as the research field - I planned research with the respective people and organised its financing (ensured it in July 13) - I defined the research design which included six quality criteria (Table 1)	**described in chapter 3.2: Research preparation and organisation** research sampling described in ch. 3.3 and research team in ch. 3.4
Feb. - April 12	**Research preparation in Kenya (pre-test and ethical clearance)** - I built up contacts, passed ethical research clearance and got research approvals - I conducted two days' pre-testing (in Vihiga County)	
Aug. - Sept. 13	**Research organisation in Kenya (research sampling and research team)** - I selected two research facilitators, conducted initial trainings; key persons were appointed - We informed head teachers about the PAR (gatekeepers) - We facilitated research sampling (Kiambu County) (Figure 4)	
Sept. 13-Jan. 14	**Data collection with children in Kenya (arenas for co-generative learning) (Table 2)** - Research facilitators and key persons conducted 17 sessions with the six children's groups	**described in chapter 3.5 and 3.6: Data collection**
Sept. 13-Jan. 14	**Data collection with specific adults in Kenya (discussion and interviews) (Table 3)** - Research facilitators, key persons held 2 FGDs with each parents' group (Sept. 13, Jan. 14) - I conducted weekly meetings with research facilitators and interviews with key persons - I conducted interviews with additional teachers and selected experts (Dec. 13 - Jan. 14)	
Sept. 13-Jan. 14	**Data analysis with children, research facilitators and some experts in Kenya (Table 4)** - Research facilitators reflected with children on data/interim results (verification session, Jan.14) - I reflected with research facilitators on each protocol's data, interim and preliminary results - I reflected with some experts on interim and preliminary results (Jan. 14)	**described in chapter 3.7: Data analysis**
Feb. 14-April 17	**Data analysis for final results by myself in Germany (Table 4)** - I coded protocol content and presented the children's views structured in 9 categories - I developed concept to reflect PAR and presented a reflection of PAR according to this concept - I structured diary notes and presented the notes accordingly in all chapters - I discussed the final results with the female research facilitator and others (Jan. - April 17)	

3.2 Research preparation and organisation

I began the preparation of the PAR on my own in Germany and continued when I first visited Kenya (February 2012). The organisation of the PAR took place at the beginning of my second visit to Kenya (September 2013). The next sections describe both of these periods.

3.2.1 Research preparation in Germany

The preparations for the research began in July 2010 when I approached the GIZ in Germany. My proposed area of research, namely the realisation of children's right to participate in the health promotion context found interest at GIZ's HSP in Kenya. I planned the research in cooperation with the respective authorities and experts in Kenya and I was assured of funding by the GIZ in Germany in July 2013.

The preparation included defining the research design. As part of this process, I defined six quality criteria for the PAR. My reasons for selecting these particular criteria were to ensure the principles of the Cogenerative AR model were followed (Greenwood et al. 2007) and to enlist a high level of children's participation as the UNCRC's Article 12.1 states (chapter 2.8.3, 2.1.1). I formulated the criteria based on a review of the literature of Cook (2009), Herr et al. (2005), ICPHR (2013) and Springett el al. (2011). The first criterion was that the PAR should be participatory; meant as a systematic ongoing attempt to involve, to a maximum degree, the persons whose lives were in focus (ICPHR 2013). I defined children's participation during the PAR as a form of 'co-learning' and 'partial delegation of decision-making' in line with the views of Cornwall (2008) and Wright et al. (2010). The second criterion was that knowledge is co-created through dialogue among the people involved. The third criterion was that the PAR should be educative for researchers and participants alike, which often results from a confrontation of different views. The fourth criterion stated that transformative changes should be supported and result in a positive social change for the children. The fifth criterion was that the PAR should be locally situated and the sixth was that critical reflexivity should be at the core (Table 1).

Table 1: Quality criteria of the Participatory Action Research (PAR)*

Quality criteria for the PAR	Explanation
1) is participatory (participatory validity)	PAR is a systematic ongoing attempt to involve those persons whose lives were in focus (maximise their participation)
2) knowledge is co-created within dialogue (dialogic v.)	PAR is a process in which knowledge is created through an ongoing dialogue between different perspectives and people involved
3) is educative and developmental (catalytic validity)	PAR is educative to both the researcher and participants and should engage participants in transformative learning leading to change
4) is supporting transformative change (outcome v.)	PAR is supporting transformative processes which go beyond the span of research so as to contribute to lasting change for a better life
5.) is locally situated (contextual validity)	PAR is located in lived reality of daily life where changes are expected as result of the process
6.) is reflective (process validity)	PAR means that a sound methodology is applied which facilitates reflective cycles being at the core of all process stages

*Literature used: Cook (2009), ICPHR (2013), Greenwood et al. (2007), Herr et al. (2005), Reason et al. (2001), Springett et al. (2011)

During my research preparation, I reviewed the existing literature on my research topic. My objective was to establish what had already been done in my field of interest. This review of literature helped me to formulate the theoretical framework for this study (chapter 2.7). To access these secondary literature sources, I used databanks of the Bielefeld Academic Search Engine (BASE), PubMed, JStor and Google Scholar. My search words were: children's right to participate, children's right to participate and health education, children's right to participate and Kenya, children's right to participate and primary schools.

3.2.2 Research preparation in Kenya

I visited Kenya in February to April 2012 with the objective of carrying out the field research. However, the CSHP implementation by GIZ's counterpart was delayed so I could not carry out the research in the Kisumu and Vihiga Counties at the time. Therefore, I prepared the research during these two months. This included first building contacts with the MoPHS and the relevant NGOs implementing the CSHP. Second, I obtained clearance to conduct the research from the ethical board of the African Medical and Research Foundation (AMREF). This board is accredited as an ethical review committee by the National Council for Science and Technology[1] (NCST 2013, NACOSTI 2017). Third, I got my research approvals signed by the MoPHS and MoE. Fourth, in cooperation with an explicitly appointed research facilitator, I conducted a two-day pre-testing of my research methods at a primary school in Vihiga County.

[1] Since the year 2013/2014, the National Commission for Science, Technology and Innovation (NACOSTI) has been the successor to the National Council for Science and Technology (NCST) in Kenya (NACOSTI 2020).

3.2.3 Organisation of data collection in Kenya

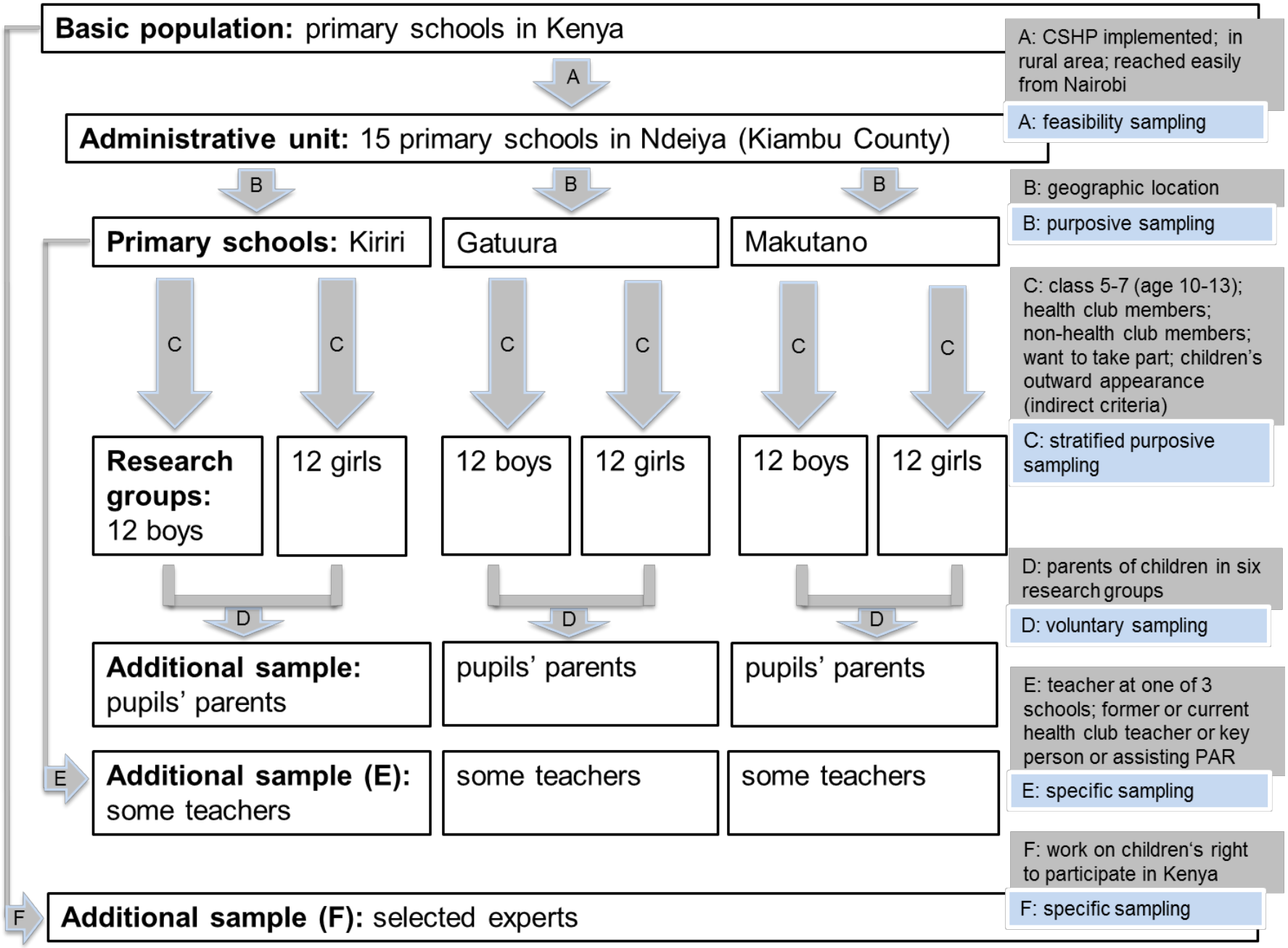
I visited Kenya again from August 2013 to January 2014 to carry out the PAR. The organisation process involved sampling and assembling the research team, which are described in the next sections (Figure 4, 5, chapter 3.3, 3.4). The District Education Officer facilitated our access to the three sample schools. He informed the schools about the research and prepared them for our initial arrival. In each of our first visits to every school, we were accompanied by the Area Education Officer who made introductions. We also informed the head teachers (gatekeepers) about the PAR's objective and procedure (diary 2:50).

Each of the three gatekeepers reacted differently: in Kiriri School he was very interested and engaged; in Gatuura she was more concerned about what the school would gain in terms of material resources and in Makutano she was interested, but not very engaged (diary 2:45-46/48/53/57). These differences depicted each school's distinctive commitment to the research (Annex: Table 8).

3.3 Sampling

The target population from which the research sample was obtained comprised primary schools in Kenya. This population was considered relevant to the objective of the study, namely to investigate ways to improve the realisation of children's right to participate in the CSHP that is implemented nationwide in Kenyan primary schools. From the target population, a sample of participants was selected which consisted of six groups, namely three groups of primary school boys and three groups of girls. The sampled children's parents, some teachers and experts were also selected. Figure 4 gives an overview of the sampling and selection procedures, with explanations in the subsequent sections.

Figure 4: Overview of sampling of the Participatory Action Research (PAR)



3.3.1 Selection of primary schools

Out of the basic population of all Kenyan primary schools, 15 were selected from the rural area of Kiambu County in which StC worked. I carried out the selection of these schools on my own in a non-participatory way, but in consultation with the GIZ, StC and the MoPHS. The 15 schools were selected because they fulfilled the selection criteria that I had defined prior to the research. The first requirement in my inclusion criteria was that a school must be implementing the CSHP. This was necessary because my research focused on this CSHP and one interim research objective was to give advice to the MoPHS on how to improve the realisation of children's participation right within the CSHP. The second criteria was that the 15 schools are located in rural areas. This criterion was justified by GIZ's interest in rural areas as the agency financed the roll-out of the CSHP in rural parts of Kenya's Kisumu and Vihiga Counties. The third criteria was accessibility; I had to ensure I could reach the schools easily on a weekly basis from the capital city of Nairobi where I lived (Figure 4: selection criteria A). The 15 sampled schools fulfilled all the three criteria. First, StC had implemented the CSHP in all the 15 selected schools since 2011[2] (StC 2012, 2013). Second, the schools were located in rural areas and third, the distance to each school from Nairobi averaged 100 km. The 15 schools were located in the administrative unit (or the ward) of Ndeiya which is located in Limuru, one of the 12 sub-counties in Kiambu County (County Government of Kiambu 2013, KNBS 2009,). Initially, the research had been designed to be conducted in schools in Kisumu and Vihiga Counties where the GIZ financed the CSHP implementation in 160 schools. I would still need to live in Nairobi at the time of the field research. As such, after consultation with those responsible for CSHP at the MoPHS and the GIZ representatives, I changed the study's location to Kiambu County. The MoPHS assisted me to establish rapport with StC, who had implemented the CSHP in the 15 schools in the County. Consequently, the reasoning behind my selection of these schools was feasibility, which explains why I used a feasibility sampling technique (Figure 4: selection procedure A).

Out of the 15 schools selected, the District Education Officer helped me to sample 3 schools based on geographic criteria. I planned initially to gain a variance within the sample by selecting schools according to the different characteristics of ethnic groups, school management style and poverty level. The District Education Officer was not

[2] StC's selection criteria for the 15 schools that implemented the CSHP were: first, the school's vulnerability, which included lack of basic sanitation and health facilities, and second, the school's enrolment of children from less privileged households (diary 2:31) (StC 2013).

familiar with such characteristics. Instead, he chose the 3 schools based on the fact that they were located in different geographical areas within the 125 km^2 of Ndeiya region (diary 2:34) (KNBS 2009). Kiriri Primary School is located in the East (with 316 students enrolled at the time of the study), Gatuura Primary School in the North (with 589 students at the time of the study) and Makutano Primary School in the Southwest of Ndeiya (with 382 students at the time of the study) (Figure 4: selection criteria B) (diary 8:5/9) (Business List 2017). The selection procedure for the 3 schools, therefore, constituted purposive sampling (Figure 4: selection procedure B). I chose to consult the District Education Officer to help me identify the 3 schools because he was the overall officer in charge of education programmes at primary schools in the area, and he had proved resourceful when I first met with him as I prepared field research in September 2013.

The initial research design had as one selection criterion for the 3 schools, that they defined SRH as a priority subject in the CSHP. The GIZ had identified SRH as a priority subject in the schools where the agency financed the CSHP implementation in Kisumu and Vihiga Counties. However, StC had identified hygiene and nutrition as priority subjects in all the 15 schools in Neidya. These were the priority subjects of the CSHP in the 3 selected schools sampled in this research.

3.3.2 Selection of research groups and additional samples

In each of the 3 primary schools, a group made up of 12 boys and another group made up of 12 girls were sampled. The separate groups of boys and girls allowed for differentiation of children's views based on gender. The first selection criterion for the boys and girls was that they had to be in classes 5-7. This category represented a majority of the health club members, who were aged 10 to 13 years. The age limit of 13 years for the sample was suggested by the research facilitator who conducted the pre-testing with 10 to 12-years-olds (chapter 3.2.2). Her argument was that the advanced age added to the quality of the PAR (diary 2:12). The second selection criterion was that 6 of the 12 boys and 6 of the 12 girls in each school had to be members and the other 6 had to be non-members of the club (diary 2:33). This was designed to help us distinguish between the views of members and non-members of the health club. The third criterion was that the children had to take part voluntarily in the PAR. In addition, I adopted an indirect selection criterion to increase the economic variance. In this criterion, I ensured that in each group there were children from economically privileged and from less economically endowed family backgrounds. During the sampling process, I implemented this criterion using my impression of children's outward

appearance, e.g. dressing style and quality, as a reflection of the economic status of their families (Figure 4: selection criteria C). The 12 boys and 12 girls in each school were, therefore, selected using a stratified purposive sampling technique (Figure 4: sampling procedure C).

This selection was carried out in a single day in which the research team visited the 3 schools. The procedure began with the team introducing the research to the school head teacher and an allocated key person who then accompanied us into classes 5-7 to meet the learners. The heads or key persons introduced the research to the children (diary 2:47). In each class, we used two stages of purposive sampling. In the first stage, we asked those pupils who were members of the school health club to stand up. I then selected two boys and two girls in each class in Kiriri School and one boy and one girl in each class in Gatuura and Makutano Schools, which had two classes for 5, 6 and 7. The same procedure was followed when selecting boys and girls who were non-members of the school health club. In the second stage, we asked each selected pupil to state their age, so as to ensure that the age range of 10-13 years were sampled (Annex: Table 9). The pupils selected after these two stages were given a chance to volunteer to take part in the research. They were also informed that the research would continue during school holidays. They were then asked to sit down if they did not want to join in the research, although most of the learners showed great interest. Those who withdrew were replaced with other willing pupils (diary 2:43/45/47). Once the selection was complete, the female research facilitator wrote down the name, class and age of each sampled child respondent. The total sample size came to 72 pupils all of whom belonged to the ethnic group of the Kikuyu.

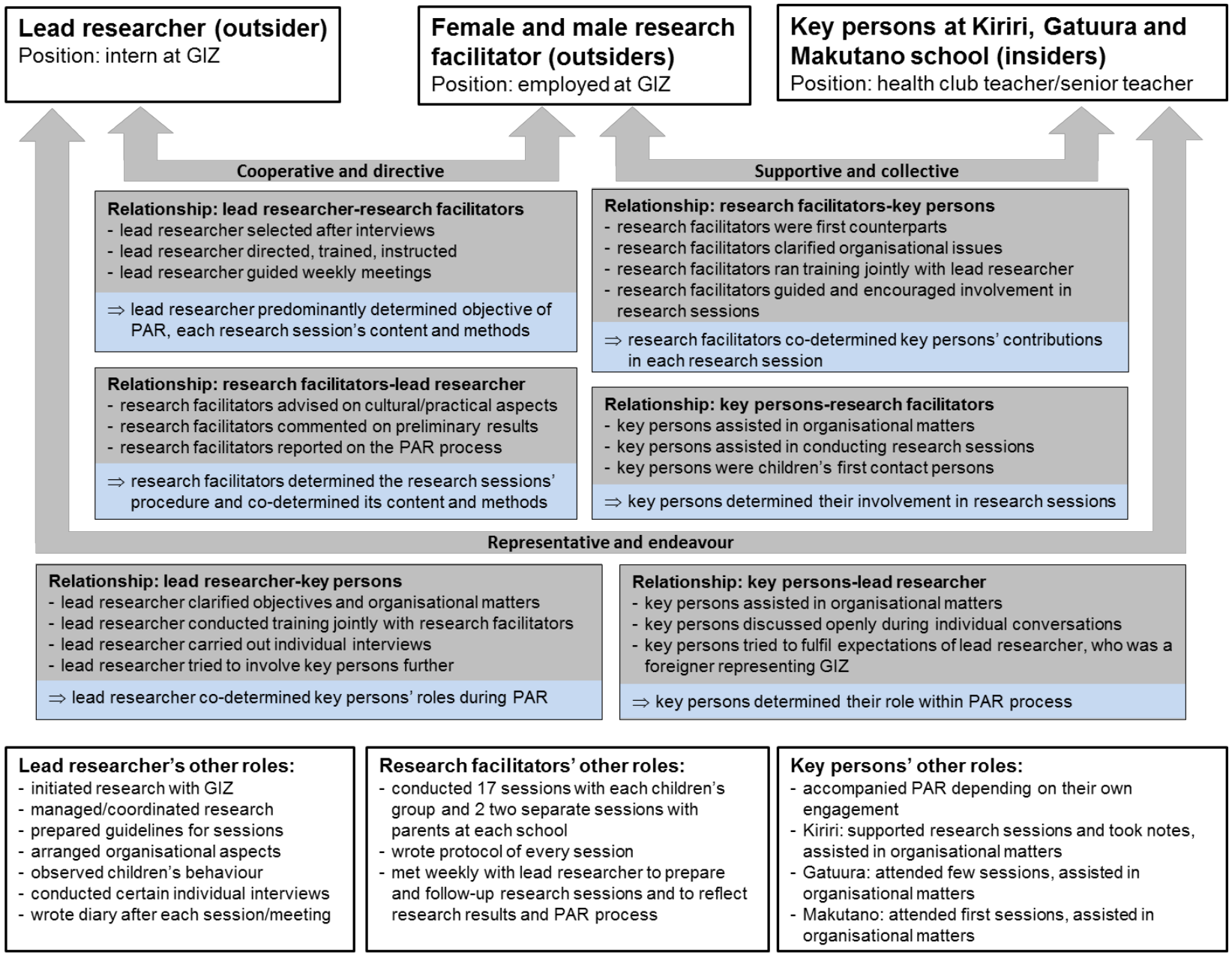
I selected additional samples of the pupils' parents, some teachers and experts from relevant NGOs or United Nations (UN) agencies. The views of these group of participants on children's right to participation complemented the children's perspectives. The selection criterion for the parents was that their children were involved in the PAR (Figure 4: selection criteria D). We used a voluntary sampling procedure. The children, the head teachers and key persons in the schools invited the parents of the selected children to two meetings (Figure 4: selection procedure D). In those meetings we held discussions with the parents about specific subjects (chapter 3.6.2). For the teachers the first selection criterion was that they worked in one of the 3 schools. The second criterion was their role as either former or current health club teacher. They could also be one of the appointed key persons or accompanying the PAR in organisational affairs in the school (chapter 3.4.3) (Figure 4: selection criteria E). The selection criterion for

the experts was their involvement in the implementation of children's right to participate in Kenya. The expert participants were sourced from the following organisations: CLAN, KAACR, MoPHS, NCCS, PLAN International, StC and UNICEF (Annex: Table 10). I selected the teachers and the experts using a specified sampling procedure, because it was clearly guided by my specified criteria (Figure 4: selection procedure E and F).

3.4 Research team

The research team consisted of myself as researcher, a female and a male research facilitator and one key person at each of the three schools. I had the position of an intern and both of the research facilitators were employed at the GIZ for the research period. We functioned as outsiders during the PAR while the key persons acted as insiders (chapter 2.8.3). Figure 5 presents the research team, the working relationships, roles and co-determination, which I further elaborate in the next chapters. As part of these elaborations, I explain the role of each team member. I reflected in detail the role of the research facilitators and the working approaches applied in my results (chapter 4.3).

Figure 5: The research team, its relationships, roles and co-determination



3.4.1 The lead researcher

Being the lead researcher, I initiated the PAR. My overall role was to manage and coordinate the research. My duties included preparing guidelines for each research session, arranging organisational aspects, observing children's behaviour during the very few sessions that I attended, conducting individual interviews with some teachers and selected experts and writing a research diary. In the diary, I reported on organisational issues, challenges faced, observations, reflections and decisions, including those on the PAR process after each session. I also reported the content of discussions with the research facilitators, key persons and my conversations with teachers and experts.

My role in relation to the two research facilitators was based on the fact that I appointed them through an interview process. During the research, I acted as a guide to them, which involved training and instructing them on how to conduct each session with the children (chapter 3.4.2, 3.4.2.1). This was my primary responsibility during my weekly meetings with the research facilitators. During these meetings, which I facilitated, we discussed and improved my guidelines for the subsequent sessions, reviewed previous sessions with the children, discussed uncertainties in the protocols, specific cultural aspects, preliminary results, and reflected on the PAR process. Our reflections focused on such issues as data obtained on children's understanding of their right or on defined actions and our consolidated approaches to realise children's participation right. Throughout these engagements, I endeavoured to maintain a cooperative working relationship with the research facilitators. I still played a predominant role in defining the research objective, the content of each session and the methods used. In every session held with the children, I usually retreated to the background to give greater control to the research facilitators. In fact, I attended very few sessions because I did not want to influence children's involvement or the research facilitators' work with my presence. I described my overall working relationship with the research facilitators as cooperative and directive (Figure 5). The female research facilitator agreed to this description. She affirmed that the working relationship was cooperative *as we put our thoughts together before and after sessions* and it was directive*, as you were the lead researcher and we often looked to you for instructions* (diary 8:39).

On the contrary, I labelled my relationship with the key persons as representative and endeavour driven. Their behaviour and actions during the PAR often represented for me the character of other Kenyan teachers and it showed their endeavour to fulfil my expectations. My role towards them was to clarify the research objectives and

organisational matters, to conduct their training jointly with the research facilitators and to carry out individual interviews on their perspectives on children's right to participate (chapter 3.4.3, 3.4.3.1). Furthermore, I tried to involve every key person in the PAR. I gave them a breakdown of each session's guidelines, in which only the key person in Kiriri School was interested. In general, I co-determined their roles. The research facilitators and the key persons worked together to really determine the key persons' role during the PAR (Figure 5).

3.4.2 The research facilitators

The criterion I used to select the two research facilitators after interviewing was their experience in working with children. The female research facilitator met this criterion as she had experience with child-led clubs and conducted qualitative research (diary 2:35). The male research facilitator did not meet this criterion, but he was very interested in working with children. He was the second male research facilitator I selected, since the one I had first appointed left after a week because he found another job. Both of the research facilitators I finally appointed were willing to make themselves available for the research period and hailed from the same Kikuyu ethnic community as the children. As such, the research facilitators spoke the children's mother tongue, Kikuyu, and also Kiswahili and English.

The role of the two research facilitators during the PAR was to conduct each session with the children. They facilitated a mutual learning and reflection process with the children (chapter 2.8.3). The female worked with the groups for girls and the male research facilitator worked with the boys' groups. Both of them conducted the sessions in line with the guidelines I had prepared and which I had jointly revised with them (chapter 3.5.2). The research facilitators determined each session's procedure. They co-determined each session's content and used methods, as I had discussed and adapted with them the guidelines for each session. The female research facilitator commented on her role that *she understood her role for the most part as a research facilitator, through there were some times as we would consult on the content and method that I did feel like a co-researcher* (diary 8:39). The research facilitators' specific role towards me was to advise on cultural and practical aspects. They also commented on my preliminary results and only the female research facilitator commented on my final research results (chapter 3.7.1, 3.7.2.4). They informed me after each session about the children's involvement and described the PAR process. They also guided the two separate sessions with the children's parents (chapter 3.6.2). In every session with the children and with the parents, the research facilitators wrote

down a brief protocol, refined them immediately after every session and sent the detailed protocol in English to me to be discussed during our weekly meetings (chapter 3.5.2). I described their relation towards me as cooperative and directive (chapter 3.4.1) (Figure 5).

By contrast, I described their relation to the key persons as supportive and collective. Affirming my description, the female research facilitator commented that the relation was supportive *as we always hoped to have them involved in our sessions, and in that way we would support them by enabling them to learn from the process* (diary 8:39). The role of the research facilitators was also to act as the first counterpart to the key persons during the research, to clarify organisational issues and to conduct training (chapter 3.4.3.1). Depending on the key persons' involvement, the research facilitators guided them by jointly conducting children's sessions and encouraging them to actively contribute in each session. The research facilitators, therefore, always co-determined the key persons' contributions (Figure 5).

3.4.2.1 Training of two research facilitators during PAR

I trained the research facilitators in three different meetings. First, I trained them individually immediately after they were appointed. The key area of this training was on the research objective and PAR. I conducted the second training with both research facilitators to deepen their knowledge on research with children, on children's right to participate, on PAR and PLA methods. I started this training with individual brainstorming on the subject of children's participation right, which revealed that both research facilitators had an advanced understanding of this right (diary 3:1/12). They also translated Article 12.1 into Kikuyu and Kiswahili to enable them to easily and clearly explain its content to the children. In addition, we agreed on the content of the protocols for each session with the children. In the third training, I took the research facilitators through all the topics we covered in each of our weekly meetings.

3.4.3 The key persons

Each of the head teachers of the three schools appointed one key person using the criteria that we, the research team, gave to them during our first visit to every school. The criteria were that the key person should enjoy working with children and have an interest in the subject of health, be an enthusiastic person, who promoted the participatory work with children and volunteered to take part in our research. We made clear to the head teachers that we would not give any compensations to the key persons (diary 2:50). We did not verify if the head teachers followed the above criteria in

choosing the key persons, but we decided to incorporate the people they selected into the research. Nonetheless, the reasons that the head teachers gave for appointing the respective key persons corresponded to our criteria. The three head teachers gave the following explanations: *he had proven to work effectively with children; he is interested in working with children; their focus had been the health club* (hm. K. No. 1, hm. M. No. 3, hm. G. No. 2).

The male key person in Kiriri and the female in Gatuura were both health club teachers. The male key person in Makutano had the position of assistant club teacher and senior teacher[3] (diary 2:45-46/48). In Makutano and Kiriri the key persons were also available during school holidays and in Gatuura a substitute was appointed. We also encouraged children's parents to join the PAR as key persons (chapter 3.8.4). This was meant to better inculcate the PAR and the subject of child participation into the community as well as having a good number of key persons in each of the children's sessions. In Kiriri two mothers were interested, but they attended only two sessions claiming that they were too busy with house chores (diary 2:55, 3:13; par. K. No. 104). In Gatuura, one father attended one session, but he did not come again; he seemed irritated when I asked him not to influence children's views (diary 3:17). We decided to continue the PAR with only the one key person in each school. Our reasons for this decision included the fact that it was already difficult to enlist the active involvement of these three key persons, that no parents were willing to attend the sessions on a continuous basis as key persons, that some parents swayed their children's views and that their presence intimidated the children affecting their participation (diary 2:52, 3:5/27; b. G. No. 20). As per our decision, the research facilitators conducted the girls' sessions in Kiriri and Makutano and the boys' sessions in Gatuura without a key person.

In a PAR, key persons play the essential role of ensuring the sustainability and ownership of the anticipated social change (Waterman et al. 2001). The targeted social change of this PAR was to improve the realisation of children's participation right in the CSHP (chapter 2.6). I defined the three key persons' role as accompanying the research process. This role included overseeing various tasks, depending on each key person's actual level of own engagement. In Kiriri the key person supported each research session with the boys. He further explained questions or PLA methods, as he spoke Kikuyu more fluently than the research facilitator (diary 4:3; b. K. No. 37). He assisted in organisational matters and took notes of children's answers. I used his

[3] In Kenya, senior teachers in primary schools undertake some school management responsibilities apart from playing their teaching role (whownskenya 2018).

notes to complement the research facilitators' protocols. The key person in Gatuura attended only a few of the girls' sessions and the one in Makutano only a few of the boys' sessions. During these sessions the two key persons mainly observed and assisted in organisational issues (diary 4:1).

The role of the key persons in relation to the research facilitators was to assist in organisational matters and in conducting the sessions. The key persons were the children's first contact person for questions concerning the research. They decided on their own how to carry out these functions and, in this way, determined their involvement in the research. They constantly strove to support the research facilitators and to work collectively (Figure 5). By contrast, I described the key persons' relation towards me as representative and endeavour-driven. I noticed that they made efforts to fulfil my expectations, especially as they regarded me as foreign researcher representing the GIZ. Their responsibility to me was to assist in organisational matters and to discuss important issues during our individual conversations. The key persons determined these roles on their own, which explained their varied engagement (Figure 5).

3.4.3.1 Training of three key persons during PAR

I trained the key persons using two meetings and personal conversations. First, each key person attended the parents' introductory session in which I explained the research objectives and approach. Second, I trained the key persons about the PAR through individual conversations I held with them. Third, the research facilitators and I conducted training for the key persons at the end of the PAR on the 10th of January 2014. We set the training date with them and the venue was Makutano School, which was easily accessible. In addition to the three key persons, the club teacher from Makutano attended the training. The objectives of the second and third trainings were to support the continuing realisation of children's participation, to agree on the club's continuation after the PAR, to comment on specific cultural practices obtained from my preliminary results, e.g. teachers' practice to cane children (chapter 3.7.1, 3.8.8.4). The content of the trainings included transferred knowledge on children's right to participation, based on the UNCRC and a discussion on the key persons' views on this right and their feedback on the PAR. The research facilitators wrote down a protocol of the first and third trainings' content and I reported my individual conversation into my research diary.

3.5 Data collection with the children

The field research of the PAR started at early September 2013 and ended in late January 2014. The main objective of this field research was to collect data on children's understanding of the right to participate and on their defined concepts to realise this right within the CSHP (chapter 2.6). The data collection with the children took place during the whole field research period. This time included four weeks of the December school holiday (which lasted from end of November to mid-December 2013), during which we took a two-week break.

The research facilitators collected the data using a total of 17 sessions with each of the six children's groups (Figure 5, chapter 3.4). In three days of every week, they held parallel sessions for each of the girls' and boys' groups in each school. In one session in Gatuura School and in one in Makutano School (9th/11th), held during the December holiday, the research facilitators worked with the few boys and girls present in mixed-gender groups (diary 4:40/42, 6:1; b./g. G. No. 54, b./g. M. No. 55). All sessions took place in the afternoon, at the time when the health clubs usually held their meetings. In Kiriri alone, the children decided to hold the four holiday sessions in the morning. Each session lasted for 1½ to 2 hours. The research facilitators created arenas for cogenerative learning during each session. The process of field research was split into two phases, in accordance with Greenwood et al.'s (2007) Cogenerative AR model (chapter 2.8.3). An overview of the data collection process with the children is given in Table 2 below. The table shows subjects and techniques used during the PAR's field research in the two distinct phases.

Table 2: Overview of PAR's field research period concerning data collection with children*

Specify AR phases (chapter 2.8.3, 4.1)		**1. PAR Phase**		**2. PAR Phase**			
		clarify children's and research team's knowledge		exchange children's and research team's knowledge		solve social problem	take actions
Sessions		1-5	6	7-8	9-13	14	15-17
Subject: children's right to participation		found out children's views on their participation	explained children's right to participate (Art. 12.1)	defined each children's groups' understanding of right (6 summary models, see Annex: Fig. 13)	reflected on each group's summary model and related aspects, e.g. barriers to their participation	defined actions to realise right (recommendations: interim results, see Annex: Fig. 14)	carried out few recommenda-tions on SRH
Subject: children's desired changes		selected desired change at school		defined actions to realise change	planned, carried out few actions		continued to carry out actions
Research tech-niques applied on following contents (chapter 3.5.3)**	FGI	- children's views, reflections and defined actions on their right to participate - children's small ARs on selected changes					
	PO	- children's practices and reactions during, before and after sessions (included behaviour during PLA methods) - key persons and other adults' behaviour and relations towards and with children - characteristics and overall PAR process					
	PLA meth-ods	- children's views and reflections on subjects relating to their right to participate:					
		- *Circle Diagram* on involvement - *Drawing* on involve-ment in decisions - *Ranking Line* on likes/changes at school/health club - *Preference Ranking* on priorities of desired changes	- *Explanation* on Art. 12.1 (Annex: Fig. 16)	- *Brainstorming* and - *Four Corners* on understanding of Art. 12.1 - *Web Method* on what needs to happen to participate in health club (understanding of participation right) - *Puppet Play* on participation in health club	- *Agree-Disagree* - *Barometer 1 & 2* on health club rules - *Paper Slip* and - *Road Block* on difficulties to realise participation right - *Community Mapping* on participation/risks - *Problem Tree 1* on actions to realise change	- *Problem Tree 2* on actions to real-ise children's right to participate	- *Boxes* on childhood - *Explain* SRH - *Cart Sorting* on SRH subjects - *Discussion Group 1 & 2* on SRH/ feedback - *Poems* to teach others

*A total overview of dates and contents of each session is given in Table 12 (Annex).
**I explain the application of each PLA method and illustrate its results from our research in Mahr-Slotawa (2020).

3.5.1 Subjects of research sessions with children

The PAR addressed the social problem of neglecting children's right to participate in the CSHP. To address this problem, the 17 sessions covered the two overall topics of children's right to participate and the changes they chose for their schools (Table 2 and Annex: Table 12).

Concerning the main subject of children's right to participate the children (insiders) and the research team (insiders-key persons; outsiders-lead researcher, -research facilitators) clarified their views and knowledge during the first PAR phase (session 1-6) (chapter 2.8.3). Session 1-5 focused on getting to know the children's perspectives on their participation in school, at home and in the community. In session 6 the team introduced their professional knowledge of the right according to Article 12.1 of the UNCRC (Annex: Figure 16). The second phase of the PAR (session 7-17) focused on an exchange of the children's and the team's diverse knowledge on this subject (chapter 2.8.3). The first priority of this exchange was to define how the children understood their right. I summarised each of the six groups' understanding of this right in one summary model (session 8) (Example 1: Figure 7, chapter 3.5.3.3 and Annex: Figure 13). The second priority was to reflect with each group on their summary model and the related aspects in the subsequent sessions (session 9-13). These aspects included developing health club rules that guarantee children's participation, identifying areas in which they can participate, and defining the difficulties and barriers as well as the risks and advantages of their participation. The third priority was to define concepts on how their right to participate could be realised. The children defined such concepts, especially in the 14th session, when they gave recommendations on how this right could be realised in health clubs nationwide. I considered such recommendations from the children as solutions to my PAR's social problem conceptually, but not practically (interim results: series of posters summarising children's recommendations) (Annex: Figure 14) (chapter 2.6, 3.7.1). In sessions 15-17, the children implemented some of their recommendations on the subject of SRH (Table 2). The objective was to test the realisation of such recommended actions. The experience gained helped the research team to present our suggestions to the MoPHS (interim results) and for the preliminary results. Both of these results were important data that I used for my final definition of approaches on how to realise children's participation right.

Concerning the second subject of children's desired changes in their schools or health clubs, each of the children's groups selected their changes during the first PAR phase (Example 2: Figure 8, chapter 3.5.3.3 and Annex: Table 12, see sessions 3, 4). During

the second PAR phase they defined actions which they partly implemented to realise the selected changes (Table 2 and Annex: Table 12, see sessions 9, 10). The objective of this small child-led AR was to facilitate each group in acting independently on a subject of their concern. It was during these self-initiated and independent actions that the research team experienced and observed the children's practices and skills. This information complemented the children's perspectives on their participation and their defined concepts to realise it.

3.5.2 Procedure for each research session with children

The research facilitators guided each session according to the instructions I wrote and revised with them in English (Annex: Figure 17) (chapter 3.4.1). These contained semi-structured guidelines for Focus Group Interviews (FGI), descriptions of planned PLA methods, organisational issues to clarify and specific aspects to observe. During each session the research facilitators and key persons spoke to the children using a mixture of English, Kiswahili and Kikuyu to ensure they understood what was expected of them. In each case, the research facilitators started by asking questions to recap the previous session's content. This helped, first, to focus the attention of the children on the research; second, to relate the session's content to that of the pervious one; third, to review their views on the previous session's subject, and fourth to clarify uncertainties in the previous session's results.

The research facilitators ended each session by giving the children a task to carry out in their school or community, e.g. to seek views from friends on the subject of the following week's session (Annex: Table 11). The tasks' objectives were: to enable the children to engage with others on the research subject, to contribute findings to the sessions and, thereby, enrich the findings with other people's views. The research facilitators followed the tasks up in the next session. Some children brought their findings neatly written down while others described them verbally once the research facilitators asked. In the last session we handed out prizes for a competition on children's right to participate which ran for two weeks (Annex: Figure 18 and Mahr-Slotawa 2020: Graphic 5). After this session, I displayed some of the preliminary results in every school's classroom so that all the children and teachers would know the outcomes of the field research.

The research facilitators took notes on all information obtained in each session. They wrote these notes down in English, Kiswahili or Kikuyu and later translated everything into English for each session's protocol (chapter 3.4.2). They prepared the protocols based on the standards I defined for them with the aim of obtaining six comparable

protocols (Annex: Figure 19). The protocol of every session contained textual data of detailed procedure, children's attendance, the content from FGI and PLA methods and research facilitators' remarks. The visual data included drawn illustrations of PLA methods. I took photos of each PLA method's visualisation, too. The aspects written on cards during PLA methods were reported by the research facilitators in the original language and wordings. They also translated these aspects into English, but retained the children's original phrasing, including language or grammatical anomalies.

3.5.3 Research techniques applied

During the sessions with the children the research facilitators used a combination of the three techniques, namely Focus Group Interviews, Participant Observations (PO) and PLA methods. I chose these techniques first, due to their suitability in studying children's views, as Helfferich (2011) describes for qualitative techniques. The second reason was that these methods are appropriate when working with children. Third, they support the realisation of the children's right to participate. Fourth, used together, these methods complement one another to strengthen the knowledge gained (methodological triangulation).

3.5.3.1 Focus Group Interviews

The overall technique in each session was Focus Group Interviews (FGI). I used FGI to study children's opinions and attitudes. I initially planned to use Focus Group Discussions (FGD), but our initial research experience indicated that these children preferred to answer questions rather than engage in discussions. I understood FGI in line with Patton's (2002) definition as *an interview with a small group of people on a specific topic* (p. 85). During the FGI the research facilitators steered the topics and the dynamics of children's interactions, which included ensuring that all the children in the groups contributed answers. The FGI gave the research facilitators the chance to make further inquiry and deepen the knowledge gained during the application of PLA methods. Only on a few exceptional occasions did the children discuss among themselves during PLA methods. This practice of children interacting directly with one another occurs often during FGIs and is equally a distinct feature of FGDs, which attests to the great similarities between these two research techniques (Flick 2006).

Scholars have highlighted some of the advantages of using FGI and FGD with children. First, the everyday life situation imitated by these techniques maintains the usual relationships and group interactions. Children are able to communicate in familiar groups. Second, the presence of peers alters the power balance and gives children

confidence to communicate. Third, groups enable children to interact and comment on what others say. This stimulates or reminds them to develop their accounts and weeds out false or extreme views (Flick 2006, Hill 1997, Hoppe et al. 1995, Lange et al. 2009, Maternowska et al. 2009). Some of the disadvantages of using FGI and FGD with children are: first, the dominance of certain individuals who are more outspoken than others; second, the needed flexibility of the facilitators to adjust their questions and topics to children's particular understanding and moods; third, confidentiality can easily be lost if a child tells external people what was said or discussed in the groups (Darbyshire et al. 2005, Hill 1997).

3.5.3.2 Participant observation

The research facilitators used Participant Observation (PO) with each session. I also observed the children's behaviour during the few sessions that I attended. We both observed the children before, during and after each session, which included some hours of the children's daily school life. The main focus areas for our PO were: ascertaining the nature of the children's relations to one another and to key persons, teachers and parents; their behaviour during PLA methods; their implemented actions; their feelings and the PAR process. My PO also sought to understand the nature of relations and practices between adults and children (Annex: Figure 19). Thereby, we applied the typical features of PO, as described by Jorgensen (1989). First, we observed the children in their daily lives and during the regular research sessions. Second, we had a special interest in children's interactions with adults. Third, PO complemented the data obtained via FGI and PLA methods. The research facilitators and I entered into PO, which Schensul et al. (1999) define as *the process of learning through exposure to or involvement in the day-to-day or routine activities of participants in the researcher setting* (p. 91). During this process of learning, our observations became more specific as we increasingly became aware of the most relevant interactions and practices for the research. We did not inform the participants that they were being observed, which raised ethical concerns (chapter 3.8.8.5). Studies have described advantages of using PO with children. First, it precisely and objectively captures their behaviour and actions. Second, researchers examine these behaviours and actions as they unfold over time, instead of relying on retrospective accounts. Third, children are familiar with the local contexts in which PO takes place (Dawson et al. 1993, Lange et al. 2009). The disadvantage of PO is that the researchers' presence often influences children's reactions (Flick 2006, Lange et al. 2009).

3.5.3.3 Participatory Learning and Action methods

The research facilitators used PLA methods during each session (Table 2). We used these methods to facilitate and to deepen our discussions and reflections with the children on their views and ideas. PLA methods belong to the Participatory Rural Appraisal (PRA) approach, which draws on PAR (chapter 2.8.4). The practices embodied by the PRA have most characteristics in common with AR (Greenwood et al. 2007). I understood PRA in accordance with Chamber's (1992) definition, as a participatory form of data collection in which *outsiders are convenors, catalysts and facilitators to enable people to undertake and share their own investigations and analysis* (p. 13). As such, during the PAR the research facilitators guided each method by 'handing over the stick' to the children and paying attention to learn from them. They used FGI to accompany each PLA method with a dialogue. The children usually wrote their thoughts down on cards and decided individually or in groups where to place them on the method's visualisation. We gained three information streams from each PLA method: first, the content of the FGI; second, the children's views written on cards or other materials; third, the position and relation of the cards on the visualisation. I used all three streams as textual data within the final results. I determined the specific PLA methods to be used in each session's guidelines (chapter 3.5.2). I got inspired by the literature of Burton et al. (2010), GTZ (2009), IHAA (2006), Pretty et al. (1995) and I used Chambers (1992), Nieuwenhuys (1996), Theis (1996).

My reasons for applying PLA methods were: first, my varied experience in using them with children (chapter 1); second, PLA methods are often used in a PAR design as both share similar characteristics (chapter 2.8.4); third, their flexibility and diversity allowed me to adapt them to children, the school and my subject; fourth, scholars have identified advantages of PLA methods, which I summarise as: children are active participants, who get a space to speak up, to be heard and to take part on their own terms. Power relations between adults and children change, as children get full control, are enabled to describe their reality and to define key aspects. The emphasis on visualisations enables children of different ages and literacy levels to engage in a dialogue about complex and abstract issues. They usually are able to have fun and freely move around (Darbyshire et al. 2005, Ennew et al. 2009, Greenwood et al. 2007, Hill et al. 1996, Hood et al. 1996, Kefyalew 1996, O'Kane 2000, Punch 2002). The disadvantages described in literature touch the five areas of: particular need of time, resources and trained facilitators; high expectations could be raised among participants; some children could have difficulties understanding the procedure of the

methods; information gathering is non-uniform and scientific rigour is lacking (Ennew et al. 2009, O'Kane 2000, Pretty et al. 1995) (chapter 2.8.5).

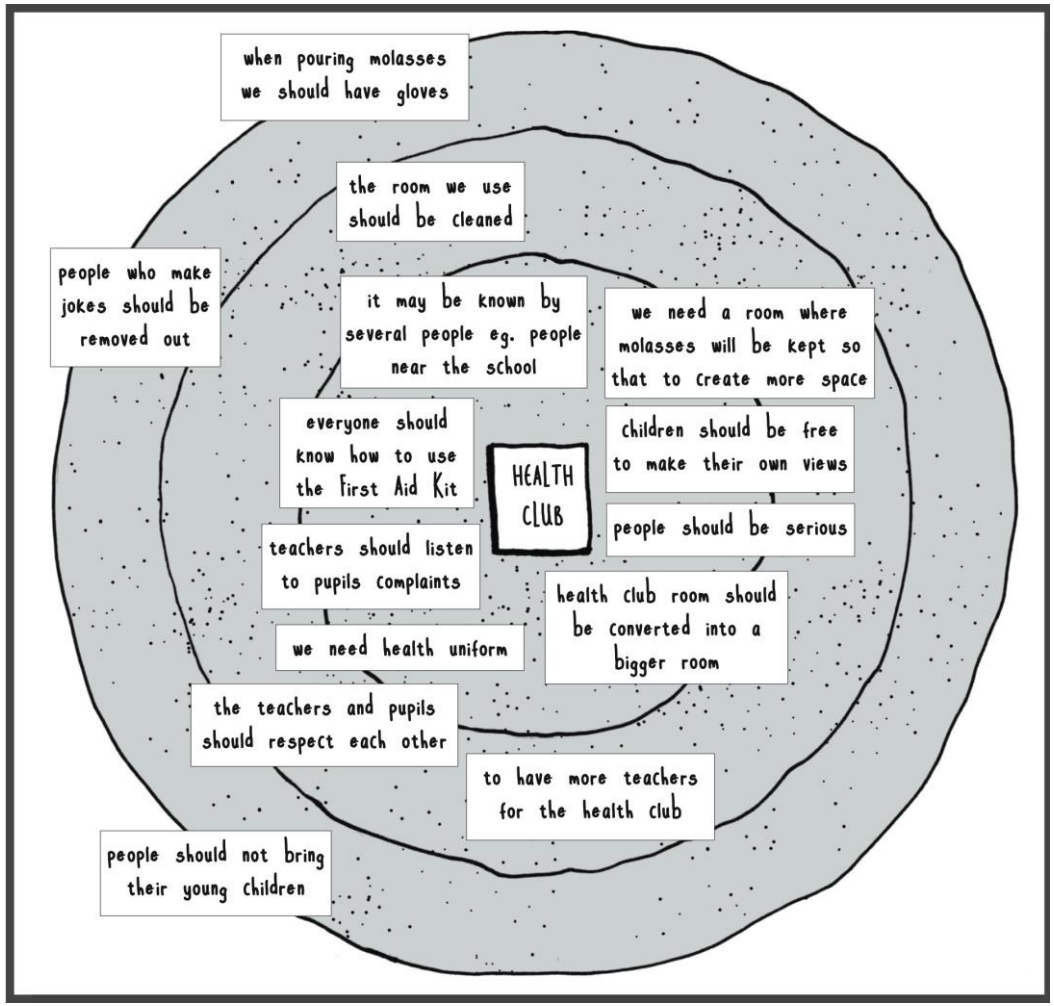
In the next section, I explain the application and visualisation of two PLA methods. Each contains crucial information on one of the two overall topics that the research sessions with children covered: children's views on their right of participation and their identified changes for their respective schools (chapter 3.5.1).

Example 1: Web Method on what needs to happen to participate in the health club

The objective of the Web Method was to identify children's views on what needs to happen so that they can participate in the health clubs in line with the provisions of Article 12.1. For this question, I adopted the subject discussed earlier of what the right to participate meant for the club, which the children did not seem to grasp. In each group, every child discussed the question with a colleague and they wrote each of their thoughts on one card. The research facilitators drew circles on the floor. In the centre of these circles, they placed a paper on which they wrote the words 'health club'. The children placed all their written cards into these different circles. They grouped together those aspects that they mentioned more than once. The distance of each aspect from the health club paper in the centre indicated the degree of importance of that aspect in realising their participation. Therefore, the aspects placed in the inner circles were more important than those in the outer circles (Figure 6 and Mahr-Slotawa 2020: Graphic 1).

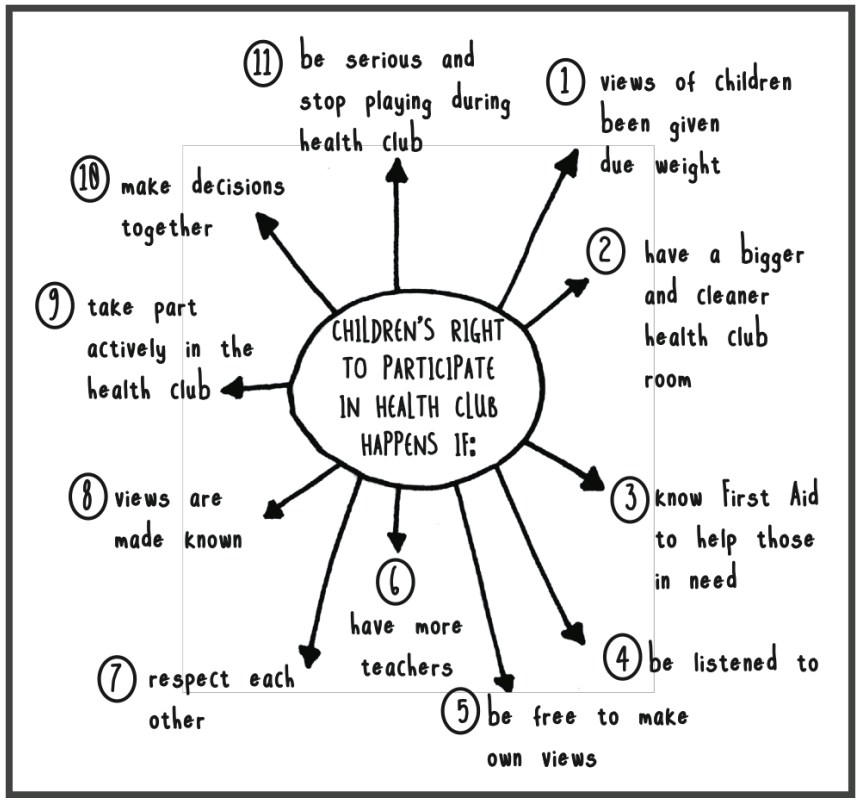
I summarised each group's results into six summary models. Each summary model showed the group's understanding of their right, which was the reason I did not want to align the six models together. I verified each summary model with the research facilitators and they proofed them with the children (Figure 7 and Annex: Figure 13) (chapter 3.7.1).

Figure 6: Web Method on what needs to happen to participate in the health club[1] (boys Gatuura, 6.11.13*)



[1] Molasses is a soap that the children use weekly to clean the floor in the room where they meet as health club.
*research facilitator's protocol of a children's session: b. G. No. 50

Figure 7: Summary model 1 on children's understanding of their right to participate in the health club (boys Gatuura*)



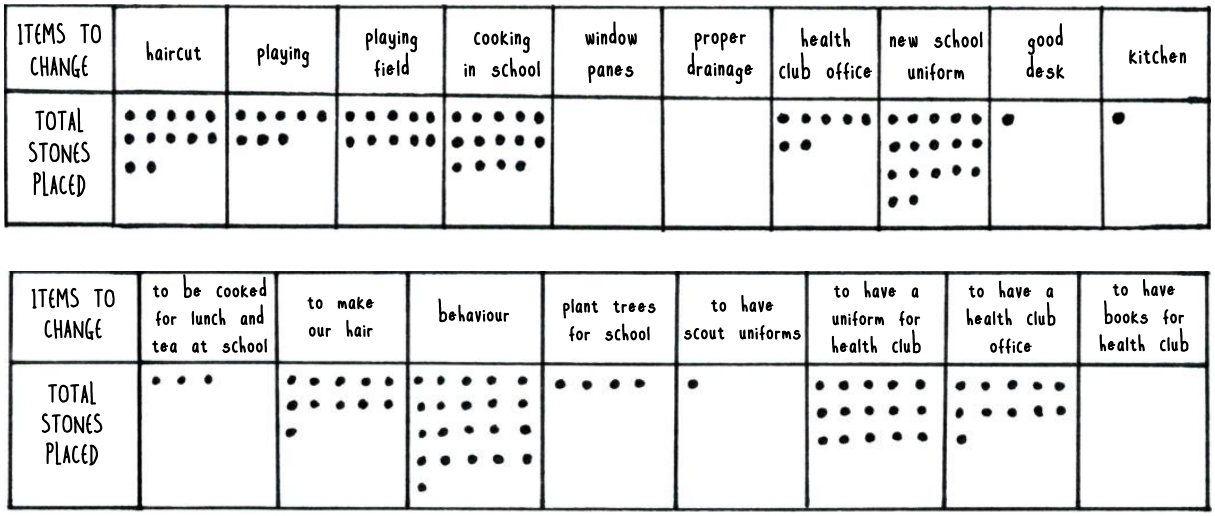
*research facilitator's protocol of a children's session: b. G. No. 50

Example 2: Preference Ranking on children's prioritised changes at their schools and health clubs

The objective of applying the Preference Ranking was to help children prioritise their desired changes in their respective schools and health clubs (Annex: Figure 21a, 21b). Out of all the changes they identified for their schools and health clubs, the research team selected those that were possible to work on during the PAR, e.g. we excluded *school to be privatised*. The research facilitators wrote each possible change on one card and placed all of them along a horizontal line on the floor. They gave each child five stones. Each child placed the stones to select what they considered to be the desired priority changes. At the end, the research facilitators counted the stones to ascertain the most prioritised change identified by the children (Figure 8).

It emerged that children mainly prioritised changes around material needs, which could not be implemented as part of the PAR. Therefore, we ultimately decided on which changes to effect (chapter 4.3.4.2). Our selection criteria were: keeping children's ranked priorities; be related to health; allow actions for children, and be achievable within the PAR's remaining 3½ months.

Figure 8: Preference Ranking on children's prioritised changes at their schools and health clubs (boys, girls Kiriri, 8.10.13*)



*research facilitators' protocols of children's sessions: b. K. No. 25, g. K. No. 22

3.6 Data collection with specific adults

The data collection during the PAR involved the following adults: two research facilitators, three key persons, the children's parents, additional teachers, and selected experts. It took place during the field research period of September 2013 to January 2014. The objective for involving these adults was to complement the data gathered on children's views. An overview of these adults is given in Table 3, which also shows the subjects covered, methods used and the application time during the PAR process. The next sections highlight much of such information further.

Table 3: Overview of PAR's field research period concerning data collection with specific adults

Group of adults	Research facilitators	Key persons	Children's parents	Additional teachers	Selected experts
Specify adults	two research facilitators (male/female)	three key persons (one in each school)	parents of children involved in PAR	teachers of schools	experts in children's right to participation*
Time during PAR	meeting weekly (during PAR)	school visits, training (during and end of PAR)	two sessions (start and end of PAR)	interviews (during PAR)	conversations (end of PAR)
Main sub-jects	follow-up, pre-pare children's sessions; dis-cuss PAR pro-cess and interim, prelim-inary results; training	views on children's right to participate, health club, child-hood and children's results; feedback on PAR; clarify organisation; training	explain PAR process; views on children's partici-pation, childhood, caning children and children's results; feedback on PAR	views on children's participa-tion, health club, child-hood and cultural aspects	inform on implementation of children's right to participate, practice of caning children; discuss children's results
Research techniques applied	Discussion, Explanation	Discussion, PO, In-terview	FGD, Explana-tion, PO, PLA-methods**	Interview	Interview
			Boxes: childhood		
Techniques applied by	myself	Interviews: myself Discussion: myself/ research facilitators	myself/research facilitators	myself	Myself

*list of experts I talked to on the subject of children's participation in Kenya see Table 10 (Annex).
**I explain the application of each PLA method and illustrate its results from our research in Mahr-Slotawa (2020).

3.6.1 Discussions with research facilitators and interviews with key persons

I held discussions with the research facilitators mainly during our weekly meetings. I used these meetings to train them, to talk about the last and previous sessions, the PAR process and my interim and preliminary results. With each key person, the research facilitators and I discussed the PAR's objective and organisation. In addition, I conducted individual interviews, which covered their views on children's right of participation, on the health club, on childhood and on cultural matters (chapter 3.4.1-3.4.3).

3.6.2 Focus Group Discussions with the children's parents

The research facilitators and I conducted introductory meetings for the children's parents in each school. The key persons and some head teachers also attended these meetings. We explained the research objective, methodology and timeframe (diary 2:44). We handed out information sheets on the PAR and requested parents to sign consent forms to permit their children's involvement in the research. They were also asked to indicate if their child would attend the holiday sessions (Annex: Figure 20a, 20b). Some parents were concerned that we did not give material compensation for taking part in the research. The key persons and head teachers helped to clarify the intangible value of taking part in the research, namely to gain knowledge and life skills (diary 2:61).

At the end of the PAR, in January 2014, we held FGDs with parents in each school. Each FGD lasted from 1:30 PM to 3 PM. The male research facilitator guided the FGD as he could converse better in Kikuyu than could the female research facilitator. He used a semi-structured interview guide, which I prepared and revised with the research facilitators. The female research facilitator wrote the protocols for the sessions. I joined each session and made observations during the FGD. The parents engaged in lively discussions, especially on the topic of caning children (diary 7:51-52) (chapter 3.8.6). Other topics were children's right to participate, parents' views on this right, on childhood, on the PAR and on the interim results that summarised children's recommendations on how to realise their right to participate within the CSHP (Annex: Figure 14). Parents' attendance differed. In Kiriri and in Makutano twelve mothers and one father, in Gatuura only three mothers attended each session. They also signed consent forms to agree on their involvement before the start of the FGD (Annex: Figure 20c).

3.6.3 Interviews with additional teachers and selected experts

I conducted individual interviews with a few teachers, who were not part of the key persons in the PAR. These were either former health club teachers or those who had assisted in organising the PAR. I sought their views on child participation, on the health club, on childhood and on some cultural aspects. I also carried out interviews between December 2013 and January 2014 with some selected experts in the subject of children's participation in Kenya (Annex: Table 10) (chapter 3.3.2). In face to face meetings or through telephone conversations, I discussed with them their contributions, experience and views on implementing children's right to participate and on the practice of caning children. My objectives in interviewing such experts were, first, to gain more insight and information on the extent of implementation of children's right to participation in Kenya (chapter 2.3.4) and second, to enable my research team and me to reflect on the feasibility and appropriateness of the approaches to the realisation of the children's right to participate as defined in the preliminary results. I also discussed some of my preliminary results with experts from the MoPHS and KAACR (chapter 3.7.1).

3.7 Data analysis

The process of data analysis entailed 15 distinct modes. It was divided into two parts. The first part comprised the data analysis during the PAR's field research in Kenya. This part involved the children, research facilitators and specific adults and was carried out from September 2013 to January 2014 (chapter 3.7.1). The second part was the data analysis after the field research. This happened when I was back in Germany. It started in February 2014 and ended in April 2017 (chapter 3.7.2) (Table 4 and Figure 3, chapter 3.1). Each of the 15 modes distinguished a specific analysis level, thematic focus, data used and the preparation of the data for final results. Table 4 gives an overview of my analysis procedure. With respect to the thematic focus, each of the 15 modes relates to one or all of the three thematic areas of: children's views on their right to participate; their defined concepts to realise this right, and the PAR process. With the analysis level, I used the case-specific level of one school only in very few of the 15 modes. Most modes focused on multi-case level analysis of all of the three schools, which was also the focus of my final analysis. I focused on the multi-case level because the data I gained from the three schools showed very few differences. What I present in my results on the case-specific level consists of the priorities, typical or unique behaviour, practice or view and quotations of children's views from one particular children's group or school. I specify the data used and the preparation for the final results for each mode within the subsequent sections.

Table 4: Overview of the data analysis procedure and data used

two parts of analysis process			data analysis during field research (in Kenya) (September 2013 to January 2014)								data analysis for final results after field research (in Germany) (February 2014 to April 2017)							
involvement of:			research facilitators with children				myself with research facilitators			myself with experts	myself (February 2014 to January 2016)					myself with research facilitator and others (April 17)		myself
modes in analysis process			1. reflect-ed on own situa-tion	2. verified six sum-mary models	3. verified series of posters	4. verifi-cation ses-sion	5. discuss-ed data after each session	6. reflect-ed pre-liminary results	7. reflected interim re-sults with parents; preliminary results with key persons	8. reflected on pre-liminary results	9a. first cod-ing ap-proach: formed codes/ catego-ries	9b. second coding ap-proach: formed 9 catego-ries	10. developed framework to guide reflection of PAR	11. struc-tured my diary notes	12. formulated final results (use A, B, C, D, E, F, G)	13. discussed research facilitator's comments on method-ology, results chapters	14. discuss-ed results with experts, students	15. final-ised results (use H, I)
analysis level	case-specific																	
	multi-case																	
thematic focus	children's view on their right to participate																	
	children's concepts to realise their right																	
	PAR process																	
data used and who prepared it (research, facilita-tors, r. f., or myself, m.)	51 protocols of children's session (r. f.)	FGI										only 12 protocols used						
		PLA																
		PO																
	6 protocols of parents (r. f.)																	
	1 protocols of key persons' training (r. f.)	.																
	1 protocol of children's verification session (r. f.)																	
	research diary (myself)																	
	memos (r. f. and myself)																	
	photos (myself)																	
	6 summary models (myself)																	
	1 series of posters (interim results (A) (m.)																	
	preliminary re-sults (B) (m.)																	
data pre-paration reached for final results								preliminary results with comments (C)			22 cate-gories and 227 codes (703 memos) (D)	9 catego-ries (Puzzle model 1) (E)	1 frame-work for reflection of PAR (Puzzle model 2) (F)	8 struct-ured diary book-lets (G)		com-mented methodol-ogy, results chapters (H)	com-ments on results (I)	

3.7.1 Data analysis during the field research period in Kenya

In the PAR design, data analysis usually takes place during field research (Herr et al. 2005). During the PAR the research facilitators analysed some data with the children using four different approaches (Table 4: mode 1-4). First, they guided them to reflect on their own situation when applying PLA methods in each session (mode 1) (chapter 3.5.3.3) (case-specific level). Second, with each children's group, the research facilitators verified the six summary models that I prepared to summarise their understanding of the right (Example 1: Figure 7, chapter 3.5.3.3 and Annex: Figure 13). They translated each summary model with the respective group into Kiswahili and made some content adjustments (mode 2) (case-specific level). Third, the research facilitators verified with each group of children the series of posters that I prepared to condense their recommendations on how to realise their right (interim results) (Annex: Figure 14). It entailed clarifying and adapting some actions (mode 3) (multi-case level). Fourth, we organised a verification session with the children with reference to a Big Conversation Meeting that Cook et al. (2011) describe. Our session took place at the end of the PAR (17th January 2014) with two girls and two boys from each group (total of 12 children). The children decided on who would attend this session. Its objective was to verify some results and to clarify uncertainties I had identified in my preliminary results. The topics discussed were: child participation and agency, insulting one another, being caned by adults, the interim results and 14 categories on children's views on their right, which I formed as part of my preliminary results (mode 4) (multi-case level). The male research facilitator guided the meeting with the help of a semi-structured interview guide. I prepared and revised the interview guide with the research facilitators. The female research facilitator took notes for the session's protocol (chapter 3.5.2).

During the PAR I analysed some data with the research facilitators using two distinct approaches (Table 4: mode 5-6). First, we discussed the research facilitators' protocols during our weekly meetings (chapter 3.4.1). There were, in total, 51 protocols from children's sessions and the six from parents' sessions, one from key person's training and one from children's verification session. We also reflected on my diary notes, the six summary models and my series of posters (interim results) (Annex: Figure 14). We wrote and followed up memos. The contents of these memos were: research facilitators' explanations, our reflections and questions to further guide the discussions with children, parents or key persons (mode 5) (case-specific/multi-case level). Second, I reflected jointly with the research facilitators on my preliminary results (mode 6)

(case-specific/multi-case level). The research facilitators and I reflected with the parents on the interim results. We also reflected on some cultural aspects of my preliminary results and with the key persons during their training (chapter 3.4.3.1, 3.6.2) (mode 7) (multi-case level). I further reflected on the preliminary results with the District Education Officer and experts from the MoPHS and KAACR (multi-case level) (Table 4: mode 8). All of these reflections of my preliminary results contributed to preparing the data for the final results (Table 4: data preparation C). The preliminary results consisted of codes that I formed out of the protocols on children's sessions 1-14 using the software MAXQDA (VERBI Software 2014), my diary notes and the series of posters (data preparation B). I consider and refer to the series of posters as interim results (data preparation A) (chapter 3.5.1). The objective of my preliminary analysis was to prepare myself for discussions of the results with the children and specific adults during field research.

This analysis procedure during the PAR incorporated features of the Grounded Theory (GT) (Strauss et al. 1998). According to the GT, data analysis also starts during the field research and is accompanied by the preparation of memos.

3.7.2 Data analysis by myself in Germany after the field research period

Back in Germany, I continued the data analysis without the children and research facilitators in a non-participatory way. It took me about two years to prepare the final results (February 2014 to January 2016). This preparation involved five modes of the data analysis process. In four of these modes, I prepared the data for the final analysis, and in one of them, I formulated the final results (Table 4: mode 9a-11 and 12). For data preparation, I used two approaches to code the content of the protocols. Based on a first approach, I presented some initial results (Table 4: data preparation D). This turned out to be too descriptive and less reflective. Consequently, I decided to start a second approach of coding and to develop a framework to guide my reflections on the PAR (chapter 3.7.2.1, 3.7.2.2). I also structured my diary notes (chapter 3.7.2.3) (data preparation D, E, F, G). I worked out the final results based on these four types of prepared data. The lengthy process of data analysis enabled me to gain the necessary distance to the field and to finally present the data in a more abstract manner (chapter 3.7.2.3, 4.3). I finalised the formulation of the results in April 2017 after discussing them with the specific adults (chapter 3.7.2.4).

3.7.2.1 Coding of protocol content

I used two approaches to code the content of the research facilitators' protocols (Table 4: mode 9a, 9b). In the first approach, I coded the content of all protocols using the

software MAXQDA (VERBI Software 2014) (mode 9a). I did this from February to April 2014. I drew on experiences from my preliminary results, which included the coding that I had started during the field research (data preparation B, C) (chapter 3.7.1). At this point, my objective for coding was to reduce and to structure the data material. I developed this system of categories and codes mainly out of the textual content of a total of 59 protocols. The textual data included the results obtained from the PLA methods' visualisations. My coding resulted in 22 categories and 227 codes (Annex: Table 13). The categories concerned the two overriding subjects of the final results: children's, parents' and teachers' views on children's right to participate (grey boxes in chapter 4.2, 4.3) and reflections of the PAR (chapter 4.3). The subject of children's views included my results on children's defined concepts to realise this right (interim results: series of posters summarising children's recommendations) (chapter 2.6.2, 3.7.1). During coding, I wrote a total of 703 memos. I copied all my memos which I had written into the protocols during my weekly discussions with the research facilitators and I added new memos on my conclusions or questions appearing during this first coding (Table 4: data preparation D). The structure of categories and codes gained enabled me to easily use the relevant protocol content to formulate the final results, in combination with the prepared data on the three other modes (mode 9b-11) (multi-case). I also presented some initial results based solely on the first coding approach, which turned out to be too descriptive (chapter 3.7.2).
In this data analysis procedure, I followed Mayring's (2000) content analysis. Unlike his original procedure, I formed my categories and codes mainly out of my data (inductive). I used the protocols' content and the sessions' guidelines. I formulated very few categories out of the theory on child's participation rights (deductive), which was Mayring's original procedure for developing categories.

During the second approach to coding, I formulated nine categories (mode 9b). I grouped the data on children's views under two subjects, by hand, on an A3 size paper (inductive). This data was included in 12 of the research facilitators' protocols. The first subject concerned, 'what needs to happen to realise their right to participate'. This subject comprised the content I had summarised into the six summary models during the PAR (Figure 7, chapter 3.5.3.3 and Annex: Figure 13) (Table 2: sessions 7-8, chapter 3.5). The second subject examined, 'actions they recommended to realise this right nationwide'. I considered these recommendations as the children's defined concepts to realise their right and I had summarised them in a series of posters at the end of the PAR (interim results: Annex: Figure 14) (data preparation A) (Table 2: session 14, chapter 3.5). I conducted this second approach of coding in July 2014. My

objective was to present the results on the children's views along the distinct subjects that they talked about while discussing their right. The subjects comprised the following nine categories as the outcome of my coding: giving their views, working together, taking part actively and helping others, being listened to, exhibiting good behaviours, having good relationships with teachers, organisational aspects and material needs (data preparation E). I present my results structured into these 9 categories of children's views (Puzzle model 1: Figure 10, chapter 4.2). The results that I present include all the data I gained from the children's views (data preparation D). This data takes in the children's views on the two subjects from which I formed the 9 categories and on all other subjects discussed with the children during sessions 7-14 (Table 2, chapter 3.5), e.g. advantages of participation (chapter 3.7.3.1). I formed the nine categories and presented the final results only on the multi-case level, as the results from the three schools were very similar (chapter 3.7).

This second approach to coding entailed components that Mayring (2002) describes as the specific structuring content analysis. Thus, I filtered out of my data the specific structure of the nine categories. For the presentation of the results, I assigned the text passages of children's views to these nine categories (chapter 4.2). I could easily identify these text passages based on the categories and code system that I had prepared in the first approach to coding (data preparation D).

3.7.2.2 Developing a framework to reflect the PAR

In a period of two months, from August to September 2014, I developed a framework to guide my reflections on the PAR (Table 4: mode 10). This framework guided me as I reflected on the PAR and subsequently elaborated the final results of realising children's right to participation according to AR principles (chapter 4.3). Developing this framework was an essential part of abstracting my research findings.

I prepared it on a large table of seven A3 sized pages through a five-step process: First, I summarised AR characteristics, which I adapted from the words of two references by Herr et al. (2005) and Greenwood et al. (2007) (deductive) (chapter 2.8.3). Second, I grouped all these summarised AR characteristics by hand into 10 AR principles. For the formulation of these principles, I drew inspiration from Percy-Smith (2014a), who has used AR standards to reconceptualise children's right to participate (chapter 2.7.1), and by Hart R. (2008) who has set some propositions for realising this right in an African and Asian context (deductive) (chapter 2.7.5). Third, I began to work out a table. Out of the 10 AR principles, I formulated 9 components describing what the realisation of children's participation right entails. To each of the 9 components I

added the following: AR characteristics (from step 2); additional explanations on each characteristic, and the nine categories on children's views gained by my second approach of coding (Table 4: mode 9b, data preparation E) (chapter 3.7.2.1) (deductive). Fourth, I complemented the table with specific PAR features compared to the AR characteristics, as described by Greenwood et al. (2007) (deductive). I also described each PAR feature along with our research set-up and experience. Fifth, for each AR/PAR characteristic, I defined the exact subjects upon which to reflect our PAR. The definition derived from my experience during the PAR, the above-mentioned references on AR and other literature I used on specific theoretical principles (chapter 2.7.2-2.7.7) (inductive/deductive) (Table 4: data preparation F). During my reflections on the PAR, I reduced the nine components to six (Puzzle model 2: Figure 11, chapter 4.3). These reflections, presented as results, mainly concerned the multi-case and rarely the case-specific level of three schools (chapter 4.3).

3.7.2.3 Structuring diary notes and formulating the final results

I took two weeks, in July 2015 to organise the diary notes that I had taken down throughout the field research (Table 4: mode 11). The objective was to make those notes usable in the data analysis. I started by arranging the notes by numbering the pages of each of the eight diary booklets. I arrived at approximately sixty pages. I applied two complementary methods to structure the notes in each booklet. First, I underlined all relevant notes in each booklet. I used 'Post-its' in four different colours to assign each note to the respective chapter, e.g. methodology, results (deductive). Second, I wrote four lists that contained all of the relevant diary notes for one chapter. The lists included a short summary of each note and the diary page (deductive) (Table 4: data preparation G). In writing each chapter I used my notes based on the eight structured diary booklets, e.g. diary 4:32 (4th booklet, page 32). My notes were mainly concerned with the multi-case level and seldom the case-specific level.

I used all the prepared data to formulate the final results (February 2014 to January 2016) (Table 4: mode 12). I began by using the prepared data of the first and second coding approach (data preparation D, E). These data included the interim and preliminary results and the comments made on these results by the adults and children (A, B, C). Second, I added my reflections on the PAR to these results using the framework I developed (F). Third, I complemented these results with my diary notes, based on the structure I prepared (G).

3.7.2.4 Discussion of the final results with research facilitator and others

I discussed my final research results with the female research facilitator, who was in Kenya. I sent her the final chapters of the methodology and results via e-mail in January 2017. She made comments on the chapters, which I discussed with her via Skype (Table 4: mode 13, data preparation H). In the same way, I talked about my results with the expert from KAACR. In addition, I discussed my results with two different groups of fellow PhD students and a group of personal friends (mode 14, data preparation I). The discussions challenged my thinking and helped reduce the biases of my 'critical subjectivity' (chapter 3.8.3, 5.1). Having taken into account all the comments received (H, I), I finalised the formulation of the results in April 2017 (mode 15).

3.7.2.5 Justification of external validity of final results

I propose a possible generalisation of my results' approaches to the realisation of children's right to participation (external validity) (chapter 5.6). Before presenting my results, I highlight briefly how I achieved this judgement for generalisability: first, on the conformity of my results with those of other and existing theories referring to contexts beyond Kenya and, second, on my reflections of specific contextual features in my research setting. These contextual features comprised three similarities and differences of my research sample that unfolded during my data analysis: children, school and research area (Annex: Table 8). Such reflections are recommended by both Greenwood et al. (2007), for generalising AR results, and Lincoln et al.'s (1985) notion of transferability. Therefore, I generalised my results from the specific context of Ndeiya region in Kenya to other settings in which they may be applied (chapter 5.6).

3.7.3 Clarifications for final presentation of the results

After describing the process I used for data analysis, I give some clarifications on the presentation of the final results I obtained (chapter 4). The clarifications concern the structure of the results in four parts as well as the structure of each of these parts. I clarify the approaches I used to obtain the results presented in each part, their particularities and the coherences in the results of the last three parts.

3.7.3.1 Structure of the presentation of results in four parts

The first of the four parts of my final results (chapter 4.1) elaborates my modified Cogenerative AR model (Greenwood et al. 2007). The modifications aimed to enrich the practice of AR with children. They concern the overall AR practice, although they are an outcome of my reflections on the PAR after the field research. PAR is still part of the AR family (chapter 2.8.1, 2.8.4).

In the second part of the results (chapter 4.2), I present only the children's views on their right to participate. Grey boxes in this second part indicate that I am presenting my results on the children's views. I start the presentation with a puzzle model of nine categories. I created this puzzle model to illustrate an overview of the children's views (Puzzle model 1: Figure 10, chapter 4.2). I structure my presentation of their views along these nine categories (subchapters). I formed the categories through my second coding approach. For this coding, I used my results on children's views on the subjects of their understanding of their right to participation and the concepts they defined to realise this right (inductive) (chapter 3.7.2.1). I complemented each of the nine categories with results on the children's views on other subjects. Such subjects comprised children's views obtained after the research facilitators' explanations of their right in accordance with Article 12.1 (session: 7-14 during 2. phase of PAR: Table 2, chapter 3.5.1). In my results, I combine the views of all six children's groups since they were very similar (chapter 3.7.2.1). The research facilitators obtained the data on the children's views by applying FGI combined with various PLA methods (chapter 3.5.3.3), e.g. Four Corners (Mahr-Slotawa 2020), Brainstorming (Mahr-Slotawa 2020: Graphic 6), Web Method (Figure 6), Barometer 1 and 2 (Mahr-Slotawa 2020: Graphic 8), Problem Tree 2 (Mahr-Slotawa 2020: Graphics 15, 16), Puppet Play (Mahr-Slotawa 2020) (Annex: Table 12).

In the third part of the results (chapter 4.3), I present my reflections on the PAR. This part elaborates the realisation of the children's right to participate according to AR principles. I based my reflections on the structure and subjects of the framework that I developed (chapter 3.7.2.2). The structure defined six components and their attributed AR characteristics (chapter 3.7.2.2: step 3 in the framework development). The subjects on which I reflected were defined by the overall AR characteristics (chapter 2.8.3, 2.8.4) and some supporting theoretical principles (chapter 2.7.2-2.7.7) (step 5 in the framework development). I start the presentation of my reflections with a second puzzle model (Puzzle model 2: Figure 11, chapter 4.3). I created it to illustrate, with the help of the six components, my overall conclusion to understand the realisation of children's participation right in accordance with AR principles. Apart from field experiences during the PAR, I inferred this conclusion to draw on AR principles during my second coding approach. This approach abstracted my findings on the children's views on subjects related to their understanding of their right and their concepts to realise this right (Puzzle model 1: Figure 10, chapter 4.2) (chapter 3.7.2.1). The same colours depicted in the two puzzle models illustrate this deduction (Puzzle model 1 and 2). My reflections on the PAR refer primarily to the research facilitators' work since they

interacted with the children (chapter 3.4.2). In some cases, I include reflections on key persons' behaviour, although most of them were not involved constantly (chapter 3.8.4). I reflect very little on my role because I did not work directly with the children (chapter 3.4.1).

I combine my reflections in this third part of the results with the children's views from all of the sessions (session 1-17: Table 2, chapter 3.5.1) and with the perspectives of parents, key persons and other teachers (chapters 3.6). In this third part, grey boxes indicate that I describe my results on the children's views, in combination with those on parents', key persons' and other teachers' perspectives and include references to each of the nine sub-sections describing the children's views in the second part of the presentation of my results (chapter 4.2). At the end of each grey box, I indicate the specific PLA methods that the research facilitators applied. With my reflections, I referred to AR as the overall family of a wide array of approaches, of which PAR is one (chapter 2.8.4). I started each chapter by briefly describing the AR characteristic upon which I would be reflecting. The aim of this description was to reinforce the reflections and to show the AR characteristic from which I derived my reflections and conclusions. The AR characteristics indicate specific behaviour, practices and organisational changes that my results show to facilitate the realisation of the children's right.

In the fourth part of my results (chapter 4.4), I elaborate a summary of all AR characteristics in the form of a final puzzle model (Puzzle model 3: Figure 12, chapter 4.4). This final puzzle model generalises my findings on the realisation of children's right of participation according to AR principles. It consolidates my results' contributions to the theory on the children's right to participate. Before presenting my results, the next section reflects on my research design.

3.8 Reflections on and challenges of the research design

In this section, I reflect on the challenges of the research design I used. I also highlight some of the strengths of the design. Back in Germany, I did make these reflections on my own although I had discussed some of the challenges with the research facilitators during the PAR in Kenya. My reflections on the challenges and ethical concerns of the PAR design form a crucial background for my results on reflecting the research team's behaviour, practices and organisational aspects of the PAR (chapter 4.3). Therefore, before presenting my research results, I now present my reflections on the challenges of using my PAR design and ethical concerns.

First, I identify challenges with the PAR process. I start by assessing its six quality criteria. I then proceed to identify challenges with the research sample, my role as lead researcher, the role of the key persons, the research facilitators during data collection with the children and with adults, and of data analysis. Second, I reflect on the ethical challenges of the PAR. My discussion complements such reflections, especially concerning the overall biases of my PAR design and its validity (chapter 5.1).

3.8.1 Assessing the quality criteria of the PAR

I evaluated the quality of the PAR based on the six criteria I defined prior to conducting the field research (Table 1, chapter 3.2.1). We complied, to a large extent, with the first criterion of a participatory procedure (participatory validity): we reached the participation level of 'co-learning' as envisioned for the PAR process, although we did not fully reach the level of 'partial delegation of decision-making' (Cornwall 2008, Wright et al. 2010) (chapter 3.2.1). I base my conclusion on the participation levels attained on the fact that we involved children in certain aspects of the PAR, e.g. organisation and data analysis. Nevertheless, they had no role in decision-making in other aspects, e.g. PAR initiation, research sample and final analysis. Involving them in these latter parts of the PAR could have elicited a higher level of participation (chapter 3.8.7, 4.3.1.3). Despite these two desired participation levels, the children participated to a higher extent when the research facilitators gave them total control of actions or 'decision-making authority', e.g. PLA methods (chapter 3.5.3.3), their tasks in the family or community (chapter 3.5.2), their small AR (chapter 3.5.1, 4.3.4.3), and defining actions on how to realise the children's right in the CSHP nationwide (interim results) (chapter 4.3.2.2, 4.3.4.1).

We complied with the second criterion of knowledge being co-created in a dialogue (chapter 4.3.1.2) (dialogic validity). We partly achieved the third criterion of being educative and developmental (catalytic validity). We and the children learned from one another on the subject of child participation. Some children did yet not understand the advantages that would accrue to them upon its realisation (chapter 4.3.1.2, 4.3.3.3). We complied rudimentarily with the fourth criterion of supporting transformative changes (outcome validity). The changes we attained included: children and teachers became interested and keen to realise the children's right to participation (chapter 4.3.1.2, 4.3.3.3); children were equipped with skills and knowledge to exercise the right (chapter 4.3.3.3); they began to express their views towards adults freely (chapter 4.3.2.1); there were changes in behaviour, e.g. some children increasingly wanted to carry out their daily tasks (chapter 4.3.3.3); some children took over control of self-initiated actions (chapter 4.3.5.3); children claimed greater involvement in school-

related decisions (chapter 4.3.1.2), and Kiriri School's key person increasingly worked in partnership with children (chapter 3.8.4, 4.3.6.2). Therefore, it is most likely that, in Kiriri School's health club, these changes lasted beyond the PAR. We fulfilled the fifth criterion of contextual validity as we situated the PAR in the setting of the schools' health club.

We complied partially with my sixth criterion of process validity as we applied a series of reflective cycles with the children during the PAR. These cycles concerned the children's views and enhanced understanding of their right to participate. In addition, included the criterion of process validity the evidence of the PAR's ability to sustain children and adults' assertions. I assessed this evidence using the two classic principles of triangulation and communicative validity. Concerning triangulation, we used different techniques to expand the children's views, discussed the same subjects with the children's parents and I used two approaches to code the findings on the children's views, both of which led to similar categories (chapter 3.7.2.1). Concerning communicative validity, the research facilitators verified the results of the previous sessions with the children in each subsequent session and my preliminary results in the verification session. I verified my final results with the female research facilitators, but not with the children. The validity of the results and the quality of PAR could have been increased by involving the children in the final data analysis. Unfortunately, the field research period of 4½ months was too short to allow this kind of involvement, and I was also unable to fly back to Kenya in 2016 to discuss the final results with the children.

3.8.2 Challenges of the research sample

The PAR design often seeks to engage the local people from the beginning of the research (von Unger 2012) (chapter 2.8.4). The children in my PAR were, however, not involved in the sampling of the 15 schools. I undertook this responsibility with the support of the GIZ, StC and the MoPHS (chapter 3.3.1). The children also did not decide who among them should join the research group in each of the 3 schools sampled. Instead, my research team and I identified the children who would partake in the PAR. The logic behind this non-participatory sampling was that the PAR was not initiated by the children. I initiated the PAR as an outsider. Moreover, the field research period was too short to facilitate a participatory sample selection. As such, the children were not involved in decisions on the sample selection, which demonstrates the unmet participation level of 'partial delegation of decision-making' in my PAR (chapter 3.8.1). Concerning the process of selecting the 3 schools out of the 15, we discovered the first challenge that the schools could not be chosen based on specific differentiating

characters, but only based on geographic criteria (chapter 3.3.1). With the unfolding results, distinct features at each school became known, which were important findings to gauge the generalisability of my results (Annex: Table 8) (chapter 5.6).
A second challenge was that all the 15 schools had identified hygiene and nutrition as priority subjects for the CSHP. SRH was, therefore, not a priority subject in the 3 selected schools, which my initial research design had defined as a selection criterion (chapter 3.3.1). During my research organisation in Kenya, I decided to focus my data collection on children's right to participate and to test some of my results regarding approaches to realise children's participation on the subject of SRH (chapter 3.2.3, 4.4).

On the sample selection of each of the three research groups of 12 boys and 12 girls, the first challenge was that we had no prior knowledge on their economic status or school performance. The findings could not delineate children's views based on these factors. To increase the economic variance in the research sample, I used the indirect selection criterion informed by my impression of the children's outward appearance as an indicator for their economic status (chapter 3.3.2). I was aware that such a criterion could respond in hostility. Nonetheless, I used the method since I had no other means of trying to guaranteeing an economic variance in my sample. Another, major challenge was the allegation by some children that they had been caned by their key persons (diary 3:24, 4:18) (chapter 3.8.8.4). This raised the ethical concern over whether or not all the children in the sample had voluntarily chosen to take part in the research (chapter 3.3.2). I reflect on this matter further in my results and discussion (chapter 4.3.6.3, 5.1). A third challenge was the variance experienced in children's attendance. During the first research sessions, the number of children partaking varied constantly, especially in Kiriri where additional children joined the selected groups (diary 3:11). To mitigate this problem, we decided with the key persons first to only work with the selected 12 children. When they were asked to leave, these additional children were adamant about staying and, as such, we decided to include them in the groups (diary 3:18). During school holidays, children's attendance decreased by an average of 7 in Kiriri and in Makutano and of 3 in Gatuura. We decided to motivate the children to attend the holiday sessions by issuing t-shirts[4] to those who attended three of the four sessions; we also gave out biscuits after every holiday session (diary 4:55). These were the only incentives that the children were given during the PAR. In

[4] The research team decided that the t-shirts' logo should identify the children as health club members and show the meaning of their right of participation (Art. 12.1). On the front of the t-shirt the children wanted to write '*as health club members we save the school health*' and on its back a triangle, in the middle '*child participation'* and on its three corners '*be heard, giving opinion, be taken seriously'.*

Gatuura, we also informed the parents and reminded the children of the holiday meetings (diary 4:49). One major reason for the decreased attendance during holidays was that families used the time to travel (b. G. No. 60; diary 7:19). Some of the children said they forgot about the sessions as they got used to the rhythm of not going to school. After the holidays, the initial targeted attendance of 12 children slightly diminished in nearly all the schools (Annex: Table 9). Possibly some children had lost interest in the research, specifically those who did not attend the holiday sessions. We treated the data from each session equally without differentiating due to the variance in attendance. We noticed that this did not influence the results from every group, especially as the data obtained from all the six groups was generally similar (chapter 3.7).

3.8.3 Challenges of my role as lead researcher

My position as a German student and a foreigner who had initiated, guided and managed the research process was a challenge to the PAR and its results. It raised concerns over my 'cultural superiority' or otherness and, thus, brought the biases of 'critical subjectivity' to the research results (Reason 1994) (chapter 3.7.2.4). I reflect this challenge as ethical concern and in my discussion (chapter 3.8.8.3, 5.1). Another challenge was my position's influence on the behaviours of the research facilitators, key persons and children. I observed that some key persons seemed keen to paint a good image of their schools whenever I visited them (chapter 4.3.6.3, 5.1). My initial relationship with the research facilitators determined my authority, but it became more driven by mutual cooperation (chapter 3.4.1). The research facilitators and I assumed no considerable influence of my role and authority on children's opinions (diary 7:23).

3.8.4 Challenges of key persons' role during PAR

The involvement of the three key persons was necessary to ensure there would be continued realisation of children's participation right even after the PAR (chapter 3.4.3). The key persons shared in this vision as they intimated during training, although they barely showed any initiative during the PAR. The exception was the key person in Kiriri, who exhibited most of the ideal qualities of a key person as I laid out in my criteria (b. K. No. 43) (chapter 3.4.3). This particular key person took up and owned the research and became increasingly engaged in a bid to realise children's participation (diary 4:56, 5:17/58). He expressed his ownership by responding *I was more involved* to my question on whether the key persons felt they formed part of the PAR (t. train. No. 103). The key person in Gatuura, instead, seemed to support the PAR more out of a sense of duty than a willing responsibility, although her substitute for the holiday sessions was very engaged (diary 5:46, 6:5; g. G. No. 73). In Makutano, the key person

appeared committed, but he was also not very engaged (diary 4:1) (chapter 3.4.3). As explanations for the varied levels of engagement among the three key persons, the research facilitators gave differences in personalities (diary 8:11). They noted that a longer research period could have increased the key persons' engagement.

I noted after the field research that, as the research team, we should have put in place measures to ensure that all the three key persons felt involved and part of the PAR process. First, I should have insisted that each key person contributed ideas to prepare the children's sessions. This was difficult as the key persons had lessons prior to the sessions (diary 3:10, 4:2; Memo 710 in t. train. No. 103). Second, we should have conducted the key persons' training at the beginning of the PAR; the research facilitators made this suggestion, too (diary 8:11). The key person in Makutano also said that *it would have been best if we were first trained and that is why we felt as if left aside* (t. train. No. 103; diary 7:33). Third, we should have further clarified the key persons' roles, including those of parents who acted as key persons (diary 3:31). The parents helped with translation between English and Kikuyu languages, but taking notes was a challenging task for them (diary 3:25). Fourth, we should not have asked the key persons in Gatuura and Makutano to exit from the first children's sessions. This was done because the research facilitators noticed that the children were intimidated by the key persons' presence. They attributed this intimidation to the fact that, in Makuntano, the key person was a senior teacher and caned some children and that, in Gatuura, the key person was new as a club teacher (diary 3:16/19/50, 5:5/24/44/58; g. G. No. 86). It was observed that following their exclusion in the first sessions, both of the key persons rarely fully attended the subsequent sessions.

3.8.5 Challenges of research facilitators during data collection with children

One challenge to the results of the PAR seemed to stem from the fact that the two research facilitators employed different working approaches with the children. The approach adopted by the male research facilitator was informal: the children sat on branches in a circle around him (diary 3:48). I often heard the boys laughing and had the impression they enjoyed the sessions (diary 5:20). The approach taken by the female research facilitator was more formal: she used a class-like set-up in which she often stood in front of the children (diary 3:49, 5:42). She explained that she had consulted the girls on how they should organise their seating and the learners had suggested the class-like format (diary 8:45). The perceptions of the research facilitators on how the children viewed their roles were in line with their different working approaches. The male told me the children regarded him as a friend and the female

said they saw her as an older aunt (diary 7:23/55). However, I noticed during the analysis that their distinctive working approaches did not considerably influence the research data. Nevertheless, the results indicated that the more informal approach supported an open and more equal relationship between the male research facilitator and the children. On the other hand, the formal approach often created a more concentrated working atmosphere.

The two research facilitators reported that they experienced various challenges during data collection with the children. First, throughout the entire PAR the research facilitators struggled to translate the notion of children's participation right adequately and clearly (diary 4:5; Memo 18 in par. G. No. 5). They used the words *Kuhusika* (Kiswahili) and *Kuhuthika* (Kikuyu) which means to take part, to join and to be part of. They stressed the idea of taking part, in regard to the children, in decision-making and of being heard (diary 2:60, 4:17/34). Important to note is that children in Kenya are usually schooled in English, a second language to their mother-tongue. Another challenge had to do with children's inattentiveness, especially in large groups, such as the girls in Kiriri. To resolve this problem, the research facilitators said they constantly had to remind the children of their voluntary involvement and asked them for feedback on whether or not they enjoyed the sessions (g. K. No. 46, g. K. No. 52). The group dynamics of the holiday sessions described the research facilitators as more productive (diary 6:11-12, 8:14; Memo 260 in g. K. No. 67). They explained that only the engaged children took part during the holiday (diary 4:42, 5:21/24, 7:56) (chapter 4.3.3.3).

The research facilitators reported specific challenges from the use of FGI, PLA methods and PO. During FGI they faced three challenges. The first one had to do with ensuring that all the children made contributions as some were more outspoken than others. They directly asked those who were younger (less than 10 years of age) for their views (diary 3:7, 4:41; g. K. No. 16). The second challenge was ensuring that they did not ask too many rebuttal questions on children's views, as this would make the children feel they said something wrong and fear to express their views in the future (diary 4:61, 6:17). Third, the girls in Kiriri had the habit of patting their colleagues on the shoulder or back when they gave the wrong answers. It was encouraging that the children had learned to commend one another's statements. However, the issue raised my concern. The research facilitators explained that this was expected as children were used to being punished by teachers for wrongdoing (diary 7:26-27). We decided not to address children's habit of patting their colleagues during our short research

period. Despite the challenges faced, I noted that the FGI gave most children increasing confidence to express their views.

During the application of PLA methods, the research facilitators faced two main challenges: first, the children did not understand some methods. To resolve this, we modified these and applied them again in the next session, e.g. Web Method (diary 5:45) (Example 1: Figure 6, chapter 3.5.3.3, 4.3.6.1). Second, the emergence of contradictory results was a challenge. To mitigate this, we repeated these few methods in the next session, e.g. Paper Slip (diary 7:29) (Mahr-Slotawa 2020: Graphic 11). One of the major possible causes for these two challenges was the research facilitators' difficulties in making the questions for the methods sufficiently clear to the children (g. K. No. 40, b. K. No. 70). The research facilitators admitted that they could not entirely communicate in fluent Kikuyu. As such, they constantly punctuated the Kikuyu language words and phrases with those of Kiswahili and English, occasionally causing greater confusion for some children (diary 3:21) (chapter 3.5.2). An additional challenge was that, due to the flexible nature of the PLA methods, the two research facilitators applied some aspects of the methods slightly differently from one another, e.g. during the Web Method (Example 1: Figure 6, chapter 3.5.3.3) the boys placed their cards, but the girls instructed the female research facilitator (g. M. No. 48, b. M. No. 51; diary 4:32). These differences did not noticeably influence the research data. I attributed them to the varied working approaches adapted, ways of drawing children's attention and understanding of the methods by the research facilitators. Apart from such challenges, we benefited from the following advantages of PLA methods: their movements helped to sustain the interest of most children in every session (diary 2:55, 4:33), the children had great fun, e.g. Preference Ranking (Example 2: Figure 8, chapter 3.5.3.3) (diary 3:9/31/48/52, 5:41, 6:3), and they encouraged dialogue, during which the children showcased their abilities to analyse their own situations (diary 3:26, 5:43) (chapter 3.5.3.3). During PO, the main challenge was that our presence as the research team influenced the participants' behaviour, e.g. teachers' practice of caning children (diary 4:19, 7:24) (chapter 4.3.6.3). The technique was still helpful for us to complement the data obtained on children's practices.

3.8.6 Challenges of research facilitators during data collection with adults

The research facilitators reported on two challenges during the FGDs with parents. First, the three attending mothers in Gatuura School seemed disinterested in the PAR (diary 7:49). It took the effort of the male research facilitator to encourage these parents to open up compared to those in Kiriri and Makutano Schools. Many more parents took

part in these two schools and they showed great zest in discussing and debating on important issues, such as child participation and caning of children (diary 7:47/51-52). Second, the research facilitators in all three groups also faced the challenge of breaking down the notion of children's right to participation (diary 2:57/60). The key persons and some of the head teachers assisted in explaining the idea to the parents (diary 2:54).

3.8.7 Challenges of the data analysis process

One challenge of the PAR was that only one part of the data analysis process was participatory (chapter 3.7.1, 3.8.1). One reason for this partly participatory analysis was my inability to set up a steering committee, which was mainly due to the short research period of 4½ months. In my original PAR design, I had envisioned a more participatory data analysis process in which I would have involved such a steering committee. The members of this committee would have comprised representatives of the MoPHS, StC, GIZ and the key persons, the research facilitators, myself and a child from each research group (diary 2:42). The objectives of this initial plan were: to achieve a more participatory data analysis process; to revisit the results during regular meetings; to root the PAR better in the community and school structures, and to further ensure the sustainability of the targeted social change of the PAR (chapter 3.8.8.1, 3.8.8.3). A second challenge was my inability to gauge the full validity of my final results. This challenge occurred because I was unable to verify my final results with the children or key persons in Kenya (chapter 3.8.1). However, the following features of my research design helped to increase my results' validity: I assembled a research team with diverse identities (Muhammad et al. 2015); I discussed all data and preliminary results with the research facilitators; the research facilitators verified previous results with the children in each session and my preliminary results in the verification session; I verified my final results with the female research facilitator, and I discussed them with some experts from Kenya, with a group of fellow PhD students and a group of friends (chapter 3.7.2.4).

A third challenge had to do with translation. The research facilitators translated my guidelines for the children's session, which were prepared in English, into a mixture of Kiswahili, Kikuyu and English and thereafter also translated the results into English for the protocols (chapter 3.5.2). Typical for participatory research, we reduced the challenge of losing or mistaking information using the following features of the research design: discussing the same subjects using different techniques (triangulation), verifying some results with the children in previous sessions, using some of the results

obtained for further reflections with the children (e.g. six summary models: Figure 7, chapter 3.5.3.3 and Annex: Figure 13), and discussing the preliminary and final results with various adults (chapter 3.7.1, 3.7.2.4) (Pinto et al. 2012). The fourth challenge for me was gaining the necessary distance to the research data during my non-participatory analysis. Because of this challenge, it took me two years to undertake the final data analysis (February 2014 to January 2016). These two yeas enabled me to develop my framework to reflect on the PAR and gave me time to gain the necessary distance from the data as well as to present my findings in a more abstract manner (chapter 3.7.2).

3.8.8 Ethical evaluation of the PAR

My own reflections on ethical issues of the PAR concern the six topics of ownership, the researcher's role, power roles, protection from harm, informed consent and confidentiality (Table 5). I used the literatures of: Khanlou et al. (2005), Löfman et al. (2004), Muhammad et al. (2015) to assess the adherence to ethical considerations.

Table 5: Ethical issues of the PAR and how they were addressed

Ethical issues of PAR & chapter		Used ways to address each ethical issue during PAR			Remaining ethical challenge of PAR
		children	**children's parents**	**key persons**	
Ownership (chapter 3.8.8.1)	**relates to PAR**	one children's group showed ability to own small AR		one key person showed signs of ownership	children & key persons did not own PAR sustainability of PAR
Researchers' role (chapter 3.8.8.2)	**relates to research team members**	research facilitators matched children's ethnicity		one key person worked increasingly in partner-ship with children	my superiority politically motivated & imposed objective power inequalities
Power in PAR (chapter 3.8.8.3)	**relates to power sharing planning PAR process**	children & key persons were involved in some aspects of PAR design; both became keep to achieve PAR's social change			sustainability of PAR
	in knowledge generation in PAR	I rarely attended children's sessions research facilitators support children's views			myself & research facilitators dominated knowledge generation
	in results presentation of PAR	children, parents, key persons, research facilitators were involved in data analysis for preliminary results			I represent findings
		children benefited from results			validity, superiority, my academic achievements
Protection from harm (chapter 3.8.8.4)	**relates to PAR**	children learned on benefit of realising their participation right			children got caned by key persons children's risks through freely speaking their opinions children's discouragement as practice of participation may not be sustained
Informed con-sent (chapter 3.8.8.5)	**relates to inform participants**	informed to children prior sample selection & in first session	informed parents & key persons in introduc-tion session & through inform. sheet		'unknown' factors & did not inform on conducted PO
	give consent	children agreed to take part prior sample selection	parents signed consent forms	key persons agreed to take part before selection	consent of late joiners of children not received
	voluntarily	pointed out voluntarily involvement in PAR			
Confidential-ity (chapter 3.8.8.6)	**relates to use of data**	informed on use of findings only for this PAR			
	Anonymity	identification of individual answers is not possible as results present views combined		show views with those of other teachers	no full anonymity for key persons
	verify final results	children, parents and key persons commented on preliminary results			participant's justice on final results is not ensured

3.8.8.1 Ownership

The main participants of the PAR were children, but they did not own it. The research facilitators and I initiated and guided the entire PAR. One of the children's groups exhibited an ability to own the small AR process and to steer it to achieve their chosen changes (chapter 4.3.5.3). Only one key person showed signs of ownership (chapter 4.3.6.2). I attributed the low ownership among the children and key persons to three reasons: the short research period of 4½ months, the fact that I, as an outsider, and not the children or key persons, initiated the PAR, and the fact that the idea of the children's right to participate was quite new to them (chapter 3.8.1, 4.3.4.2). The low sense of ownership raised the enduring ethical concern of the PAR's sustainability. This concern was reinforced by the fact that the original health clubs in the three schools almost collapsed during the PAR. It was only in Kiriri School that the club members sometimes met with the club teacher. Most of the children said they saw the research sessions as club meetings and some held the view that their clubs had dissolved (b. K. No. 53). Consequently, teachers needed to revamp the clubs' membership and leadership after the PAR (diary 4:10/54; b. K. No. 53) (Table 5).

3.8.8.2 Researcher's role

The identity of each research team member influenced their roles and raised associated ethical concerns (Figure 5, chapter 3.4, 3.4.2). The concern over my 'cultural superiority' over the participants emerged through my identity as an academic researcher from Germany who initiated and coordinated the PAR (chapter 3.8.3, 3.8.8.1). The fact that I organised the project in cooperation with the GIZ and the Kenyan government ministries also raised the concern that it was politically motivated, and not the children's or key persons' own initiative (chapter 3.8.1, 3.8.2). A related concern raised was that I imposed the PAR's aim of realising children's right to participate. Various factors of my PAR design helped to minimise such concerns over the influence of my identity (chapter 5.1). As one factor, I recruited research facilitators who both came from the children's cultural background and one of them had engaged in issues on children's right to participation in Kenya (chapter 3.4.2). The power inequality entailed in the research facilitators' identity and positionality as indigenous-outsiders remained an ethical issue (chapter 4.3.1.2). Key persons' identities also entailed power inequalities as demonstrated by children's intimidation (chapter 3.8.4) (Table 5).

3.8.8.3 Power in PAR

The research facilitators, together with my identity and outsider positionality, embodied power and privilege. This power raised three areas of ethical challenges. First, the PAR may lose sustainability and local ownership because I, the outsider, planned it, assisted by the research facilitators, and there was low ownership of the research among the children and key persons (chapter 3.8.1, 3.8.8.1). Second, each team member's power influenced the process of knowledge generation. I minimised my influence on the research facilitators' work by rarely attending sessions. The research facilitators reduced their influence on children's views by constantly supporting them to freely express themselves (chapter 4.3.1.2). We still dominated the knowledge generation as we predetermined the subjects to be discussed and kept overall control of the PAR. Third, I held overall power in representing the findings. I analysed the data for the final results without children's or key persons' feedback (chapter 3.7.2, 3.8.7). Ethical challenges of validity, cultural superiority, critical subjectivity and of my academic achievements, therefore, arose (chapter 5.1) (Table 5).

3.8.8.4 Protection from harm

Our first priority was to protect children from possible risks arising from the PAR. In the first place, the children benefited from the research; most of them admitted having learned the advantages of realising their right to participate and felt proud to have taken part in the PAR (chapter 4.3.1.2, 4.3.3.3) (diary 3:28, 5:57, 7:59). The PAR still posed various risks for them. The most serious of these risks was that some children had been forced, through threats of caning by the key person, to attend the sessions on time (Makutano School); others were punished for joining the sessions even though they had not been selected (Kiriri School) (chapter 3.8.2, 4.3.6.3). Risks could also occur due to the fact that the PAR encouraged them to freely speak their opinions towards adults (diary 5:60) (chapter 4.3.6.3, 5.5). Other risks included the fact that the PAR raised children's hopes by exposing them to an experience of what it means to participate freely. This was a risk because it came against the backdrop of the possibility that the practice might not be sustained after the PAR, leading to discouragement (Table 5). Other scholars also identify this challenge in PAR with children (chapter 2.8.5).

3.8.8.5 Informed consent

We informed the parents and children in each school about the PAR during the introductory meetings. We gave information sheets to the parents and they signed consent

forms (chapter 3.6.2, 4.3.2.2). The children gave their consent during the selection procedure. We constantly reminded all of them that they were taking part voluntarily and could chose to withdraw at any time (chapter 3.3.2, 3.8.5). Some children left the PAR during and after the schools' December holiday (chapter 3.8.2). We also faced typical challenges of informed consent. First, a few children joined after the PAR started and we could not receive their parents' signed consent forms (diary 3:11). Second, 'unknown' factors emerged during the PAR process, which we could not include in the consent. Third, we did not inform the children, teachers and parents that their behaviour and interactions would be observed. I feared that informing them of this would influence their reactions, a challenge of PO that many authors have noted (chapter 3.5.3.2) (Table 5).

3.8.8.6 Confidentiality

We informed all the participants that we would use the findings only for the research purposes. I safeguarded the anonymity of the children and parents as I presented their views or one groups' views together in the results. As such, no individual responses could be attributed to any single participant. The key persons' anonymity was difficult to safeguard since only three of them were involved. Nevertheless, I tried to mask their identities by presenting their perspectives together with those of the other teachers interviewed. Confidentiality also entails ensuring that participants get to verify the final findings, which was not possible during the PAR (chapter 3.8.1, 3.8.7). The children, parents and key persons did, however, comment on the preliminary results (chapter 3.7.1, 3.8.7). The ethical challenge remains as to whether or not the final presented results on the participants' views and roles do justice to them. The key persons could, for instance, be offended by my critical description and interpretation of their roles (chapter 3.4.3, 3.8.4) (Table 5).

The next section presents my research results. The first sub-section adds to the overall practice of AR with children by suggesting a modified Cogenerative AR model (Greenwood et al. 2007) (chapter 4.1). The second sub-section only presents the results on children's views on their right to participation (chapter 4.2). The third sub-section combines children's views with my reflections of the PAR process, focusing specifically on our experiences in realising children's right to participation within the CSHP in Kenya (chapter 4.3). The fourth sub-section summarises my results in a final puzzle model demonstrating the realisation of children's right to participation in accordance with the Action Research principles (chapter 4.4).

4 Research results

This chapter presents the results of the PAR that was carried out with six groups of primary school children in Kenya. The aim of the PAR was to define how children's right to participate could be realised within the CSHP in Kenya and to contribute to existing theories on this right (chapter 2.6.1.-2.6.3). A secondary aim of the research was to add to the practice of AR with children (chapter 2.6.4).

The following first part presents my results on this secondary objective: a modification of Greenwood et al.'s (2007) Cogenerative AR model and criteria for AR with children (chapter 4.1). It is important to note that such results do not contribute to the main objective of the research, namely to define concepts for the realisation of children's right.

The second, third and fourth sections of the presentation of results respond to this main objective of the research (chapter 2.6.1.-2.6.3). The second part consolidates the findings on the children's perspectives on their right to participate and its realisation. The grey boxes indicate my presentation of the results on children's views (chapter 4.2). The structure for presenting children's views yielded the nine categories that I formed during my second coding approach (inductive) (chapter 3.7.2.1). Their views identified important actions that can help them to realise their right. In order to present children's priority on actions more clearly, I split the nine categories into two: actions on how this right may be realised and features that support its realisation (Puzzle model 1: Figure 10, chapter 4.2). The group on actions includes the categories of giving their views, working together, taking part actively and helping others. On the other hand, the group on features that support its realisation included the remaining categories, namely being listened to, exhibiting good behaviour, having good relationships with teachers, organisational aspects and material needs. These stated actions and features constituted crucial characteristics of our PAR and of each AR. The children's prioritisation of actions, together with our experience during the PAR, led me to conclude that their right to participate could be realised in accordance with the AR principles.

Following this conclusion, the third part of the results reflects on our experiences during the PAR process (chapter 4.3). I reflected on it based on my developed framework (inductive, deductive) (chapter 3.7.2.2). The six components of the framework defined and structured my reflections (Puzzle model 2: Figure 11, chapter 4.3). On each component of my reflections, I used my defined overall AR characteristics, so that the reflections elaborated my conclusion that the children's right to participate could be

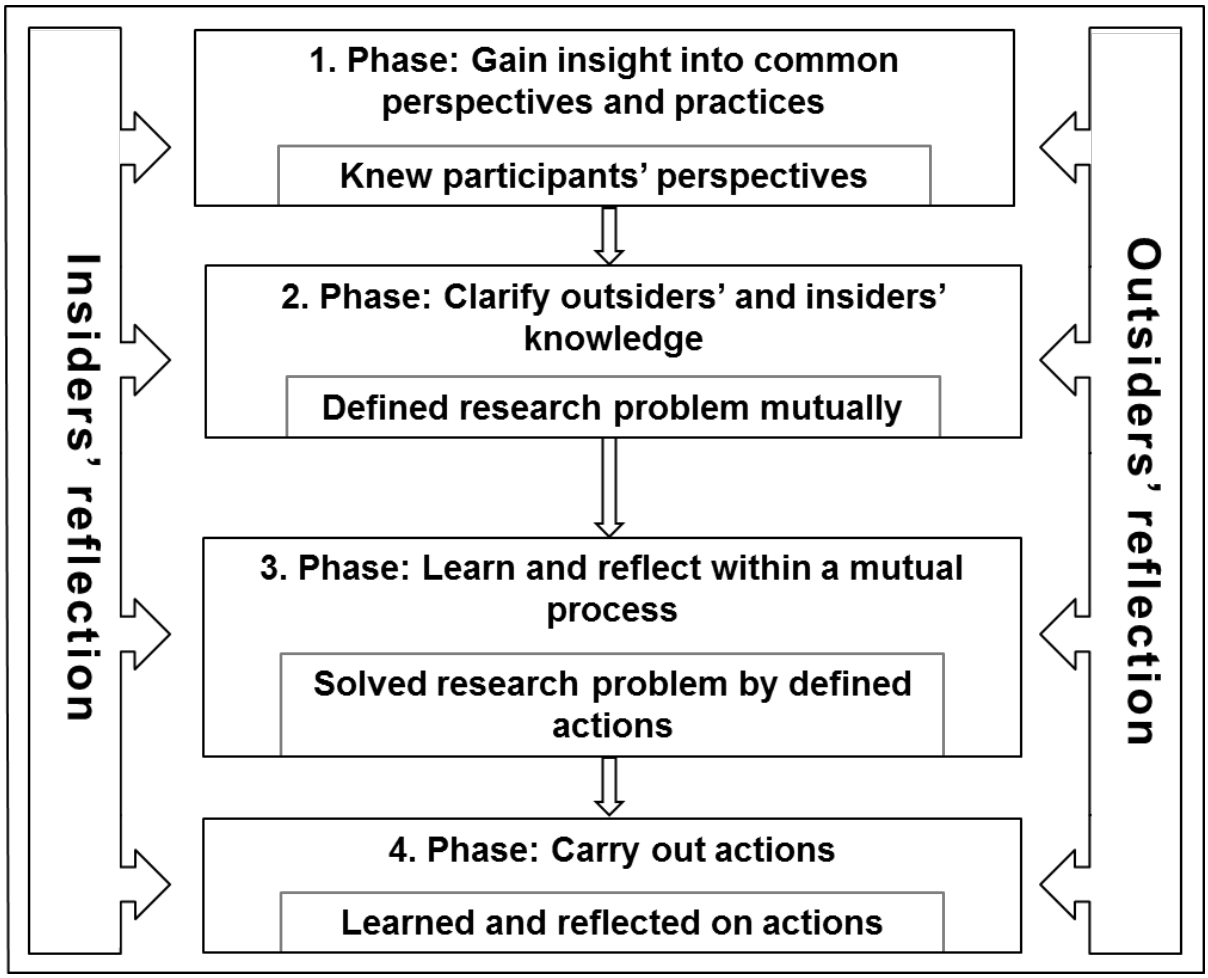
realised according to AR principles (chapter 2.6.3, 3.7.3.1). I then merged the reflections on each AR characteristic with the results of the children's and adults' views on the right (grey boxes) (chapter 4.2). Out of my reflections on each AR characteristic, I also generated specific recommendations for the realisation of this right in school health clubs in Kenya.

The fourth part of my presentation of results summarises the research findings by presenting a final puzzle model on how children's right to participate can be realised in accordance with AR principles (Puzzle model 3: Figure 12, chapter 4.4). This puzzle model infuses the contribution of the research to the theorisation of this right. It presents the overall AR characteristics derived from the research findings in combination with the six defined components. These six components describe my final results to understand the children's right to participate in line with AR principles and the AR characteristics describe my results on how to facilitate its realisation in accordance with these AR principles (chapter 4.4).

4.1 First part: Modification of Cogenerative AR model

The secondary objective of the PAR was to use the experience gained to contribute to the practice of AR with children. Such experiences emerged from my adaptation of Greenwood et al.'s (2007) Cogenerative AR model to my particular research context of primary school-aged children living in Kenya (Figure 2, chapter 2.8.3). The result was a modified Cogenerative AR model. I split the original two phases of the AR model into four (Figure 9). With this modification, I revised the objective and expected outcomes of each of the four phases (chapter 4.1.1). I also defined the criteria for AR with children (chapter 4.1.2).

Figure 9: Modified Cogenerative Action Research (AR) model



4.1.1 Specification of four AR phases

The objective of my newly inserted and redefined first phase of AR was to gain insight into children's common perspectives and practices on their participation. This insight contributed to our prior defined research problem, which was the negligence of children's right to participation in the CSHP. Out of this first phase, we managed to obtain the children's views and practices, which also helped us to build the next AR phase. It is important to note that children's views on their right at this first AR phase concerned their participation in household and community tasks. They did not refer to the school. With a timeframe of five weeks, the first phase was quite long (session 1-5) (chapter 3.5.1).

The revised second phase of the AR aimed to clarify the children's knowledge in relation to the research team's professional knowledge. This knowledge clarification process led to a mutual reformulation of the research problem. The outcome of this process was a summary model on each children's group's understanding of their right to participate (Figure 7, chapter 3.5.3.3, 4.3.1.2 and Annex: Figure 13) (session 6-8) (chapter 3.5.1). We used these summary models to make reflections during the revised

third AR phase. This joint redefinition of the research problem constitutes the objective of the initial first phase in the Cogenerative AR model (chapter 2.8.3).

The newly inserted and redefined third phase of the AR sought to generate a mutual learning and reflection process between the children and the research team. In this process, the children made recommendations on how their right could be realised (session 9-14) (chapter 3.5.1). I considered children's recommendations, thus their recommended actions, as solving the research problem (interim results: series of posters summarise their recommendations) (chapter 3.5.1, 3.7.1). The expected outcome of this third phase was this resolution of the research problem.

The objective of the revised fourth AR phase was to implement some mutually agreed-upon actions to address the research problem. We implemented some of the children's recommendations on the subject of SRH, e.g. children discussing in groups. During this fourth phase the children reflected on their defined actions and the PAR process (diary 8:16) (session 15-17) (chapter 3.5.1). This reflection and the subsequent learning of these actions were the expected outcomes of the fourth phase. In the original Cogenerative AR model these outcomes formed the objective of the second phase (chapter 2.8.3). The reflection cycles between the children and us as a research team continued during the AR. We fed back its outcome in the communicative process of the four phases, exactly as the original Cogenerative AR model describes (chapter 2.8.3, 4.3.1) (Figure 9).

4.1.2 Criteria for AR with children

As a result of the modified Cogenerative AR model, I formulated several criteria for the practice of AR with the children, particularly with primary school-aged children. First, parents should agree on their children's involvement in the AR. Second, parents should have distinctive roles within the AR. These roles depend on their involvement in each AR phase. In our PAR, the parents were involved as key persons in the first AR phase and we conducted the FGD with them during the first and fourth AR phases. Third, the first AR phase should be long, as it is important to exhaustively collect children's specific perspectives and practices on the research problem. This is especially important when outsiders define the research objective and even more important when the objective is new or unfamiliar to the children, as was the case in our PAR (chapter 3.8.1). Fourth, the second AR phase should especially have elements of fun for the children and provide room to redefine a mutual research problem that the children understand well, e.g. we visualised it in form of six summary models (Figure 7, chapter 3.5.3.3 and Annex: Figure 13). Fifth, the third AR phase should be facilitated in such a

way that the children themselves answer the mutually defined research problem. Although adults often guide an AR with the children, they should ensure that the children lead in resolving the research problem. Sixth, the overall AR process must ensure that the children own the actions carried out as a result of the mutual learning and reflection. Seventh, the learning and reflection arenas should be created in a way to guarantee continuing involvement of the children throughout the entire AR process. Among the factors to consider to fulfill this criterion are meeting time and place, length of AR sessions, size, gender and ethnicity of AR groups.

4.2 Second part: Children's views on their right to participate and its realisation

The main objective of the PAR was to establish children's perspectives on their right to participate and how this right could be realised. I present children's views as structured along the nine categories that I formed out of their understanding of their right (chapter 3.7.3.1). I demonstrate these nine categories, first in a puzzle model that I created (Puzzle model 1: Figure 10). The puzzle model elucidates the two sections into which I split the nine categories: actions on how this right can be realised and features that support its realisation. The outer circle of Puzzle model 1 indicates the categories that belong to each of these two sections. This division was crucial for me to further structure the children's perceptions and to demonstrate the respective importance of actions. The section on actions included the following categories: giving their views, working together, taking part actively and helping others. The section on features focused on the remaining categories, namely being listened to, exhibiting good behaviour, having good relationships with teachers, organisational aspects and material needs. Just as the actions, these features identified by the children to support their right's realisation are essential for each AR. The different colours in Puzzle model 1 (Figure 10) indicate the use of each of the nine categories in the formulation of the six components demonstrated in Puzzle model 2 (Figure 11, chapter 4.3).

Figure 10: Puzzle model 1 on the nine categories of children's views on their right to participate

4.2.1 Children's perspectives on actions on how children's right to participate can be realised

The results presenting children's views on their right to participate, structured in the nine categories (sub-sections), respond to two of my defined empirical objectives: children's understanding of their right and their defined concepts to realise this right within the CSHP (chapter 2.6). In each of the nine sub-sections, I first present the children's views that concern the children themselves. Second, I present the children's views that concern teachers and, third, the children's views that concern the school. The grey boxes indicate that I am presenting the results on the children's views[5] (chapter 3.7.3.1). In the next four sub-sections, I present the children's views regarding the four categories that focus on actions, namely giving their views, working together, taking part actively and helping others.

[5] I have marked my presentation of the children's original wording by writing it in italics. In such wording, I retained the language or grammatical anomalies, exactly as the research facilitators retained the children's original phrasing in their protocols.

4.2.1.1 Children give their views

Being able to give their views was of great significance to all of the children. Boys and girls frequently recommended that, for the realisation of their right, they should not fear or be shy to speak out. They should instead air their opinions impartially and as one boy put it, *say what they want, when they want to say something* (b. M. No. 84). All pupils should be able to give their views, which they phrased as *we can give our opinions without thinking of other things* (g. K. No. 79). They further stated that *when we participate each of us gives their own opinion* (g. K. No. 40). They often talked about the need for them to feel free to ask for clarification if they did not understand what the teacher taught. Of importance to them was also being able to freely express themselves. For example they said that if they *as club members want to go for a trip or want today to talk about something, we have a right to say it* (g. G. No. 41). They stated often that the realisation of their right to participate would help them to be able to give their views and to contribute to decisions at home on issues such as what they want or do not want to eat. One girl expressed this as *it can improve our brains and help us to be healthy because if we have the right we can say what we want to eat* (g. M. No. 42). The right to participate to the children also meant that *someone can be respected because of saying important things* (b. M. No. 45). In their health clubs they wished to participate by asking questions, giving their views and speaking their minds.

The children said that health club teachers should ensure that children are able to give their opinions. One girl phrased this as *teachers should stop telling them they are children, they cannot give opinions (*g. K. No. 46*)*. A dramatic piece staged by some girls' puppet story clearly depicted the demeaning reactions of teachers towards children's opinions. The different teachers in the play used statements such as: *you are too small, you cannot give your opinion; what are you saying and the way you are so dirty, first go and learn to bathe; you are too dirty; you are immature*[6] *you cannot say anything* (g. K. No. 62). A proportion of the boys stated that it was impossible to give their views in school as teachers considered this a sign of rudeness that invited punishment. Nevertheless, all the children urged teachers to pay attention to their views, allow them to make decisions and ensure that they have time to think about what they want to say. The head teacher should advise all teachers to listen to the children's views and relay these views to his/her office. The children said *we can give our opinions by telling the head teachers and they tell the whole school* (g. G. No. 80).

[6] The exact word which the children used in the Kikuyu language refers to being *immature* when boys are not yet circumcised (g. K. No. 62).

4.2.1.2 Children work together

The children considered working together as an important recommendation to help realise their right to participate in the club. As some children pointed out, *we can sit as health club group to talk and discuss* (g. G. No. 80). Apart from being able to hold discussions about what they learnt, the children talked about agreeing and deciding on various issues. They mentioned that it was sometimes not easy to agree. They also acknowledged that it was important to share the agreements they reached with the teacher. As they explained, *we agree with other students and tell the teacher* (g. G. No. 80). The children also underscored the importance of mutual respect in their groups. They observed that, while working together, they should be faithful to one another, say the truth and forge decisions concertedly. One group of girls added that they should *stop insulting each other* (g. M. No. 81). One health club rule that the children coined went thus: *we should be serious when we are discussing* (b. K. No. 59). For the children the right to participate also meant that they learn to do things together. This included not ignoring other pupils who make mistakes, but correcting them, so that those who err do not feel estranged or alienated from the group. In their current health clubs, the children said they enjoyed holding discussions among themselves, because these discussions enhanced their understanding of what they were taught.

For the health club teachers, the children recommended that they *can say that everybody should work together* and give them *the time and the chance to discuss* (b. K. No. 82). They especially emphasised being permitted to discuss health issues or organisational matters in their clubs, including what to do during club time.

4.2.1.3 Children take part actively

In order to uphold their right to participate in the health club, the children emphasised the importance of actively taking part. The boys expressed this view by saying: that *we be participating many times* and *be active* (b. K. No. 82, b. M. No. 84). They also described participation as *being part of* (g. M. No. 36). The children specified their understanding of actively taking part as availing themselves, being industrious, being attentive and focused during club time. One group of girls stated that w*hen you take part in something you can learn and then teach others* (g. K. No. 40). As a rule in their club, other girls formulated as: *to be involved in asking your health club teacher questions about health* (g. M. No. 64).

The children said that the realisation of their right to participate in the club would allow them to be more active and responsive to health and club issues. They explained that with this right realised they would have a better grasp of what they were taught *because they are free in their mind*, as one girl put it (g. M. No. 42). The children also observed that they would feel better able to take part in the club if they cleaned their classrooms well and dug a rubbish pit. A few of the children gave as reason that these aspects of hygiene would protect them from catching diseases. The children further described their right as being able to take part in other clubs within the school, in community activities and duties at home. They formulated that they *have a right to participate in all the things that concern us* (b. G. No. 44).

According to the children, the role of the teachers is to inform and encourage all children to actively take part in the health club. They phrased this role as *teachers should tell the children in school that they have freedom to participate* (g. K. No. 79). Equally, the children urged the school *to tell other children to be participating in things if they are good* (g. K. No. 79).

4.2.1.4 Children help others

One priority in the understanding of both boys' and girls' of their right to participate was to help others. They especially referred to this as helping their friends. The boys specified this as *helping them when they have problems or when they do not know how to read* (b. G. No. 20). They also mentioned that they can help their friends by sharing their food. The boys further recommended helping their teachers and older people in the community. They urged the need to help injured people and suggested that the children should learn more about First Aid. The girls spoke more than the boys about teaching others. One important health club rule that would help them to participate, according to these girls, was to teach other people what they have learnt. The subjects that these girls mentioned teaching included what they had learned about good health and behaviour and about their right to participate as well as how to express their views. One group of girls specified teaching about being responsible for their bodies. Some boys phrased as rule that *they should teach at least two people what they have learnt.* However, the boys considered this rule impractical for their participation because, as they said, *they do not have time to teach other people* (b. M. No. 66). As part of helping others, the children also recommended being role models. One girl expressed this view as: *changing behaviour is not difficult, so we as health club members can do it by showing moral behaviour* (g. M. No. 81). As a club rule to ensure

their participation the girls emphasised that they should *be examples to others* and *keep their health club office and environment clean* (g. K. No. 62). The girls explained that *if you are a good role model, they will accept you to give your opinion as you are trustworthy (*g. K. No. 62*).*

4.2.2 Children's perspectives on features that support the realisation of their right to participation

In this second section, I present children's views under the remaining five categories (sub-sections). The five categories concern features that support the realisation of their participation right, namely be listened to, exhibit good behaviour, have good relationships with teachers, organisational aspects and material needs.

4.2.2.1 Children are listened to

All groups of boys and girls considered being listened to a factor of high importance to support the realisation of their right to participate. One girl expressed this as *it is a must when I say something that it is heard, like it is a must that we eat* (g. M. No. 48). Other girls strongly recommended that *when we say our opinion we be heard as health club members* (g. M. No. 81). They said that children's opinions should be accepted if they are good. A few girls observed that the attention given to children's views depended on the child's age and maturity. They saw the chance *to be listened to what we are saying* as an important club rule (b./g. G. No. 63). The children expressed a strong belief that when *they are heard they will be able to participate, as they can share their feelings with each other; then they tell the teacher, who then takes a step* (g. M. No. 64) or *passes the information on to the headmaster* (b. M. No. 45). All the children observed that in the current health club, there was need for them to be listened to. They, for example, emphasised the need for their suggestions to be heeded. A few children understood their right to participate as being given what they ask for, e.g. a new school uniform[7]. Of great importance to them also was being listened to by their colleagues. They expressed this view thus: *if we want to help each other we should listen to each other* (g. M. No. 81).

As such, teachers and parents should listen to children's views and give due regard for them; they should not, for any reason, ignore their children. One boy said that *the teacher should listen and give due weight to what we say* (b. K. No. 82). The children also urged that their decisions be taken seriously. Only in Kiriri did the children say

[7] Their example referred most likely to the pictures we used to explain Article 12.1 (Annex: Figure 16).

that their decisions were taken seriously by the club teacher. Still, the children said their teacher did yet not always pay attention to their opinions and, as they put it, *they would sometimes like to do something different* (g. K. No. 46). The children in Gatuura said that they expected the teacher to respond to them whenever they asked for clarification or help. As a solution to being ignored by adults, all children suggested that teachers and parents be advised not to ignore children, but to listen to what they have to say.

Within the school context the children recommended that the head teacher should urge teachers to pay attention to what the children say. They phrased this as *we can tell the head teacher so that what we say is taken seriously and can also be told to other school members* (g. G. No. 80).

4.2.2.2 Children exhibit good behaviour

The children, especially girls, talked about the need for children to exhibit good behaviour to support the realisation of their participation. They specifically referred to certain behaviour changes to ensure that their views are taken seriously by teachers. For instance, they urged *everybody to be clean everyday, because if we are clean we can give our opinions in the health club* (g. K. No. 79). Important for the girls was to show respect for others, be obedient and use courteous language: in this way their opinions would count. They recommended being obedient because, as they said, *everybody can listen to you when you teach others* (g. K. No. 79). The boys also talked about the need to change children's behaviour, but with less emphasis than the girls. They stressed that children should respect the club rules, avoid mischief, be punctual and attentive during club time. They recommended listening to the teacher, obeying others, respecting older people and washing the club room as behaviours that would enhance their freedom of active participation. All the children insisted that they should be kind, loving and unselfish to their colleagues and never hurl insults; in this way, they would be taken seriously by their fellows. Their notion of discipline is specifically that *if one is disciplined he has good manners* (b./g. verif. No. 107).

The children gave several other examples of good behaviour that could enhance the realisation of their right to participate. All these are summarised by the following statements from the children: *being a good child doing good things, then they listen when I give my opinions* (g. K. No. 79) or *when one is well behaved and respects others they are accepted by people and then they can listen to your opinion* (g. K. No. 62). They also noted the importance of obeying teachers *as they will then trust us and then we*

can give our opinions (b./g. G. No. 63).

The girls recommended in particular that health club teachers should teach children about good behaviour. They emphasised being taught how to maintain high standards of cleanness saying that *teachers should make sure that students are clean and if one is clean every day, they are allowed to give their opinion* (g. K. No. 79*).* As actions for the school one group of boys suggested that children *should be punished if they do wrong things* (b. M. No. 84).

4.2.2.3 Children have good relationships with teachers

Most of the children's recommendations described requirements for teachers and learners to get along well in school. The girls phrased this as: *we must have good and better language when telling the teacher that we want something* (g. M. No. 81*).* They further urged that *we should answer questions carefully and if we don't know we can ask the teacher and he/she can answer* (g. M. No. 81). Their right to participate meant for them freely holding discussions with their teachers on what they wish to do and partaking in what the teacher says. They said that the children should agree with the teacher on what to do, and ask for permission if they wish to do something different. The girls added *that it helps them to be able to agree with the teachers, if they obey what they agreed with them before* (g. M. No. 64). For the children, a good relationship with their teachers included respecting the teacher, which they specified with certain behavioural examples, such as: *when the teacher sends you somewhere you run* (b./g. verif. No. 107).

The boys recommended that *a teacher must listen to the child and do the right things to the child* (b. G. No. 83). By 'right things' the boys said that teachers should not apportion children work that the children find impossible or too much to accomplish and that teachers should not miss lessons. The girls' recommendation for teachers was: *to be protected from abusement, you must be taught better things than being insulted* (g. M. No. 81). They explained that if they were protected by their teachers they would feel safe to express themselves. The girls also said that teachers should avoid favouritism and not demean children who approach them for help. They said that teachers should teach without mocking or shouting at children and not use caning, but instead show love to all children. One group of boys said they should *not be punished because of coming late* (b. M. No. 84). All the children agreed that in some exceptional situations punishment by caning was appropriate, e.g. if a child does wrong things such as stealing.

The children recommended that the school should strictly ensure that teachers do not harass them, *as teachers make us fear to tell our views* (b./g. verif. No. 107). Some girls suggested that *the head teacher can tell the other teachers, so that they can stop harassing children* (g. G. No. 80).

4.2.2.4 Organisational aspects recommended by the children

The children recommended a variety of organisational aspects as being necessary for the realisation of their right to participation. The boys in Kiriri School suggested that they should be allowed to converse in their mother tongue, Kikuyu, with their club teacher. They also advised that club meetings should be scheduled for Saturdays. All the boys talked about increasing participation through exchange programmes with other schools' health clubs. The girls suggested that boys and girls should have separate club sessions, for which each of the girls' research groups explained differently as: *so that we can properly agree (*g. M. No. 81)*; because the boys have bad manners of beating and insulting the girls* (g. K. No. 85); *because we feel shy when we are with the boys* (g. G. No. 86). One boy expressed the need to hold a party, which he said would help them to participate as they would feel happy.

The children recommended that teachers should ensure that each club has a chairperson. They stressed that they should be able to select their chair and mentioned the following criteria for selection: *someone who is clean, well-behaved, speaks well, can give good advice, is not mischievous, who does not insult others and is clever* (g. K. No. 46). Most of the girls recommended that teachers should support them in having club sessions without the teacher's presence, s*o that they can act and participate* (g. M. No. 48). One group of girls urged a health club rule saying that *they should be given the permission to have their own session* (g. M. No. 64). They suggested that teachers should set aside time to instruct them more on their right to participate. All children urged action to recruit more pupils in the club, as they said, *because when we are many we won't fear to talk* (b. K. No. 49). They proposed that the school should employ more teachers and arrange for a day on which children can give their views.

4.2.2.5 Material needs recommended by the children

The boys talked more than the girls about material needed to support their right to participate. They proposed having a health club room and a bigger room, so that they could have sufficient place to meet as members. All the children recommended having club uniforms *so that they can be identified as health club members* (b. K. No. 49). They also suggested that if lunch would be provided at school *they will not be hungry*

and they will then participate more (b. M. No. 51). A similar incentive suggested by one of the children was that if they could *come with home clothes instead of uniforms, as these are warm and they won't feel cold so they will participate* (b. K. No. 49). They further expressed the need for a blackboard and booklets to enhance the learning activities of club members. Some girls added that the realisation of their right would *help children not to be a thief, because they would get more of their needs* (g. M. No. 42).

The views that the children presented on their right to participate entailed the crucial characteristic of each AR. Moreover, the children emphasised actions for the realisation of their right. These findings and the experience we gained during the PAR led me to conclude that the children's right to participate could be realised in accordance with AR principles (chapter 2.6.3, 3.7.3.1). The next chapter presents my results on how to realise this right in accordance with AR principles.

4.3 Third part: The realisation of children's right to participate in accordance with Action Research principles

The second part of the results presents my reflections on the PAR which elaborate the realisation of children's right to participate according to AR principles (chapter 3.7.3.1). I combine such reflections with the children's views on their right referring to each of the nine previous sub-chapters (chapter 4.2.1.1-4.2.2.5) and their views on additional subjects, as well as parents', key persons' and other teachers' views[8]. I present such views again within grey boxes which helps to distinguish the participants' views from my reflections. I complement my reflections with the assumptions I drew on the realisation of children's right to participation in school health clubs in Kenya.

The framework I developed guided my reflections (chapter 3.7.2.2). It defined the six components that make up my understanding of children's right to participation according to AR principles. The second puzzle model summarises the six components (Puzzle model 2: Figure 11, chapter 4.3). The framework further outlined the AR characteristics as subjects on which I reflected the PAR. The AR characteristics specify the implementation of the six components. I formulated the AR characteristics based on my summary of these characteristics, on abstracting children's views of their right, on my two inspiring literature references (Hart R. 2008, Percy-Smith 2014a) and on specific theoretical principles that I chose to support my reflections (chapter 2.7.2-

[8] I have marked my presentation of the original wording of the children's statements and those of their parents, key persons and other teachers by using italics. In such wording, I retained the language or grammatical anomalies, exactly as the research facilitators retained the original phrasing of the participants in their protocols.

2.7.7) (step 2-5 in the framework development, chapter 3.7.2.2). A third puzzle model summarises my reflected AR characteristics in combination with the six components (Puzzle model 3: Figure 12, chapter 4.4). I indicated in both puzzle models (Puzzle model 2 and 3), through the use of different colours, which of the nine categories on children's views (Puzzle model 1: Figure 10, chapter 4.2) I abstracted to formulate each of the six components. Only the component that said that 'children's participation increases by granting them agency' was not guided by one of these nine categories. However, the two references mentioned above emphasise children's agency as important to the realisation of their right. Indeed, the children's overall views on its realisation underscored their desire for increased agency (chapter 4.3.5).

I structure the presentation of my results along the six components that I rendered as titles for the next six chapters. The subtitles of these chapters constituted my defined AR characteristics respectively. For such characteristics, I use the terms *research facilitators* and *participants* as such AR characteristics specify the implementation of the six components. However, for the six components, I use the more specific terms *adults* and *children* to describe clearly my explicit understanding of children's right to participation in accordance with AR principles.

Figure 11: Puzzle model 2 on components for understanding children's right to participate in accordance with Action Research principles

4.3.1 Children's participation is a collaborative dialogue between adults and children

An AR process embodies democratic ideals. During the PAR, children and adults engaged in arenas of lively debates and decision-making, similar to those that Greenwood et al. (2007) describe on the concept of democracy (chapter 2.8.1). A social learning process took place through children's and adults' collaborative dialogue and critical reflections. This process led to the generation of new and shared knowledge (chapter 2.8.3). I reflected on the PAR in the next chapters based on two of four dimensions of a social learning process which Wildemeersch et al. (1998) elaborate (chapter 2.7.2). The two dimensions state that multilateral-controlled communication arenas are created and that a cooperative and reciprocal learning process takes place. I also reflected on crucial features for the specific actors involved in such a learning process, namely that decisions are made jointly and that power structures are negotiated. Wildemeersch et al.'s (1998) social learning process

highlights the feature of power and I consider the feature of joint decision-making as an underlining practice of such a learning process.

4.3.1.1 Multilateral-controlled communication arenas are created

Central to the AR process is the creation of appropriate arenas that allow for communicative actions to take place. This creation is still a great challenge, considering, for example, that the outsiders' advanced knowledge could result in a situation of communicative domination. Nevertheless, both the insiders and outsiders should benefit within the social learning process (Greenwood et al. 2007) (chapter 2.8.3). Skilled AR facilitators work best to ensure that local knowledge is well articulated within communicative actions.

Different factors determine whether the communication arenas either stimulate or inhibit the social learning process between insiders and outsiders. Unilateral control is one factor that inhibits communication and that should be replaced by multilateral control (Wildemeersch et al. 1998) (chapter 2.7.2). During the PAR, the research facilitators created the communication arenas in the form of research sessions taking place every week with each of the six groups of children. Their concentration on the children's own reflections and knowledge created such multilateral-controlled communication. The research facilitators saw the children as experts. This was reinforced by the PLA methods used, which guided the children on analysing their situation and coming up with recommendations on how to realise the right (chapter 3.5.3.3).

The tension between multilateral and unilateral control, which Wildemeersch et al. (1998) describe, did, however, still manifest itself in these communication arenas (chapter 2.7.2). As an expert, I as lead researcher, had the overall control over and gave direction for the PAR. The research facilitators and I took the role of consciousness raisers (Greenwood et al. 2007) (chapter 2.8.3). Therefore, the children's and research facilitators' communication was driven by our perception of the need to realise children's right to participate. The multilateral-controlled communication arena developed as part of the social learning process. In this arena, the children increasingly took control. However, children's increasing competencies in contributing to the communication was, to some extent, only positively recognised in as far as they expressed the discourse of the research facilitators' and my own rationality (Wildemeersch et al. 1998) (chapter 2.7.2). One element of the multilateral-controlled communication arena was that children worked together in groups. This is an action that the children themselves often described as crucial for the realisation of their right to participate.

The children's understanding of their right to participate as being able to work together is presented in chapter 4.2.1.2. Similarly, while expressing their understanding of this right, the teachers also mentioned the need for group work. They said that *participation in the health club is important, because matters of health require group work to be understood well* (t. train. No. 103).

For the realisation of children's right to participate within the health clubs, the creation of multilateral-controlled communication arenas is central. Teachers' objective should be to facilitate a cooperative working climate in the clubs. To do this, they must be willing to give up control to the children and acknowledge children's own expertise and knowledge. One action in this direction could be children's suggestion that teachers act as facilitators as children work on the health subjects together in groups (chapter 4.2.1.2).

4.3.1.2 A cooperative and reciprocal learning process takes place

One core value of the AR strategy is the mutual relationship between the researcher and the participants. The outsider's professional knowledge and the insider's local knowledge fuse together through a mutual learning process of critical reflection (Greenwood et al. 2007) (chapter 2.8.3). A cooperative process of negotiation takes place according to the social learning model (Wildemeersch et al. 1998) (chapter 2.7.2).

During the PAR the process of negotiation between research facilitators and children concerned their different perspectives and interpretations of the children's right to participate. For the research facilitators it was a great challenge to make this right, according to Article 12.1 of the UNCRC, understandable to the children (chapter 3.8.5). Some children could not even pronounce the word 'participation' (diary 4:34). The mutual learning process of critical reflection was, therefore, of high importance. In this process, the research facilitators guided the children in questioning their own and adults' actions and behaviour in terms of realising their right. The children identified strategies and actions that could lead to their increased participation. Similarly, the children learnt about their right and the research facilitators learnt about children's views on this right. I summarised the consensus reached by each group in a summary model that illustrated their particular understanding of this right (Example 1: Figure 7, chapter 3.5.3.3). This summary model was a common point of reference, as Wildemeersch et al. (1998) urges for a social learning process (chapter 2.7.2). It enabled the children to affiliate and to identify with the defined practices to increase their participation. The research facilitators reflected with the children on various

subjects using these summary models as common points of reference (chapter 3.5.1). The children's interpretations of their right varied. Some only grasped the advantages of this right at the end of the PAR; others already claimed their involvement during the learning process, e.g. development of school rules (diary 4:8; Memo 140 in g. M. No. 42).

Such a reciprocal learning relationship between research facilitators and the children describes the continuum of positionality as an insider-outsider team (Anderson et al. 2000) (chapter 2.8.3). Crucial for this relationship was the research facilitators' attitude, which complied with the square of 'we know – they know', according to the four squares of outsider's knowledge (Tolley et al. 1996) (chapter 2.8.3). This attitude involved that the research facilitators saw the children as being capable of analysing their own situations and to defining actions for their improved participation. Such an attitude is a crucial principle of a joint social learning process. The relationship of these insiders-outsiders did not yet acquire equal power (chapter 3.8.8.3, 4.3.1.4). The children felt increasingly comfortable and became more involved and open (diary 7:29, 8:14). Yet they still described the research facilitators' role as *teaching them, helping them to learn* and *are our patron* (b./g. verif. No. 107), which showed their perceived hierarchy. They differentiated my role as *to learn from them* (b./g. verif. No. 107). A few aspects of the research set-up reinforced their expressed hierarchy: research facilitators worked together with teachers; research facilitators were employed by the GIZ and the PAR was introduced by the head teachers, the GIZ and the MoPHS. The duration of the PAR (4½ months) proved too short to reach the reciprocity for which an insider-outsider team aims. The children identified crucial aspects for a cooperative learning relationship between children and adults. Having a good relationship with adults[9] was one of their priorities to realise their right to participate.

The children's understanding of having a good relationship with teachers is described in chapter 4.2.2.3. The teachers also identified aspects of a cooperative learning process as advantages of realising the children's right to participation. They said that children would own the ideas if this right is realised. The club would be livelier as everybody would be active. According to the teachers, this right *will lead to a sense of ownership of the club, so that it's not the teacher who says and decides things* (t. train. No. 103). The right would help the teachers *to know what the children think about the teachers* (t. train. No. 103).

[9] The children referred most often to teachers when they talked about adults.

The realisation of children's right to participate would be most successful within a collaborative and reciprocal learning relationship with adults. The children and research facilitators engaged in such a relationship through mutual dialogue of critical reflection. This approach is in line with the dominant perspective of this right as being realised within a supportive learning relationship (chapter 2.1.2, 2.7.3).

The children would learn about health issues in the club through such a mutual dialogue of reflection. They would learn to question health-related actions and behaviour. While negotiating with the teacher they would reach consensus about the subject and define common points of reference. It would, therefore, be crucial that teachers change their attitude towards children and adopt the research facilitators' mind-set of 'we know – they know'. This includes teachers being willing to engage in dialogue with children instead of the usual teacher-centred learning.

A reciprocal learning relationship between teachers and children would develop within a long process. Changing teacher's attitudes may be especially challenging in the highly hierarchical or authoritative education system of Kenya. Nevertheless, we saw first indications of change in teachers' attitudes in the advantages they themselves presented on children's right to participation. Moreover, the PAR itself paved way for such mutually beneficial relationship to developed, particularly in Kiriri (chapter 3.8.4, 4.3.6.2). The teacher in Kiriri School had imbibed the attitude of 'we know – they know' and began to appreciate having to learn from the children about, for instance, the changes they wanted for their school (diary 3:13, 4:24). For such teachers who seek to realise children's right to participation, it would be helpful to take the research facilitators' advice to relate with the children more as friends than as authoritative adults (diary 7:36).

4.3.1.3 Decisions are made jointly between research facilitators and participants

In the collaborative research stance of an AR, decision-making is a shared process among actors. Local participants decide jointly with the researcher about each AR stage (Herr et al. 2005) (chapter 2.8.3). I considered this feature of actors making joint decisions as an underlining practice of Wildemeersch et al.'s (1998) focus on negotiations during the social learning process (chapter 2.7.2).

During the PAR, the research facilitators involved the children in most decisions regarding organisational matters. This included the decisions of when or where to meet, if the children wanted to work inside or outside and use the floor or the blackboard (diary 3:20, 7:24). They also took part in a few decisions on the research design,

e.g. their weekly tasks (chapter 3.5.2), aspects of data analysis (chapter 3.7.1). This joint decision-making encouraged the children to get more actively involved in the sessions (diary 4:7). However, they needed to learn to make decisions on their own as they were used to teachers telling them what to do (diary 5:55). The key persons also practiced this habit during the PAR. For example, they tended to decide and inform the children on when and where to meet for the next sessions (diary 4:20). The research facilitators intervened in such situations and assisted the key persons in allowing the children to make decisions. On the downside, the children took quite long to decide and agree on, for example, the time or place to meet (diary 4:19). During the PAR, the key persons began to change their practice and allowed the children greater space to make decisions. For instance, in Gatuura School, when the key person was told by the head teacher to inform the children where we would meet for holiday sessions, she suggested instead to the research facilitators that the children should decide where they wanted to meet (diary 3:49, 7:39). A question remains as to whether the key persons maintained this joint decision-making approach after the PAR. This is, especially, a concern since, as it turned out, joint decision-making is not easy and takes time.

The children themselves described in detail their involvement in decision-making at home and in school. They urged the need for them to be further involved in decisions as part of realising their right to participate.

The children's description of their drawings about their participation showed that they rarely made decisions together with the adults (Mahr-Slotawa 2020: Graphic 4). The boys talked about deciding by themselves on their daily chores at home. This included deciding on whether or not to go graze the cows, go hunting and on leisure activities such as riding the motorbike or playing football. One boy said he made the decision by himself to *slaughter a hen when he was by himself at home and decided to eat it* (b. K. No. 37). A few boys identified situations in which parents involved them in decisions, such as decisions on where the family could obtain firewood. The girls identified more situations than the boys in which parents involved them in decision-making. They especially mentioned that their mother asked them to make choices on what the family would eat for given meals. They also mentioned their involvement in decisions on material needs, such as clothes and school equipment and being asked by their parents to choose where they wished to hold their birthday parties or which secondary schools to attend.

The parents gave similar examples of involving their children in decisions, and most parents confirmed they often did. One mother mentioned that children *need to decide*

for themselves what to do as this tends to motivate them to do things better than when instructed by the parents (par. M. No. 106). However, some parents said that children are supposed to be told what to do. One parent even stated that children taking part in decision-making was disrespectful, as *it is like they want to act like adults* (par. M. No. 106). In summary, the children reported that in most cases parents made decisions and the children were only assigned tasks. They said there were no differences between boys' and girls' abilities to decide. They further stated that their chances to decide depended on the family, on the child's relationship with the parents and trust-worthiness. When parents involved them in decisions about daily chores, the children said they decided by weighing if the task was hard or easy, if it was important or not and how much time it would take.

The children also said that their involvement in decision-making in the health club was rare and depended on the teacher's habits. Only in Kiriri School did they say that decisions in the club were often made by children. As they explained, *they discuss among themselves and come up with a conclusion and tell the teacher; sometimes they also make decisions by voting* (b. K. No 25, No. 43). In the other two schools, the children said they were mostly instructed on what to do by the teacher. All the children emphasised that they wanted to be more involved in decision-making, e.g. on what they should do or what are taught. They explained that they felt happy, comfortable, satisfied and alive whenever they were given a chance to decide on what they wished to do. According to the children, whenever they were not allowed to say what they want: *you feel bad and like you are not satisfied or you get annoyed* (b./g. verif. No. 107). All the children agreed that the teacher should always make the final decisions, which they specified saying *that is how it will be* (g. K. No. 46). They justified this view with the explanation that they were in school under the teachers' care and that whenever they reached a decision among themselves, some pupils tended not to accept it.

The teachers mentioned examples in which they made decisions in collaboration with the children. They unanimously stated that children elected the chairpersons of their clubs and occasionally selected what they wanted to learn (diary 3:51, 4:12). One teacher, however, explained that if the children elected a child who is not disciplined as club chair, she would say to the children that they *need to choose another person, as this person is not good* (diary 4:30*)*. Most teachers underscored the need for children to make more decisions in the clubs (diary 3:50, 4:25). Nevertheless, as one teacher cautioned, *they are not used to deciding by themselves and may not be able to take good decisions* (diary 3:50). The same teacher said that children's right to

participate *will help them to make good decisions in future, e.g. about sex* (t. train. No. 103). Another teacher said that, *in the Kikuyu culture decision-making is for adults* (diary 4:25). Speaking along the same line, yet another teacher said that *Africans always say children what to do, but the mzungu*[10] *want to involve the children* (diary 2:60). (Results of PLA method described in Mahr-Slotawa 2020: Graphic 4).

As the children emphasised, children's involvement in decision-making is a key practice for the realisation of their right to participate. Children's considerations whenever their parents involved them in decisions showed their marked sense of responsibility. Adults, however, rarely involved them in decisions, as we found out in this research. The main reason given was that, in the Kikuyu tribe, decision-making is for adults (diary 3:54, 4:25). Consequently, a question remains if the parents and the teachers are actually willing to involve children in decision-making. Nevertheless, both the parents and the teachers gave examples of involving the children in decisions and clearly noted the advantages of this practice. The children themselves unanimously emphasised the desire to be further involved in decision-making within the club. The experience presented during the PAR fortunately showed that the teachers who acted as key persons were willing to change their attitudes so as to involve children more in decisions. Making decisions jointly with children is generally considered a sign of adults giving up control, a challenging practice that the next chapter discusses.

4.3.1.4 Power structures are negotiated between research facilitators and participants

Power relations are central in each AR. PAR seeks to adjust power relations to a more equal level (Greenwood et al. 2007) (chapter 2.8.3). In a social learning process the capacities to act describe an actor's power. These capacities exist as a feature of certain enduring social relations (Cervero et al. 1994 in Wildemeersch et al. 1998) (chapter 2.7.2). Different relationships influenced the children's capacity to act during the PAR. Dominating were children's and adults' hierarchical and respectable relationships. The research facilitators' immediate reactions to these relations was to deliberately allow children more and more control. In so doing, children's capacities to act increased. This was seen in their growing ability to make decisions and to act on their own (diary 8:14). Still, the research facilitators described their power relations to the children as being fairly unequal (chapter 3.8.8.3, 4.3.1.2). They gave instructions on what to do and had to push children to concentrate. The children also expected the research facilitators to take corrective actions on occasions when they felt distracted

[10] *Mzungu* is a term from the Bantu language for people of European descent (Wikipedia 2017).

by their peers (diary 8:15) (chapter 3.8.5). The constant negotiation of power structures between the children and the research facilitators describe Wildemeersch et al. (1998) as an essential feature of social learning processes.

I specify some of these negotiations that happened during the PAR by drawing on Foucault's conceptualisation of power (Foucault 1983) (chapter 2.7.2). First, actions that the children controlled consisted of the tasks that the research facilitators gave them at the end of each research session, e.g. small enquiries or teaching in communities and schools (Annex: Table 11) (chapter 3.5.2). Some of the children's groups also carried out the other actions almost independently in which they defined the changes they wished to achieve in their respective schools (chapter 4.3.4.3). Second, children and adults negotiated their capacities to act within local practices. The diversity of these practices of children negotiating their capacities to act was demonstrated in the PAR context in Kenya. In this setting, the majority of the adults who were involved in the PAR seemed to understand children as largely to be controlled and ordered about by adults (diary 3:54, 4:25) (chapter 4.3.5.1). Adults commonly caned children as a means of educating and disciplining them (chapter 3.8.8.4, 4.3.6.3). Au contraire, adults gave children total control over various cleaning and household tasks. This ambivalent situation of local practices distinguished children's capacity to act.

The realisation of the children's right to participate increases their capacity to act, as it happened during the PAR. The research facilitators gave up control to the children. Health club teachers would need to do the same and renegotiate their power structures with children. Only then would the children acquire the capacity to act as active players within their schools and communities. Adults giving up control to the children might be one of the greatest challenges in realising the children's right to participate in Kenyan primary schools. During the PAR, we came across promising examples of teachers giving up control, like in Kiriri where the teacher often gave children the leeway to run the club (diary 4:22).

4.3.2 Children's participation gives children a voice

An AR is based on open communication among the research participants. The participants' perspectives are the basis for open and reciprocal communication (chapter 4.3.1.2). In this chapter, I reflect on the PAR, based on two requirements for giving children a voice. These are derived from the considerations on young people's voice within collaborative educational research (Hadfield et al. 2001) (chapter 2.7.4). They are: that all participants contribute with their critical voice and that all participants' views need to be listened to.

4.3.2.1 All participants contribute with their critical voice

In each AR, the participants contribute with their voice to the creation of the arenas for communicative actions (Greenwood et al. 2007) (chapter 2.8.3). During the PAR the collaborative dialogue with the research facilitators enabled the children to express their voice within such arenas. Essential were the methods used by the research facilitators and their attitudes of learning from children's unique experiences, beliefs and opinions. Both of these factors provided the necessary space for the children to air their views. The agenda to which children's views contributed was the predetermined subject of realising their right to participate. The children partly set the agenda by themselves as they defined a common point of reference for their understanding of this right (chapter 4.3.1.2). Ideally, it would not have been the research team, but the children, who set the initial agenda on the subject to which children give a voice, as Percy-Smith (2014a) states (chapter 3.1, 3.8.8.1).

The dialogue between both the research facilitators and the children was primarily initiated by the research facilitators. Most of the children became increasingly engaged and more freely expressed their views (diary 8:17). Their opinions included what Hadfield et al. (2001) describe as the typology of critical voice. The children challenged the status quo concerning the realisation of their right. This included suggesting actions that influenced their power relations with adults, as is typical of the critical voice, e.g. adults do not ask children for opinions. The children clearly expressed the need to contribute their views in the club for the realisation of their right to participate.

The children finding space to give their views was important for the realisation of their right, as presented in chapter 4.2.1.1. They identified a relationship between their being able to freely share their views with exhibiting good behaviour, as described in chapter 4.2.2.2.

In addition, the children also said they felt disappointed whenever they were not asked to give their opinions, saying *when you sit down and remember what happened you get disappointed* (b./g. verif. No. 107). They observed that they were most likely to give their opinions *when the teacher is not in a bad mood*; at home or at neighbours' as *you cannot fear since you are used to* and with their fellow colleagues as they were also familiar with them (b./g. verif. No. 107). The children explained that before giving their views, they often weighed the following options: *if my opinion is good or bad*; *what can happen to me if I say my opinion, e.g. being laughed at or insulted* and if their opinions would be agreeable with others (b./g. verif. No. 107).

Children being able to give their views is crucial to the realisation of their right to participate in the health club. The club teachers, therefore, need to acknowledge children's views, a fact that the children emphasised as well (chapter 4.2.2.1). Teachers can do this by adopting the research facilitators' attitudes and approaches of choosing to learn from children's valuable experience. In this way, they would create space for children to contribute their opinions and ideas to the club. In such an environment the children would also raise their critical voice to suggest changes for the club. One such suggestion already noted was that teachers should support the children in freely expressing themselves. This could help ensure that the children's voices would not respond to adults' agenda, as is a common practice according to Hadfield et al. (2001) and Percy-Smith (2014a). The creation of such a space may take a while since, as already noted, in many sections of the community involved in the study, it is still culturally regarded as an act of rudeness and disrespect for children to freely express themselves (diary 4:18).

4.3.2.2 All participants' views need to be listened to

One core practice of each AR is that of insisting on hearing and taking seriously every local participant's voice (Chambers 1997) (chapter 2.8.3). One initial objective of AR was to facilitate opportunities for the voices of the oppressed to be heard (Freire 1993) (chapter 2.8.4). In AR projects in schools, Hadfield et al. (2001) also stress the need to get young people's voices heard (chapter 2.7.4). As such, local participants' views define the actions to achieve the targeted changes in an AR.

The PAR sought to gather children's views. The practices used by the research facilitators constantly brought children's voices to the foreground. The children defined actions to realise their right to participate and in this way determined how to achieve the PAR's desired changes. The practices applied by the research facilitators included the use of PLA methods that explicitly elicited children's voices (chapter 3.5.3.3). Other practices used included opening each session by verifying children's views from the previous session. They also sought children's opinions on organisational issues and collaboratively made final decisions (chapter 4.3.1.3). These practices helped to reduce the often described distance between professionals and children, so that we, as the research team, could learn about children's perspectives from the children themselves. The children's assessment of the PAR indicated that research facilitators' approaches gave them a sense of being listened to.

In their feedback on the research, the children said they liked being able to give their opinions. They emphasised that the PAR had given them a chance to *learn and discuss without fear or shyness* (g. M. No. 99). Some girls said that they enjoyed the use of PLA methods. Others stated that they did not like the fact that *some people felt that they were being laughed at and feared to say something* (g. K. No. 97).
Further commenting on their experiences during the research, the children said that they *enjoyed all the times* (b. M. No. 102). As one reason they mentioned that *we liked our teacher who taught us* (g. G. No. 98). They specified that these teachers[11] were good because they were not shy and gave them advice; the teachers showed loving and caring concern to the children. The children also said they enjoyed the PAR because whenever *they had a lesson and did not waste the time* (b. M. No. 102). They further indicated that they enjoyed the fact that they were taught new and good things. They said they wished the research could go on so that they could learn more, especially on their right to participate. (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 8 and 19).

Throughout the PAR, it was noted that the key persons and parents increasingly began to value their children's perspectives. Some parents insisted, for example, that they had to seek their children's approval and willingness to join the PAR before they could sign the consent forms (diary 2:55; par. K. No. 4). Similarly, at the end of the PAR the key persons suggested the need to obtain children's views on uncertainties that had come up on children's recommendations (diary 7:35). The children very clearly stated that one required change for them to realise their right was for adults to listen to their views.

The children's understanding of their right required that adults and the other children listened to their views, as presented in chapter 4.2.2.1. Another essential requirement for this rights' realisation was also that the children exhibit good behaviour so that adults could take their opinions seriously, as described in chapter 4.2.2.2.
The parents indirectly said that children's good behaviour influenced the parents' habit of listening to them. Most parents explained that they tended to take seriously the views of children who exhibited maturity. As an example, they explained that if a child did not want something they asked why. They explained they recognised their children's maturity through body changes, the ability to take up responsibilities independently and their comprehension ability. The parents explained that, for *boys, roles only change as you see them behaving more mature, not necessarily after circumcision*

[11] With teacher the children referred to the research facilitators.

(par. K. No. 104); s*ome children are mature enough to know what they want, so they are taken seriously* (par. M. No. 106).
The teachers expressed concern about possible protest *if the children give their views and they cannot be realised, e.g. providing a health club office* (t. train. No. 103). Nonetheless, they said that they appreciated the children's views. Listening to the children would help teachers to know how the learners think, e.g. about the changes that they desired to see in their schools (diary 7:34). They emphasised the need *to teach the children how to give their views properly* (t. train. No. 103). According to the teachers, it would be a risk for the children to express their views towards adults in a disrespectful manner.

For the realisation of children's right to participate it is important to listen to their views and take them seriously. The research facilitators' approaches focused on listening to the children's views, which the children highly appreciated, as their feedback on the research showed. Teachers could learn from these approaches. They could, for instance, teach on health issues by soliciting and discussing children's understanding and experience of those issues. They could also develop health-related activities based on children's ideas by giving due weight to their opinions. For children's views to be taken seriously, it seemed to be a precondition from the adults in the study's community that children be disciplined and behave well. This very fact was also of great importance to the children. They urged, therefore, teachers support children's participation by teaching them to behave well (chapter 4.2.2.2). The research facilitators confirmed the need to teach good behaviour, explaining that disciplined children are often favoured by teachers and that their views tend be listened to more than those of undisciplined children (diary 6:11).
Listening to children's views and, at the same time, establishing an authority is a great challenge for teachers, as Stoecklin (2013) correctly highlights this expected double-bind relationship. In the PAR, some teachers seemed to have found ways to tackle this challenge, e.g. in Kiriri the teacher said: *I liked the method and the research since I wanted to hear the views of the pupils about the school* (t. train. No. 103).

4.3.3 Children's participation takes place in real-life situations

The focus of AR on real-life situations comes from its originator Lewin (1946), who believed that knowledge should be created from problem-solving experiences of everyday situations (Greenwood et al. 2007). This chapter reflects on the focus on children's real-life situations during the PAR. The reflections concern three AR characteristics: first, that local expertise is central to the knowledge generation

process; second, that changes addressed are grounded in real-life situations, and, third, that active involvement in the change process is needed (chapter 2.8.3).

4.3.3.1 Local expertise is central to the knowledge generation process

The knowledge generated in AR is grounded in local realities (Herr et al. 2005) (chapter 2.8.3). The actors' realities in AR differ, based on their distinct living situations. The actors of the PAR were the children, the key persons and the parents as insiders, and then, the research facilitators and I as outsiders (Figure 5, chapter 3.4). All of these actors engaged in the dialectical learning process with their different experiences and knowledge. In so doing, they generated new local and professional knowledge on children's participation (chapter 4.3.1.2). Stipulating this knowledge generation process for the research facilitators, they based it on the affirmation that all participants have detailed, complex and valuable knowledge about their lives. They did not assert superiority of outsiders' or insiders' expertise, but combined both. They focused on the children's perspective on actions and on their creative answers and, in so doing, gave value to children's local knowledge. Local knowledge was for us the insiders' expertise, which is in line with the views of Greenwood et al. (2007) (chapter 2.8.3).

For the right of children to participate to be realised in health clubs, cooperative and fruitful knowledge generation processes on health issues need to take place. This would engender a more mutually edifying learning process and allow children to develop creative responses to issues at hand for their everyday school life, as Percy-Smith (2014a) urges on child participation (chapter 2.1.2). We reiterate that learning in such a process should be based on children's lived experiences. Teachers' knowledge should not assert superiority over children's expertise. It should rather infuse pride and value in children's knowledge. In such a process of mutual learning, children could, for instance easily develop relevant actions to respond to health issues.

4.3.3.2 Changes addressed are grounded in real-life situations

AR was originally designed to create knowledge from solving problems in real-life situations (Lewin 1946) (chapter 2.8.3). The knowledge generated by the PAR was grounded in the real-life experiences of the children. With the focus on children's real-life situations, the knowledge gained was useful and descriptive of the children's world and informative about how their world could be changed, as Argyris et al. (1985) outlines for AR (chapter 2.8.3). This focus meant that the desired social change for the PAR was deeply rooted in children's everyday setting of school health clubs. The knowledge generation process of the PAR took place in the schools and at the time

when the health clubs usually held their meetings (chapter 3.5). Different to our research, sessions in the health clubs were marked with the inequalities of uneven power relations between children and adults, and of children rarely given the right to participate. Settings characterised by such inequalities are typical for conducting a PAR (chapter 2.8.4). The research facilitators gained a better understanding of the children's daily lives by focusing their knowledge generation on children's real-life situations, such as the health clubs. The understanding they gained included learning how children's realised right to participate was already an inherent part of their daily family lives.

The children's initial understanding of their right to participate was related to their daily activities. They mentioned activities that revolved around the three groups of basic needs, chores and other activities. They identified their basic needs for sleep and food as sources of activities they were most commonly involved in. They gave reasons for *sleeping as they need to relax* and for *eating as they need energy to grow and be healthy* (b. K. No. 13, b. G. No. 26). Other basic needs, in which girls were more involved than boys, included bathing, going to the toilet, shoe polishing and combing hair. For the boys, brushing of teeth was important. All the children identified their daily chores as everyday involvements. The girls mentioned cooking, washing clothes, sweeping the house and fetching water. Their most common chore was washing dishes, a task that the boys stated as being rarely involved in as they *considered this to be a girl's chore* (b. K. No. 13). The boys' most common chore was cleaning the house and the cowshed. Other tasks they engaged in included feeding the cows, looking after animals, digging and fetching firewood, which, as they said, *they do on a daily basis* (b. K. No. 13). Some girls mentioned speaking out as one of their most commonly involved activity. They explained this view saying *because if someone is hungry, they have to speak out and they will be given food* (g. K. No. 10). Other activities that all the children said they were involved in included learning, coming to school, praying and playing. They also mentioned leisure activities of reading, writing, doing exercise, drawing, dancing and interacting with friends. These were, nonetheless, of less importance for them.

The parents described childhood as a time for educating children and giving them tasks as they come of age. As a child grows up, they argued, they *are given responsibilities like washing clothes, depending on their age* (par. M. No. 106). They specified children's role as helping parents, e.g. in the house through washing dishes, feeding the cows or reminding them of things to do. One mother explained that even then, when she had her own family, whenever *she goes to see her mother she is given*

chores and told what to do as if she were still a child (par. M. No. 106). (Results of PLA methods describes in Mahr-Slotawa 2020: Graphics 2, 3 and 21).

For the realisation of children's right to participation, teachers must strive to understand health issues in the context of children's real-life situations. This would entail listening to children's perspectives on health issues. The desirable health-related behaviour changes in this case would be rooted in children's real-life situations.

Important for the realisation of the children's right in the context of Kenyan school health clubs, the research facilitators' focus on children's real-life revealed that direct participation was already practiced in communities and families at different levels. Children's contributions to daily community and family lives were rooted in the understanding of childhood, as parents' perspectives on childhood indicated. As such, showing value for such daily contributions of children would be a great step towards realising their right. It would change teachers' attitudes towards children, enabling them to acknowledge children's existing action competence and foster a collaborative relation towards children. Various authors have described children's everyday contributions as informal realisation of their right to participate, especially for Non-European countries (e.g. Hart R. 2008, Thomas et al. 2010) (chapter 2.1.3, 2.7.5). In the health clubs, teachers could also support this right by teaching children to carry out their daily chores in a more health-promoting way. In this way, the desired behaviour changes would be linked to children's informal participation and be rooted in their everyday lives. This would be one example of a realised participation right grounded in children's real-life situations.

4.3.3.3 Active involvement in the change process is needed

For an AR process, the participants' active involvement is crucial. The AR focuses on issues of vital importance for participants and ensures that they benefit from it (Herr et al. 2005) (chapter 2.8.3).

The focus of the PAR on the realisation of the right of children to participate was certainly not an issue of crucial concern from the perspective of the children (diary 7:7). Some girls showed the perceived extraneousness of this subject by saying that *in places like Nairobi a child can give her opinion* (g. K. No. 40). The key persons, however, perceived the need to further realise this right. They explained that children *in the community feel like they do not have a right to participate, due to culture* (t. train. No. 103). Most children came to discover the benefit of realising this right as a result of their engagement in the PAR (chapter 4.3.1.2). This made them begin to appreciate the importance of and support the objective of the PAR (diary 5:57, 7:56; Memo 523 in

b./g. G. No. 54). There are, presumably, additional reasons for the children's active involvement in the PAR: first, they felt obliged to participate because they were chosen through the sample selection process (chapter 3.3.2). Second, they were curious to learn more about the PAR and, third, they were excited by the presence of the research facilitators and myself, the foreigner, in their school. Fourth, they expected to receive material rewards, which we made clear would not be forthcoming. Fifth, the children seemed to enjoy the research sessions once they got to know what they were all about. Indicators of their enjoyment were that a lot of the children joined the holiday sessions and parents described their excitement to the extent that *some came even without eating lunch so they are not late* (part. M. No. 106; diary 5:44).

The children's actual involvement in the PAR can be described in two different forms: as 'taking part in' and as 'having a part or share in something'. These two forms of involvement use Simovska (2007) to describe how participation is defined (chapter 2.7.1). The children's involvement in the sense of 'taking part in' differed among the three schools, as attested to by their varied attendance (chapter 3.8.2). In the case of 'having a part or share in something', the children were involved in the change process of realising their right to participate in the health clubs. Examples of this are: first, as part of the tasks that the research facilitators gave them at the end of each session, the children taught, examined or observed subjects relating to their participation in the community or school (chapter 3.5.2). Second, in each session, they increasingly and more actively voiced their opinions and ideas. Third, they began to express their views towards teachers or other people more freely. Fourth, they changed their behaviour, as even parents testified about *how they react with their friends who do something wrong; they tell them to stop* or they *offer to help when something needs to be done in the house* (par. K. No. 104) or *want to do what we gave them as tasks at home* (par. M. No. 106).

The children primarily understood their right to participate in the sense of 'taking part in'. Secondly, they spoke about it in the sense of 'having a part or share in something' related to improving their health situation (Memo 143 in g. M. No. 42).

The children constantly talked about the need to actively take part in the club when discussing issues on their right to participate, as shown in chapter 4.2.1.3. Referring to their understanding as 'having a part or share in something', they stated that this right means *that the health club will spread the healthy news in the school and community* (g. M. No. 42). The children envisaged themselves teaching other children about issues of health and their right to participate, including how to air their opinions.

For them, the right also meant they would be able *to come up with projects to help the school* (b. G. No. 44). In their health club, the children said they should teach other children. They described how they have the tasks of collecting and burning rubbish and collecting water to wash their hands. Some girls said they wanted to be more involved in *planting trees and we water them* (g. K. No. 52). At home they said they would teach their parents *to cook for us a balanced diet* (g. M. No. 12).

For the realisation of the children's right to participate in the club, the children said it is of vital importance that children actively take part. Similarly, the children's active involvement in the clubs' addressed change process is essential. Teachers should support the children's involvement described in this process. This would include supporting children to come up with their own health promotion projects and to be in charge of the relevant health activities. In this way, the children would actively take part in the club and also 'have a part or share in something', which is related to the form of genuine participation, which Simovska (2007) recommends (chapter 2.7.1). In line with her view of participation, the children's interest and enjoyment of the club and health-promoting activities is essential. The experiences in the PAR indicated ways in which their enjoyment can be achieved: first, teachers would need to ensure that children see how the club and health-promoting activities would benefit them. It is, for example, not clear whether or not the children enjoyed their usual task of cleaning up the school environments. Nonetheless, they identified some benefits from this task, as they often talked about keeping classrooms clean in order to bolster their ability to actively take part in clubs. Second, teachers could use what the children said they enjoyed in the PAR: to learn about a new health subject and incorporate elements of fun in the related health-promoting activities. Third, teachers need to learn from the research facilitators how to encourage children's views and take them seriously. The children particularly said they enjoyed this approach during the PAR (chapter 4.3.2.2).

4.3.4 Children's participation is action-focused

Actions constitute one of three elements that compose each AR along with research and participation. Actions are carried out in AR to alter the initial situation and to achieve practical social goals. They are also considered to be the only sensible way to generate and test new social knowledge (Greenwood et al. 2007) (chapter 2.8.3). Consequently, participants' action competence is of high importance for AR. This chapter reflects on children's action competence during the PAR and how this ability advances the realisation of their right. First, I reflect on how the action focus developed the children's already existing action competence. I then reflect on their ability based

on two aspects of Jensen et al.'s (1997) action competence concept: the participant's commitment is essential for actions and participants decide on solutions for the problem focused upon (chapter 2.7.6).

4.3.4.1 Existing action competence needs to be further developed

One objective of actions in AR is to increase the participants' self-management and their ability to control their own destinies (Greenwood et al. 2007) (chapter 2.8.3). Therefore, action competence of the participants determines the actions carried out. This was the case for the children during the PAR. They defined the actions for the two different action processes. Both aimed at further developing their action competence and, in this way, realising their right to participate (chapter 3.5.1). During the first action process of the PAR, the research facilitators guided the children in carrying out reflective and practical actions on the subject of their participation (chapter 4.3.1.1). In the small second AR process, each group of children was supposed to coordinate themselves to carry out self-defined actions to achieve their chosen changes at the school (chapter 3.5.1). In so doing, the children's right to participate was realised, depending on the action competence of each group, their capability to coordinate and act on their own. The following chapters present findings and reflections on this small AR. They emphasise enhancing children's existing action competence for the realisation of their right to participation. During the PAR, the children explicitly demonstrated a high level of action competence when they identified self-determined actions to carry out in order to realise their right to participation.

The priority in boys' and girls' understanding of their right was to carry out certain actions (chapter 4.2.1). This understanding included the children's very precisely described actions on how to help others as presented in chapter 4.2.1.4.

Regarding the described action of teaching others, the children said they experienced some difficulties. One difficulty was that their fellow children failed to listen and instead preferred engaging in games and laughter. They specified that *during break time they want to go and play and you are not able to make them sit down and listen to you* (b./g. verif. No. 107). Another difficulty mentioned by the children was that the subjects were too difficult to explain to others, e.g. children's right of participation.

The parents confirmed that, at times, the children taught them. They explained that *at times when children go somewhere and learn something they come home and share with the parents* (par. M. No. 106).

The understanding of the children's right to participate as being realised through children carrying out actions is highlighted by Percy-Smith (2014a) (chapter 2.7.1). The children themselves understood this right as carrying out specific actions (chapter 4.2.1). These actions included helping others through teaching, helping injured people, being role models and keeping the school clean (chapter 4.2.1.4). I concluded that the children were equipped with high levels of action competence (chapter 2.7.6). Health club teachers should take up children's stated actions and ensure that these actions remain part and parcel of the health clubs. In addition, they should support children to carry out other health-related activities. In this way, teachers would be able to acknowledge the children's existing action competence and also put it into practice and develop it further. In so doing, they would safeguard the realisation of the children's right of participation as the next chapter presents.

4.3.4.2 Participants' commitment is essential for actions

In AR, actions are designed to improve practices or address a social change (Greenwood et al. 2007) (chapter 2.8.3). Commitment by the participants is essential to implementing these actions. In relation to the action competence concept, the commitment to actions is made up of the participants' motivation and their driving force (Jensen et al. 1997) (chapter 2.7.6). The social learning model describes the driving force as need motivation. In this chapter, I reflect on children's commitment during the PAR based on their need motivation (Wildemeersch et al. 1998) (chapter 2.7.2). According to this model, the driving force for an action comes from the discrepancy between the initial conditions and the actions' objective. For the PAR, I noticed the discrepancy between children's actual participation in the health clubs and the anticipated realisation of their right to participate (chapter 4.3.1.1). My own and the research facilitators' driving force and thus, our need motivation for increased participation, was much higher than those of the children. At the beginning of the PAR, they did not see any need to increase their participation. This objective seemed rather abstract for them (diary 7:7) (chapter 4.3.3.3). In the social learning process, the children and research facilitators both developed and restructured their available resources. In so doing, they struck a balance between their diverse competences and needs and could, in this way, impact the PAR's objective, as Wildemeersch et al. (1998) point out. A result of this balance was that most children became aware of the discrepancy between the research objective and their currently rarely practiced participation. This raised their need motivation and ensured higher commitment in children's actions: they became more engaged in the PAR (diary 7:56), more proactive and

talkative (diary 8:17). They increasingly defined solutions for the problems discussed and referred more to themselves for changes to happen (diary 8:13). The need motivation increased, especially for the girls in Makutano (diary 5:16). This affirmed some of their actions, e.g. demand to be involved in development of school rules or to have their own club sessions (chapter 4.3.5.2). By contrast, children's motivation levels for their chosen changes for the school and health club were already high at the start of this small AR process (chapter 3.5.1, 4.3.4.1).

The boys and girls prioritised material needs as a change for their schools (Example 2: Figure 8, chapter 3.5.3.3). Of importance to them was having new school or health club uniforms, as they said, *to be easily identified as health club members* (b. K. No. 25). They all wanted a health club office and some boys cited the needed materials to improve the school compound, such as the classrooms, desks and better playing facilities. The girls wanted to change their own and other pupils' behaviour, saying *because everybody should have discipline* (g. K. No. 16). The comportment they mentioned included, for the school, not eating in class, being neat and obeying teachers and, for the club, to practice better hygiene and conducting more cleaning of classrooms and toilets. The boys at Makutano emphasised the need to stop getting caned by teachers *as we feel pain, we get marks and we get beaten on our feet,* as they said (b. M. No. 21). Organisational aspects that the children wanted to change included being provided with a meal at school, to having more time for games and, in Makutano, the boys wanted to learn drawing.

Based on the children's prioritisation, we, the research team, selected final changes to work on during the small AR (Example 2: Figure 8, chapter 3.5.3.3): Kiriri School boys: playing field and more time for playing; girls: behaviour; Gatuura School boys: discipline; girls: not to eat in class; Makutano School boys: drawing; girls: more time for playing.

Children's commitment to the actions is central if their right to participate is to be realised by actively engaging them in carrying out actions. Their commitment and, subsequently, their need motivation, could be increased by using various practices, as the PAR showed. First, health club teachers need to involve the children in defining the envisaged health-related changes. This would include specifying the objective of the health-promoting actions in cooperation with the children. Second, children's commitment to the actions could be increased by the growing cooperative relationship with the teachers. Third, children and teachers should restructure and develop their action competences through the social learning process. They could achieve a balance

of their diverse competences and needs, which enables both to positively influence their health situations. The children's commitment would grow thereby so that they would engage more proactively in health-related actions. Fourth, the children's enjoyment supports their commitment to carry out actions (chapter 4.3.3.3).

4.3.4.3 Participants identify solutions for the problem focused upon

The purpose of actions is to promote democratic social change, as the AR strategy defines (Greenwood et al. 2007). Actions are applied to precise situations and address the specific problem of the AR (chapter 2.8.3). In greater detail, actions should address solutions or even causes of the problem, in line with the action competence concept (Jensen et al. 1997) (chapter 2.7.6). What is essential is that the participants decide about the actions. AR cycles describe a process that encourages these joint decisions in planning and carrying out the specific actions (Herr et al. 2005) (chapter 2.8.3).

The research facilitators' work with the children during the second phase of the PAR can be described through four such steps of the AR cycles. The focus was on actions that the children defined as solutions for the neglect of their right to participation. The first step of the AR cycle describes the research facilitators' enablement of the children to reflect on their own role and situation. The children were able to define precise actions for the realisation of their right to participation as they gained further knowledge and skills (e.g. six summary models: Figure 7, chapter 3.5.3.3 and Annex: Figure 13). The research facilitators decided jointly with the children on actions to carry out, as described in the second step. Some of the actions carried out addressed children's undermined role, which we as the research team and the children's views, indirectly formulated (e.g. chapter 4.2.2.3), as one cause for their low participation, e.g. to decide together or teach each other. The research facilitators reflected jointly with the children on the actions they carried-out, which is what the AR cycle's third step describes, e.g. children's reflections on teaching (chapter 4.3.4.1). They jointly redefined some of their respective actions, which is what the fourth step describes (chapter 2.8.3). The children had an influential and active role in each step, as the research facilitators encouraged them to be the actors. Due to their active involvement in the action cycle, the children's action competence and their specific competence to realise their right to participation increased. Their increased competence was, for instance, seen in their self-reliance in defining solutions during the small AR on their chosen changes for the schools. The research facilitators' guidance of the children to define and carry out actions as such solutions, also followed the AR cycle's four steps. The children sought solutions to solve their chosen changes through the PLA method Problem Tree, which is what the

AR cycle's first step describes (Mahr-Slotawa 2020: Graphic 9 and 10). I present the defined solutions and the actions carried out by two of the six research groups.

One of the boys' groups prioritised a change on drawing more within schooling time (b. M. No. 27). As reasons, they said *to make people happy, so that our school can be known through advertising and to show others what they have drawn* (b. M. No. 27). They said that, in order for this change to happen, drawing materials would need to be provided and they would need to *have someone to teach them how to draw* (b. M. No. 71). Based on this specification, the boys suggested as a solution, that everybody should come with a pencil and *one boy will come with a razor, another with a rubber and one boy who knows how to draw to teach the others* (b. M. No. 71). They also expressed the need to convince other pupils and talk to the teachers to actually make drawings within the drawing lesson.

Out of their defined solutions, the boys carried out the following actions: each boy brought a pencil and some a rubber or a sharpener which they shared[12]. They drew about what they learned at the end of some of the research sessions. One boy who was more adept in drawing taught the others and they continued this exercise at home. All agreed that when *they finished drawing they can show the others* (b. M. No. 96).

One of the girls' groups prioritised a change on pupils' behaviour (g. K. No. 22). They specifically said that pupils should stop insulting, hitting, dirtying one another, making noise, eating other people's food and *cutting down trees and throwing papers* (g. K. No. 56). To achieve these changes, they suggested different solutions. For students who ate others' food, the children suggested that teachers *can tell this person to give you their food or they should carry lunch for you the following day* (g. K. No. 56); for pupils who make noise, teachers should punish them and *when someone insults another pupil they should be warned, if they do it often they should be beaten* (g. K. No. 56). The children also suggested that girls should not sneer or ignore others and *if a child cuts down a tree they should bring another from home and water it* (g. K. No. 56). Based on these solutions, the girls carried out actions that taught other pupils about the needed behaviour change. They wrote poems and drew posters which they planned to present at the weekly assembly or to hang up around the school's classrooms. One of these poems read: *I am teaching you about trees, I know the importance of trees. They help to attract the rain and we are saying that trees help us. Don't cut down trees without reasons* (g. K. No. 79). Speaking about the approaches they used to teach, one girl said that *if they saw someone doing something bad, they told him/her*

[12] The group of boys received a drawing book from the research facilitator.

or taught pupils *one by one as you see them* (g. K. No. 85). (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 9 and 10).

The small action cycle discussing the children's chosen changes for the schools demonstrates how their right to participate could be realised through the children's own actions. Health club teachers could learn from the research facilitators' practices and define health-related actions through a cooperative action cycle process with the children. In such a process, the following aspects would be important for teachers: First, they should understand the children as actors of the cycle. Second, they need to build on children's existing action competence and guide them in deciding on actions. The PLA method of the Problem Tree used could be helpful. Third, teachers should assist children in defining actions that address solutions for the targeted health problem or, ideally, the causes. Fourth, teachers would need to provide assistance to groups of children who would not yet be able to carry out actions independently, such as, e.g. the boys in Kiriri. They saw a need for an adult manager to organise them to carry out their planned actions (diary 5:55). This particular behaviour was described by the research facilitators as typical, since children were not used to carrying out self-defined actions to effect changes, but were used to adults telling them what to do. Despite this routine, children's actions achieved some of the changes they themselves wanted to see happen in their schools, e.g. one girls' group, talking about pupils' changed behaviour, said that *they are not late for school, listen to the teacher and do not speak in vernacular* (g. K. No. 91).

The cooperative action cycle would develop children's action competence and thereby help realise their right to participate. The question that remains explicitly within the context studied is whether or not teachers actually want children to gain action competence to carry out more self-directed actions.

4.3.5 Children's participation increases by granting them agency

Each AR process depends on the participants' agency. The reciprocal relation between participants and researchers aims to support the participants' actions, which, in turn, aim to achieve the defined social change (Greenwood et al. 2007) (chapter 2.8.3). In this chapter, I reflect on the participants' agency with a relational perspective on agency (Fuchs 2001) (chapter 2.7.6). I focus on the children's relationship to the research facilitators. I refer to variants and covariates that Fuchs (2001) describes as determiners of the amount of agency that children were attributed during the PAR. I reflect first on the variable of the discretion that the research facilitators gave to the children (participants). Second, I reflect on the approach taken by research facilitators

of interpreting the participants' behaviour. Third, I reflect on the covariate that participants surprised the research facilitators. The reflections demonstrate how children's right to participate is increasingly realised when they are granted greater agency.

4.3.5.1 Research facilitators give discretion to participants

One important characteristic of the AR design is that it gives greater discretion to participants (chapter 2.8.3). Discretion is one variable that distinguishes children's agency, as Fuchs (2001) describes (chapter 2.7.6). During the PAR, the research facilitators granted a great amount of discretion to the children. Their collaborative relationship and the sessions' permissive environment supported the action of giving discretion to the children. The children had room to operate and to experience themselves as important players. Two examples of practices applied that demonstrated this great discretion were the research facilitators' behaviour of supporting the children to make decisions or of taking actions in accordance with the children's own choices (chapter 4.3.1.3, 4.3.4.3). Therefore, each group of children selected, for instance, two representatives for the verification session through a self-determined process (diary 8:10) (chapter 3.7.1).

As a result of this high amount of discretion granted to the children, their actions showed increased intention. This correlation is based on Fuchs' (2001) description of intention as another variable of agency (chapter 2.7.6). Examples of actions, that showed the children's increased intention to have their right to participate realised, included the fact that they often expressed the desire to discuss among themselves (diary 5:16) (chapter 4.3.1.1). They were also very willing to give recommendations on how to realise this right in the clubs across the nation and primarily recommended actions that they themselves should do (interim results: Annex: Figure 14). Children's perspectives on their right showed their own emphasis on being granted more discretion, as revealed just below. In addition, the factors that influenced the discretion parents granted to their children were evident in children's and parents' understanding of childhood.

The children stated the need to be granted more discretion by adults when they described the meaning of their right to participate. They expressed a desire *to be in charge of something which they want to be involved in* (g. M. No. 48). The realisation of this right entailed *that children in the health club can decide the thing that they want to change in the school* (g. M. No. 48) and that the government would need to give them *money to do good things that concern us* (b. M. No. 51). Most children talked about having their own club sessions without the teacher. This would help them as *the*

teacher can know that they can participate even when he is not there (g. K. No. 40). The relational features that the children said should be changed between them and their teachers in order to realise their right also demonstrated their desire for greater discretion (chapter 4.2.2.3). They stressed that the two should make decisions together, that the children should talk to the teacher, discuss with him/her and agree on issues, e.g. on those things they want to change. As some children put it, *if you want to do something you should discuss with the teacher* (b. K. No. 43). They urged *the teacher to agree that you do the thing that you want to do* (g. M. No. 48).

The teachers expressed the need to grant more discretion to the children to realise their right. Some urged for further involvement of children in decision-making so that they *can freely decide what they want* (diary 3:51, 4:25). With this right realised, it would *not only be the teacher who says or decides things* (t. train. No. 103), as they said, but the children would also become more responsible. Teachers identified situations in which they granted discretion to children, such as peer-teaching, children discussing in groups or keeping the school environment clean. In Kiriri, the teacher reported that children mostly ran the club by themselves.

Both, the children and parents understood childhood as *a time when a child is told what to do* (par. M. No. 106*)*. The parents explained that they assigned daily tasks depending on children's age. According to these parents, older and more mature children are given more responsibilities to select tasks, e.g. washing their clothes (diary 3:55). The children also identified additional factors that determined whether or not parents would allow them to choose tasks on their own. These included: the family's habits, the child's relationship with parents and the child's trustworthiness (chapter 4.3.1.3). Tasks that the children said they *do of their own will included drinking water, preparing supper, playing, coming to school and sleeping* (g. M. No. 12). (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 15, 16, 20 and 21).

The children's right to participate in health clubs could be realised by teachers granting children a greater amount of discretion. The children also supported this view and said they desired greater discretion to manage their own things, to carry out their own projects or to hold club sessions on their own. Teachers talked primarily about involving children more in decisions. With such greater discretion, children's intention and, consequently, their agency would increase (Fuchs 2001) (chapter 2.7.6). It might be difficult to realise the expectation that all health clubs' teachers grant more discretion to children. Its realisation may take a long time to happen, and it is largely a question of the teacher's personality and willingness. Nevertheless, the teachers talked about

the different levels of discretion they granted to children. In addition, teachers said they had learned about methods to facilitate children's contribution to the school's overall responsibilities from the PAR (t. train. No. 103).

The PAR revealed various additional aspects, which could support health club teachers in the process of granting more agency to children. First, teachers need to build a collaborative relationship with the children (chapter 4.3.1.2). Second, they should ensure that club sessions are not repetitive, or supervise discipline, which was achieved during the PAR by fostering a more permissive learning environment. Third, the relationship between the teachers and the children should be characterised by mutual agreements, discussion and freedom for children to make decisions, as the children suggested. Fourth, teachers could allow the children to hold their own club sessions. This would include, as the children suggested, facilitating the children's ability to elect new club leaders. Fifth, teachers should decide, in collaboration with the club members, on the tasks for which the children are made responsible. The children showed high intention and responsibility for their current tasks of keeping the school environment and club room clean (diary 8:28). This seemed to be the result of teachers and parents granting discretion to them to conduct such tasks as part of their daily chores.

4.3.5.2 Research facilitators interpret participants' behaviour

An AR is based on the attribution of a 'rich inner life' to the participants. This 'rich inner life' refers to the internal or mental centre in humans (Fuchs 2001) (chapter 2.8.3, 2.7.6). Participants can only take an active part in an AR if researchers attribute to them those mental properties of thinking, imagining and deciding. During the PAR the research facilitators attributed this 'rich inner life' to the children. The research facilitators were, therefore, in a position to attribute more and more agency to them. Granting children more agency meant that the research facilitators increasingly interpreted instead of determining children's behaviour. They took up the position of the intentional stance, as Fuchs (2001) describes (chapter 2.7.6).

At the beginning of the PAR, the children were not used to being attributed a great amount of agency, so that the research facilitators often had to determine their behaviour. However, as the PAR progressed, the children increasingly began to contribute their own perspectives and decisions in the research sessions (diary 8:14). They started to enjoy giving recommendations on how to realise their right and to undertake some of their suggested actions (diary 8:13/17). Some children also got so used to the practice that they themselves began to make changes happen. As a result of attributing

increasing agency to the children, the research facilitators' determining role was increasingly replaced by an interpretative role. Children's own elaborations on their right showed how much they were used to adults determining their behaviour within their everyday networks at school. This behaviour seems to be rooted in the perspectives on childhood among the children and parents. Still, the children also specified situations and gave precise preconditions for the interpretative role of adults.

The children gave examples to describe teacher's determining role. They stated the difficulty in effecting the changes they needed as *we can say something, but it happens that parents or teachers do not want that thing and hence they do not support us* (b./g. verif. No. 107). Similarly, the girls in Makutano School talked about wanting to hold their own club sessions, b*ut teachers want to save time so won't allow children to have own sessions as it may take time* (g. M. No. 74). They described the teachers' role in the club, which included giving them instructions on what to do and formulating club rules. The children also identified situations in which teachers played an interpretative role, e.g., when *there were projects that they decided to do and did* (b./g. verif. No. 107). They recommended that they should *wash the club room even if you have not been told so that you can participate* (b. M. No. 84).

The children said that certain preconditions and behaviour must be in play to support situations in which teachers played a more interpretative role. They saw a need for a good leader, *a master who will lead us during the session* and a need to undertake projects by themselves (b. K. No. 94). The children said that keeping the club active without the teacher's presence would require disciplined management of noise, respect for one another and practising what they had been taught. They further stated they could hold discussions among themselves and with *the ones who understood when they were taught to teach others* (b./g. M. No. 55). They formulated as a club rule that *we should have a plan of that something we want to participate to before you participate* (b. K. No. 65).

The children and parents saw childhood as a stage in which they *need to be guided and taken care of*, so that adults' behaviour is rather deterministic *(*par. M. No. 106, par. K. No. 104). According to the children, adults are educated, have good behaviour and lots of knowledge and are able to make wise decisions, which they described as contrary to those features they attribute to the children. *A child does not know good from bad and thinks childish things only*, his mind is not mature, it does not have a lot of knowledge about life and cannot make wise decisions (g. G. No. 86, g. M. No. 87). Children and parents both emphasised that childhood is a time of respect. Some

children specified it as a time *to respect his/her parents and adults* (g. M. No. 87, b. M. No. 90). Some parents showed a less deterministic behaviour explaining that children are not always seen as people to be ordered about and to have no say. One parent stated that *children have a say if something is wrong* (part. M. No. 106). The children said parents' less deterministic behaviour depended on *the parent and the relationship with the child* (part. G. No. 105). (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 7, 15, 16, 20 and 21).

The realisation of children's right to participate presupposes an attribution of a 'rich inner life' to children. In the context of Kenya, health club teachers and parents attribute, on the one hand, a lot of moral properties to children when they assign them responsibility over various tasks. Such an interpretive behaviour of adults is rooted in the local understanding of childhood. In the next section, I recommend the need to further acknowledge children's accomplishment of such tasks.

On the other hand, the unanimous perspective on childhood showed that adults normally play a determining role in their children's actions. The children also expected this role from adults. Children and parents perceived childhood as a time to respect adults. Nevertheless, some parents held contrary opinions to the dominant perspective of children being there to be ordered about. These parents attributed a 'rich inner life' to children. Such attributions of adults need to be promoted for the realisation of children's right, e.g. reinforce teachers' interpretative role in such situations that the children described. Children also need to be encouraged to maintain the preconditions they identified to support teachers' interpretive role. In this way, teachers' interpretative role would be a continuous process during which they grant greater agency to the children in the same way as the research facilitators did during the PAR. The aim of this process would be to change teachers' relationship with the children, from determining their behaviour to interpreting it. In this way, the children would play a greater role in shaping and organising the club sessions. The children identified clear ideas on how they intend to organise themselves if teachers took the interpretative role. Nonetheless, such a relational change would be a great challenge to achieve within Kenya's hierarchical school system. Both the teachers and the learners would need to make adjustments to get used to this change. In light of this, it was noted during the PAR that children were quick to acquiesce to being attributed more agency.

4.3.5.3 Participants surprise research facilitators

In an AR process, the participants ideally show a great and increasing capacity to surprise the researchers. Surprises could be in form of actions that the participants carry out or words that they formulate. Both contribute to the attainment of the jointly defined objective of the AR (chapter 2.8.3). Such a capacity of the participants to surprise is another covariate of agency, as Fuchs (2001) describes (chapter 2.7.6).

Within the PAR process, the children's capacity to surprise the research team increased. Situations that surprised the research facilitators and myself included some of children's initiatives to teach others about what they had learned, their engagement in carrying out their weekly tasks to teach or to inquire on specific subjects that the research facilitators had given them at the end of every session (diary 5:56) (chapter 3.5.2). Some of the children's groups surprised us with their self-directed actions to achieve their chosen changes in their schools, e.g. girls in Makutano cleaned a field for use as a playground (g. M. No. 99). At the end of the PAR, we were surprised by the children's precise, diverse and practical recommendations on how their right could be realised (diary 7:28). We were also relieved that the children learned to talk about themselves undertaking actions, as they initially spoke mainly about parents, teachers or research facilitators acting to initiate changes, e.g. they recommended actions that they themselves should take to realise their right, defined actions they needed to carry out during the small AR process (diary 3:22/25, 5:56, 6:9, 7:15/28) (chapter 4.3.4.2). These surprises indicated the attribution that children had agency.

Children's increased capacity to surprise the research team during the PAR is interpreted as being a result of various factors that promote agency (Fuchs 2001) (chapter 2.7.6). The research facilitators' collaborative approach and relationship encouraged children's discretion and their individualism. Each child was seen as having specific abilities and was granted the faculties of originality, creativity and spontaneity. The diversity of the PAR did not allow any routine or repetitiveness to arise. The flexible character of each session and the methodology used helped the research facilitators to guide the children in discovering and inventing themselves. The small group size also contributed to children's agency. The children themselves identified specific behaviours and situations, all of which showed their capacity to surprise adults, hence their agency.

The children saw their right to participate *as being able to spread signs of health to school- and classmates* (g. M. No. 42). As they explained, *the community get healthy by watching what we do as health club members* (b./g. M. No. 55). The children, for

instance, said they would give First Aid to a person with a bleeding nose. Therefore, the children felt that this right would make them feel a part of the community. In regard to ensuring that every club member contributes, they suggested the need *to show those who are shy that they are important* (b. G. No. 89). As changes to the club level, they suggested their role could also be *to keep the school environment clean even if the other children won't* (g. K. No. 52) and *to practice how we can be involved in our daily activities, e.g. washing hands* (b./g. M. No. 55).

The children also showed their capacity to surprise through actions they suggested to ensure that their newly set up club rules were followed. They advised the need to teach these rules to the other members. According to the children, for those who do not follow the rules and *if someone does not understand the rules we help each other in understanding them* (b./g. G. No. 68). The tasks identified by the children for the home environment also demonstrated their capacity to surprise: one boy said that *he saw that their house was dirty and he decide to wipe it* and another reported that *he had decided to cut trees, because they did not have firewood* (b. G. No. 38).

The teachers also identified situations in which they attributed agency to children as a result of their capacity to surprise. The teacher in Kiriri said children often ran the club as they *know what is needed and they can also initiate changes by themselves* (diary 4:22). All the teachers said that children will gain a sense of ownership and become more active in the club through their realised right (chapter 4.3.1.2). In addition, this right *helps them to participate in a bigger group e.g. on community level*, as they develop the courage to express their opinions (t. train. No. 103). (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 1, 2, 3, 4 and 8).

Children's right to participate is realised if children's agency flourishes. The attribution of agency depends, on the one hand, on children's capacity to surprise. This capacity was demonstrated during the PAR and in the children's own views. Teachers should support this existing capability. As evidenced in the PAR, teachers can encourage this capacity by introducing flexible club sessions, using small group sizes and by developing collaborative relationships with the children. Such relational changes would inspire children to discover and to invent themselves. This is the experience that the children increasingly gained during the PAR and to which they need more exposure. Despite their described desire for increased agency, they are not used to initiating on their own accord, especially in relation to following their own will, since in most cases adults tell them what to do (diary 5:55, 7:27).

On the other hand, the attribution of agency depends on the locally prevailing perspective of childhood. From my own Western culture-inspired understanding, teachers and parents unconsciously attributed a high amount of agency to children. They self-reliably carried out tasks on a daily basis. In these situations, adults gave children great discretion and played the role of interpreters of their behaviour. A relational change was also observed between children and teachers in the examples teachers gave on how they attributed agency to children. For the realisation of children's participation right, such relational changes should include teachers paying attention to children's capacity to surprise them in various situations, e.g. their independent accomplishment of tasks.

4.3.6 Children's participation requires an institutional culture of participation

The institutional environment in which an AR takes place is of high importance for a fruitful research process (Greenwood et al. 2007). Based on the experience of the PAR, I identified three obligations for each institution that seeks to realise children's right to participate. First, learning arenas need to be created using suitable techniques; second, high motivation of facilitators is needed, and, third, zero risk for children needs to be guaranteed. The first chapter also presents children's view on what would need to change to bring about a culture of participation.

4.3.6.1 Learning arenas need to be created by using suitable techniques

The research techniques used in AR create learning arenas. These arenas constitute one of AR's core features. All social science research techniques could be applied, as long as they are set in a context that aligns the AR values of participative and democratic knowledge construction (Greenwood et al. 2007) (chapter 2.8.1).

Learning arenas were created during the PAR by applying FGI and PLA methods. My reasons for choosing these methods were that they encouraged children to actively contribute their views and supported the realisation of their right to participate (chapter 3.5.3). Mutual dialogue developed between the research facilitators and the children, during which children analysed their situations and formulated solutions to address problems (diary 8:16) (chapter 4.3.1.1). All of these are typical characteristics of PLA methods (chapter 3.5.3.3).

The PAR revealed four crucial requirements for using PLA methods. First, research facilitators need to have an attitude of wanting to learn from children. Second, they need to be well trained and supervised in the application of PLA methods. Third, the methods need to be applied in a child-focused way. Finally, the children need to

properly understand the methods used. The use of PLA methods also engendered a number of challenges (chapter 3.8.5). One challenge for the created learning arenas was that children insulted or undermined another when expressing their views (diary 6:13-14, 7:57-58). Some of them would, for example, harshly retort: *Why do you bother to say something or You do not look clean or Why do you say something?* (diary 6:13). The research facilitators and the children attributed these harsh comments to the fact that children often spoke ungrammatical Kiswahili or English (diary 6:13, 7:57). A few of the children did not seem to mind when others laughed at their comments; they went ahead and expressed their views undeterred, but the majority of children were intimidated by these comments (diary 7:57). The research facilitators dealt with these situations by encouraging all children to freely speak out their views. The children described being insulted as one major difficulty for the realisation of their right. This, among other difficulties, demonstrated what they perceived to be necessary for a culture of participation to be realised in their health clubs.

The children, especially the girls, emphasised that teachers and pupils insult them. They said that a culture of participation would involve teachers teaching without insulting pupils. The children should not need to fear the teacher when telling them *that you do not want him/her to insult you* (g. M. No. 74). The children further defined various aspects that would need to be changed for a culture of participation to be realised. They said that for them to freely take part in the club the other pupils needed to stop undermining them every time they said something and teachers need to stop undermining them when they made a mistake. The children also said that the adults and the other children would need to pay attention to them, which involved not joking about or mocking them or their views. Moreover, the children should be able to give their views, which implied that teachers needed to teach in such a way as to enable students to answer questions. The children said their views should be taken seriously; this is *because when someone gives his views and they are not given due weight you will think it is not good to say your views* (b. K. No. 75). They said that they should be allowed to make decisions and to work together. Moreover, as they work together, everyone would need to actively make contributions and not insult others. The children should also teach more people and not speak rudely when teaching. (Results of PLA method presented in Mahr-Slotawa 2020: Graphic 12).

The realisation of children's participation rights necessitates the creation of learning arenas. The children emphasised that such arenas were needed for a culture of participation to be realised when they talked about the need to be listened to, for their

views to be taken seriously, to work together and not to be insulted. Essentially, children's and teachers' habit of undermining others and their views needed to be eliminated to create learning arenas and, thereby, realise their right. The research facilitators also described this habit as a major challenge for the realisation of this right (diary 7:26/57). Health club teachers would need to overcome this routine and stop insulting children. They should encourage children who express their views and address those who laugh at others with strict admonitions, in the same way as the research facilitators dealt with children who insulted others during the PAR.

The creation of learning arenas would also require the use of suitable working techniques. FGI and PLA methods proved to be successful in the PAR. As such, their application is highly recommended. This is reinforced by the fact that some teachers enjoyed applying these methods (diary 3:8). Teachers could, for example, apply the Ranking Line (Annex: Figure 21a, 21b) and the Preference Ranking (Example 2: Figure 8, chapter 3.5.3.3) to define health subjects in cooperation with the children. They could use the Problem Tree (Mahr-Slotawa 2020: Graphics 9, 10) to define actions to address health issues. The use of PLA methods would require compliance with the four aspects described: teachers would have to be willing to learn from the children, to listen to them and to encourage their views; they would need to be well trained in the use of PLA methods and the methods used should be child-focused.

4.3.6.2 High motivation of facilitators is needed

Motivated and well-trained facilitators are crucial for AR. It is most likely that a highly engaged facilitator is also greatly motivated for AR. Jesus et al. (2005) describe this correlation and present teachers' professional engagement as an indicator of that motivation. Out of his integrated cognitive-motivational model, I use three variables to reflect on the research facilitators' and key persons' motivations during the PAR. These variables and their derived relations are that the goal value positively influences the professional engagement, that the intrinsic motivation influences the goal value, and that the efficacy expectations influence the intrinsic motivation (Jesus et al. 2005) (chapter 2.7.7).

The research facilitators' goal value to realise children's right to participate increased as they engaged in the PAR. The research facilitators' growing intrinsic motivation might have positively influenced their goal value. This rising motivation is assumed to be a result of the research facilitators' advanced efficacy expectations. The consolidated relations of the three variables are that their increased efficacy expectations led to their high intrinsic motivation and goal value. Their higher efficacy expectations

could be caused, first, by their profound experience in working with children and in a participatory way and, second, by the knowledge they gained on child participation.

For the realisation of the children's right to participate, lessons can be drawn from the just reflected motivation of the research facilitators. A high goal value to realise this right would be essential for health club teachers. Their intrinsic motivation influences this goal value. From our experience during the PAR, we identified four factors needed to support teachers' motivation. For the definition of these factors, I illustrate using the practices and behaviours of the only key person (health club teacher) in Kiriri School who showed genuine motivation to realise the children's right to participation (diary 4:25, 6:1, 7:35) (chapter 3.4.3, 3.8.4). First, he had a goal value for children's participation before the PAR, which was seen in his facilitation of the children's making decisions during club time (diary 4:21), electing their officials (diary 4:22) or running the club. His pre-existing goal value might have positively influenced his motivation (Memo 68 in g. M. No. 30). Second, his advanced efficacy expectations seemed to have contributed to his high intrinsic motivation. These high efficacy expectations could have been as a result of his familiarity with the children, as he had run the club for four years, and the knowledge he had gained on child participation in every PAR session. Third, the head teacher (gatekeeper) at Kiriri contributed to the teacher's motivation. He was highly engaged and showed that he was convinced of the need to realise the children's right to participation (diary 2:45/53) (chapter 3.2.3). Therefore, any school that genuinely seeks to realise the children's right to participate needs a head teacher who is convinced of the importance of children's participation (diary 2:56). Fourth, club teachers should consist of those who are open to new ideas, including children's participation (Pridmore 2000). I concluded that club teachers would most likely exhibit a higher goal value for the children's right to participation when all four factors are fulfilled. For instance, the Kiriri School teacher's increased motivation induced his higher goal value. One indicator for his higher goal value was his show of excitement as he explained to the children, after they had decided on where to meet, that that was an example of how their right could be realised (diary 4:3-4).

Teachers with a high goal value for realising the children's right to participation might be more willing to take into account children's recommendations on how the club should be organised to ensure the realisation of that right.

The children talked about organisational aspects and material needs that would need to be changed to ensure the realisation of their right to participate in the club, as presented in chapters 4.2.2.4 and 4.2.2.5.

4.3.6.3 Zero risk for participants' needs to be ensured

Each AR may entail certain risks for participants. Ethical considerations elaborated presumed risks for the participants of the PAR (chapter 3.8.8.4). One serious ethical concern witnessed during the PAR was the fact that some children were coerced, with threats of being caned by their teachers, to attend the sessions on time (Makutano School) or to attend sessions for which they were not selected (Kiriri School) (diary 4:18, 5:58; b. M. No. 61).

The research team had to carefully find ways to tackle these incidents. We feared that addressing them too directly could offend teachers or result in their feeling that their authority was being questioned (diary 3:41-42). Caning of children to discipline them is also deeply rooted in the Kenyan culture, as various people explained to me (diary 3:41, 5:38). We decided to address the incidents in three ways. First, I stated our concern about caning children when I talked about organisational issues with each key person. Second, during the key persons' training, we discussed the subject of caning, including its inhibiting effects on the realisation of their right (chapter 3.4.3.1). Third, the research facilitators paid attention to children's irritations (diary 5:59) and emphasised that this should not have happened (diary 5:18, 8:18). Most children who got caned still came to the sessions. The girls in Kiriri explained their attendance despite being caned saying *because when we come we learn many things* (b./g. verif. No. 107; diary 5:60). Nevertheless, some children stated that *they did not feel like coming to the research as others were beaten* (b./g. verif. No. 107). The research facilitator reported that the boys in Makutano became less active after they were caned (Memo 24 in b./g. M. No. 9). All the children talked about the need for teachers to stop beating, so that they could participate in their club in terms of their right.

According to the children, their right to participate involved that *they be handled as children and not to be beaten by anyone,* including their parents and teachers (g. G. No. 47). They stated that e*very child must have the right to not be beaten badly* (g. G. No. 41). They explained that being caned affected their participation because, *when you are beaten you do not give your views,* you get angry and fear to take part (b./g. verif. No. 107). Nevertheless, some girls recommended that children should be caned when they do not behave well. They suggested the need to warn them against insulting others and *if they do it often they should be beaten by the teacher (*g. K. No. 56) (chapter 4.3.4.3). Other girls said that *those who eats in class to be beaten* (g. G. No. 73). All the children were convinced that the adequate punishment for children who lack discipline or make mistakes, such as refusing to work, is caning (chapter

4.2.2.3). The other ways of punishing they suggested included *to talk to the child, to be told to go farming or digging* (b./g. verif. No. 107).

The parents clearly stated that caning children was necessary to discipline and educate them. They argued that the *child should be beaten at the exact point of doing something wrong* (part. M. No. 106). According to the parents, there was *a clear difference between children who are beaten and those who are not;* those who got beaten *do better in life* (part. M. No. 106). One parent stated that some parents warned their children first and that some children indeed heeded those warnings. Other ways of punishing children that the parents mentioned included engaging them in activities like farming, being forced to sleep outside, serving them tea with no sugar or denying lunch.

The teachers justified the cultural thinking behind caning by saying that *children develop a don't care attitude if you only talk with no beating* (t. train. No. 103). They testified that they themselves were caned when they grew up. They explained the general effect of caning that children associate pain with doing wrong. However, they stated that sometimes it is not necessary to cane children and they talked about the influence on children's participation as *they will fear* and *will not be free to talk to you* (t. train. No. 103). (Results of PLA methods presented in Figure 6, chapter 3.5.3.3 and Mahr-Slotawa 2020: Graphics 1, 15 and 16).

As the children also confessed, the realisation of children's right to participate is severely inhibited by the common practice or threat of caning. This practice is deeply rooted in the Kenyan culture, as the parents and teachers also affirmed. The realisation of children's right to participate requires a safe and protected space. Creating such a working environment is still a great challenge in Kenya. One starting point lies in teachers' admission that it is sometimes unnecessary to cane children. As the PAR showed, such topics and practices could be discussed during training. The practice of caning may have been reinforced by the fact that the teachers wanted to paint a good image of their school, especially as I was a foreigner working in cooperation with the Kenyan MoPHS and the GIZ (diary 4:19, 7:24) (chapter 3.4.3, 3.8.3).

Adults' caning of children could also have been provoked by an improved realisation of children's right to participation. Adults could take children's greater assertiveness as a mockery of their adult authority and, as a result, make the children subservient by caning (diary 5:28/60). Children expressed this clearly as a potential risk of realising their right.

The children spoke about a risk of giving their views at home as parents could punish them if they said something wrong. They said parents could insult them or *something bad can be done to you* (g. M. No. 81). As an example, the children said that if a child were to tell their neighbour that the outside of his house is dirty he could *call the dogs on you* (g. K. No. 79). At school, the risks of giving views, according to the children, was that *you are told to have said something wrong* or *we get beaten* (b. M. No. 84). They said teachers could insult them by saying *you are here to learn not to give opinions* (g. K. No. 79). On their part, the teachers said *that children should talk about their views towards adults with lot of humility and in moderate form. If they would talk forcefully they might be beaten* (diary 7:37). (Results of PLA methods described in Mahr-Slotawa 2020: Graphics 13 and 14).

Health club teachers and schools aiming to establish a culture of children's greater participation need to reduce the risks that this right entails. Teachers need to be aware that children will most likely become more active, talkative and feel freer to express their views if this right is realised. Teachers could, therefore, reduce the risks by involving parents in some club activities, so that the parents could also learn about the children's right to participation (diary 5:9/14). Finally, the children would need to learn that this right also requires that they always show respect for adults and to take their responsibilities seriously (diary 5:28).

4.4 Fourth part: Puzzle model on the realisation of children's right to participate, in accordance with AR principles

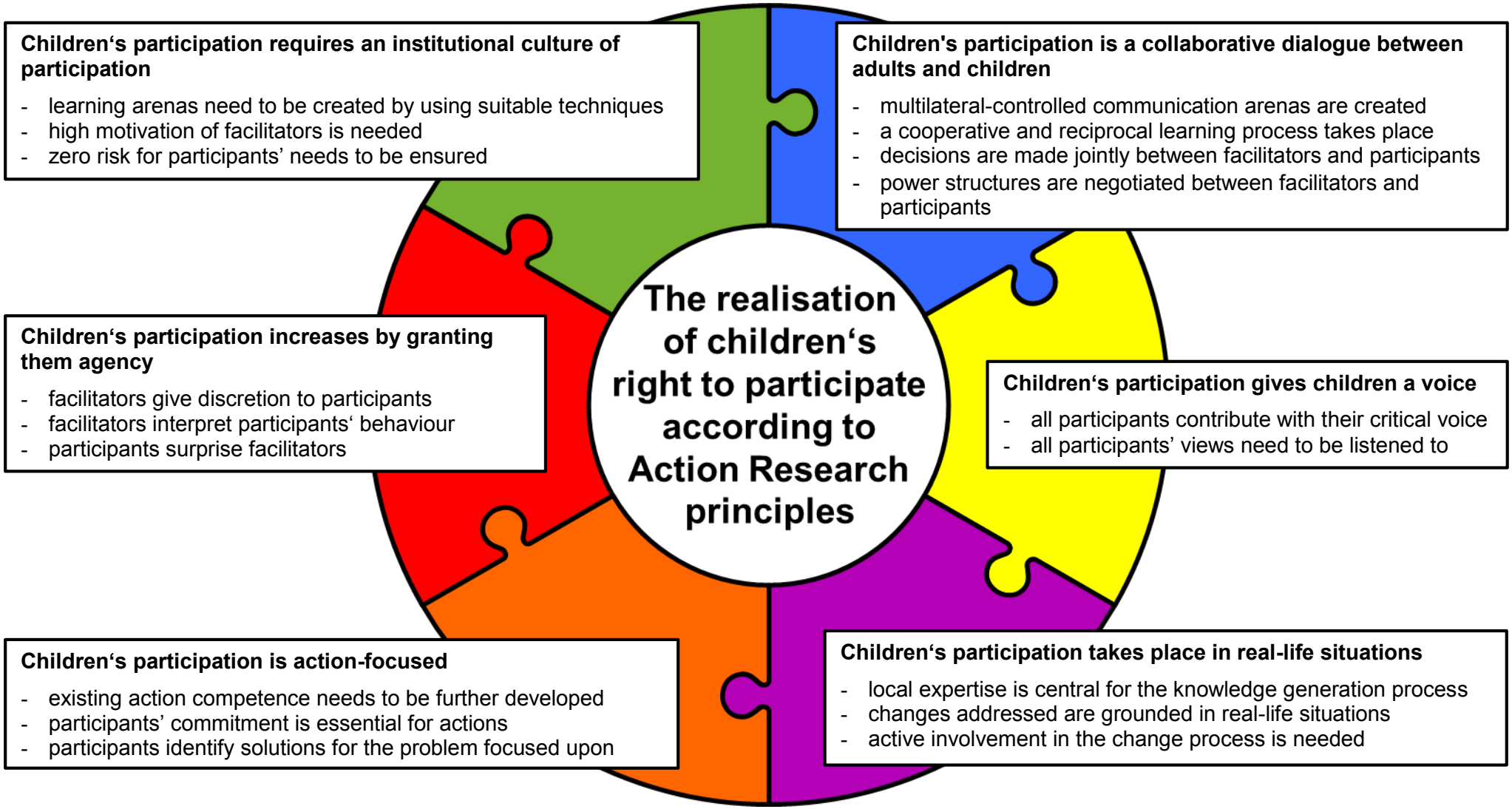
One overall objective of this research was to contribute to the theorisation of children's right to participate. Puzzle model 3 summarises my results' theoretical contributions (Figure 12). It recaps the results presented in chapters 4.2. and 4.3 and explains how the children's right can be realised in accordance with AR principles. Therefore, it contributes to the theory on children's participation with empirical results from the field, which Percy-Smith (2014a) advocates.

My results summed up in Puzzle model 3 comprise the six components that make up my understanding of the children's right to participation according to AR principles (Puzzle model 2: Figure 11, chapter 4.3). These six components structure my reflections on the PAR process and are, therefore, the titles of the chapters in the third part of my results (chapter 4.3.1-4.3.6). My process of formulating each of the six components out of children's views employs the same coloured puzzle pieces used in Puzzle model 1, Puzzle model 2 and Puzzle model 3 (chapter 3.7.3.1). These same

colours trace my generation of my results' theoretical input out of the children's views on their right and its realisation (chapter 4.2). The results summed up in Puzzle model 3 also constitute my defined AR characteristics. These characteristics guided my reflections on the PAR process and are, therefore, the titles of my sub-chapters in the third part of my results (e.g. 4.3.1.1-4.3.1.4) (chapter 4.3). To each of the six components in Puzzle model 3, I have added one white box that summarises these AR characteristics. The characteristics define how to implement each of the six components and, thereby, define how to realise children's right to participation. They identify specific behaviours, practices or institutional requirements needed among the adults seeking to realise this right. The focus is on the relationship between adults (research facilitators) and the children (participants). In Puzzle model 3, I use the term *facilitator* in order to further generalise my findings, whereas I use the term *research facilitator* in my reflections on the PAR and in each sub-chapters' title.

I now describe Puzzle model 3 (Figure 12) by examining one AR characteristic for each of the six components: a collaborative dialogue needs multilateral-controlled communication arenas; giving children a voice means that all participants contribute with their voice; taking place in real-life situations needs a knowledge generation process that is based on local expertise; action-focus requires that participants' action competence be further developed; granting children agency means facilitators must give discretion to participants, and an institutional culture of participation requires that suitable techniques be used (Figure 12). It is important to clarify that the realisation of children's right to participate in accordance with the AR principles, requires the implementation of all six components. My results delineate the need to facilitate their implementation by following each of my defined AR characteristics.

Figure 12: Puzzle model 3 on AR principles and characteristics describing the realisation of children's right to participate



4.4.1 Application of some defined AR characteristics to the subject of SRH

The research facilitators applied some of the results obtained on realising children's right to participate on the subject of SRH in the two last sessions (third empirical research objective) (chapter 2.6, 3.5.1). The objective was to gain insight into the possible realisation of this right, based on the approach identified in my results. The two sessions revealed that some of my defined AR characteristics were, indeed, attained. However, the possibility of realising the children's right, based on my results (Puzzle model 3: Figure 12, chapter 4.4), needs to be tested over a much longer period compared to the two sessions (chapter 5.8).

The insight I gained during the two sessions showed that, first, the nature of the relationships of the research facilitators and key persons with the children supported my defined component that children's participation is a collaborative dialogue between adults and children. Their relationship especially facilitated this component by applying the AR characteristic of a cooperative and reciprocal learning process. Second, by applied techniques for learning about SRH, the research facilitators and key persons fulfilled the AR characteristic of creating learning arenas by using suitable techniques, e.g. children discussed selected topics in groups, research facilitators and key persons complemented gained knowledge and children's questions in a collaborative conversation (Mahr-Slotawa 2020: Discussion group 1) (chapter 4.3.1.2). Third, the application of these two AR characteristics subsequently led to the fulfilment of the following of my other defined characteristics: multilateral-controlled communication took place in these arenas; the knowledge gained was generated, based on the children's local expertise; the research facilitators gave discretion to the children, and listened to their views. Fourth, the two sessions demonstrated how much the key persons and the children benefited from the implementation of all these AR characteristics and they almost realised children's right to participation, e.g. children liked to engage in group discussions and the key person and children in Kiriri School did not want to stop holding conversations, thus engaging in a cooperative and reciprocal learning process (diary 7:48-49; Memo 687/694 in b. K. No. 94).

The next section discusses my research results. At the end of this discussion, I provide final recommendations on the application of my approach to realise children's right of participation within school health promotion programmes. My final conclusion also emphasises the need to test the applicability of my approach globally and within the Kenyan CSHP.

5 Discussion

In this chapter, I discuss my research results. The results aimed to answer the following research question: *how can the children's right to participate within the CSHP in Kenya become a reality*? To answer this question, my PAR sought to investigate the social problem of neglecting children's right to participation within the CSHP. My research addressed three problem areas to examine this overall social problem: Is the children's right to participation, as defined in the UNCRC, appropriate for Kenya? Are the approaches applied to realise children's right to participation meaningful? Can theoretical frameworks of children's participation be applied within school health promotion in Kenya? (chapter 2.5). I structure my discussion along these three problem areas. The first area discusses predominantly the results of my first empirical objective and the second and third areas examine the results of my remaining second and third empirical objectives (chapter 2.6).

Prior to discussing these results, I reflect on my overall PAR design in the first section and, in the second section, I discuss my results' contributions to the practice of AR with children. Such contributions comprised a minor objective of my research (chapter 2.6.4). The third, fourth and fifth sections discuss the results of my main objectives structured along the above-mentioned three problem areas. Specifically, the third section examines my results on the appropriateness of realising the UNCRC's definition of children's right to participate in the context of Kenya. The fourth section discusses my results concerning the meaningfulness of approaches used to realise thus children's right. Finally, the fifth section discusses my results in relation to theoretical frameworks on children's right to participation and their application within the school health promotion context in Kenya. It elucidates my results' contributions to the theory of children's participation. The sixth section debates the possible generalisation of my research results. The seventh section gives the final recommendations for the realisation of the children's right within school health promotion programme and the eighth section draws my overall final conclusions of the study.

5.1 Final discussion of PAR design

In this chapter, I discuss my overall PAR design. This section is relatively short as it complements my reflections on the challenges and ethical concerns of my PAR (chapter 3.8). These reflections provided crucial background information to my results, which include an observation of the research facilitators' and, at times, key persons'

working approaches, including their behaviour, relations and practices, with the children (chapter 4.3). I now examine the overall quality of my PAR design, the biases that my PAR design might have brought to my results, what these mean for the internal and external validity of my results and my PAR's compliance with Greenwood et al.'s (2007) standards for credibility and validity in AR.

Concerning the overall quality, I defined five criteria for my PAR prior to its start. My foregoing reflections concluded that we, the research team, achieved three of the five criteria. We did not fully comply with the first, that the children's participation reach the levels of 'co-learning' and 'partial delegation of decision-making' during the PAR, and the fourth, that transformative changes bring a positive social change for children (chapter 3.2.1, 3.8.1). I presume that two changes in my PAR design would have enhanced the full attainment of these two quality criteria. The first of these changes would have been a longer research time frame than the 4½ months. Such a time frame would also have allowed the inclusion of my initially planned aspects in the PAR design: accompany PAR with a steering committee, involve children and key persons in the final data analysis (chapter 3.8.7), equip children better with knowledge and skills to realise their right. The second of the changes would have been the active involvement of all of the three key persons in the PAR. Their full involvement could have been better ensured by adjusting my PAR design to: ensure that they contributed to the preparation of the children's sessions; provide them with thorough training at the beginning of the PAR; clarify their roles, and ask them not to leave the children's sessions (chapter 3.8.4). Such changes in my PAR design would, in addition, have limited the effect of two contextual factors that prevented us from fully achieving the two quality criteria. Of these contextual factors, the first was that of the school system's strong hierarchy ensuring that most children and key persons would not be used to practicing children's participation, but instead would be used to the teachers' telling the children what to do. Consequently, the majority of the children were not accustomed to, e.g., reflecting on specific subjects and initiating actions (chapter 4.3.1.3, 4.3.4.2). The second contextual factor stemmed from some teachers' habit of caning children for wrongdoings, which decreased the children's motivation to exercise their right to participation (chapter 3.8.8.4, 4.3.6.3). The two changes I suggested in my PAR design, an extension of the PAR time frame and increasing the key persons' involvement, would have made the achievement of all five of my PAR quality criteria more likely and, thereby, increase its overall quality. The outcome of this improved quality

would have seen an increase in the ownership of the PAR among the key persons and the children, triggering social change and a greater sustainability of the changes realised, both of which comprised important ethical concerns of my PAR (chapter 3.8.8.1). An example could have been children running their own clubs and being supported by teachers, which other Kenyan NGOs, e.g. KAACR and CLAN report (diary 4:43, 5:30) (chapter 2.3.4).

Concerning the biases that my PAR design brought to my results, I first examined my own identity, then the biases that additional power dimensions brought to my research design and, third, the selection biases of my PAR design. The first bias, my own identity, influenced the internal validity of my PAR results. I called this bias 'critical subjectivity' (chapter 3.8.3). My identity was a German foreigner. I initiated the PAR and defined its social problem. I was an experienced Participatory Action Researcher, as I had specialised in participatory research with young people during my nine-year work experience in Europe and abroad, prior to this PAR. This professional knowledge certainly impacted and encouraged my conclusion to draw on AR principles when defining my results' approaches to realising the children's right to participation (chapter 2.6.3, 3.7.2.2). In this way, my identity affected my results in a positive way (Muhammad et al. 2015). However, my identity also brought various negative biases to my PAR, e.g. 'critical subjectivity'. I tried to reduce such biases by including the following aspects in my PAR design: employing two research facilitators who belonged to the same ethnic group as the children and were nearly fluent in the children's mother tongue (chapter 3.4.2); directing them from the background on how to conduct each session with the children (chapter 3.4.1); emphasising a constant collaborative working approach (chapter 4.3.1); applying methodological triangulation (Table 2, chapter 3.5); conducting verification sessions with the children (chapter 3.7.1), and presenting the children's views without my interpretations as part of my results (chapter 4.2). Despite these aspects, the internal validity of my results was still reduced by its stemming from the biases of my identity. It is, therefore, important to give examples in my research findings of cases, which indicate an increase in the results' internal validity during the PAR. For instance, the children and teachers became more interested in my defined social problem and keen to realise their right; moreover, most of the children grasped the notion of a children's right to participation (chapter 4.3.1.2). These findings also indicate that another bias of my results was reduced, that one caused by the research facilitators' reported challenge of translating the notion of children's participation

(chapter 3.8.5). While my findings indicate an increase in my results' internal validity during the PAR, my PAR design still did not completely assure my results' internal validity. I attribute this shortcoming, first, to various power dimensions in my design that influenced my results (next paragraph) and, second, to my choice to engage in data analysis without verifying my final results with the children and key persons in Kenya (chapter 3.8.1, 3.8.7). Therefore, my PAR design did not ensure my results did full justice to the children and key persons, e.g. key persons might be offended by my critically reflecting their roles (chapter 3.4.3, 3.8.4). This fact is not only one reason for the inability of my PAR design to completely achieve my results' internal validity, but it is also one of my PAR's ethical challenges (chapter 3.8.8.6).

The second bias that my PAR design brought to my results was caused by the power dimensions in the study. I group these dimensions into four. Most of these four power dimensions also comprised the ethical concerns of my research (chapter 3.8.8.1-3.8.8.6). Important is that all the four power dimensions reduced the internal validity of my results. The first power dimension was that my identity as an academic researcher, who initiated and managed the PAR, gave me the power to present and publish its results (chapter 3.8.8.3). The second dimension was that the PAR was partially politically motivated: I organised it in cooperation with the GIZ, StC and the Kenyan government ministries. Its gatekeepers were the District Education Officer and head teachers, it supported the CSHP implementation which is managed by the Kenyan government ministries (chapter 3.8.8.2). The third dimension was that the PAR was conducted within Kenya's hierarchically structured and managed schools. The fourth power dimension was that, during PAR sessions, children pattered or insulted their colleagues who gave wrong answers and teachers also caned some children (chapter 3.8.8.4, 4.3.6.1). An example of the biases that the first, second and third power dimensions might have brought to my results is to provoke children, parents and key persons to give answers they thought the research team expected. This bias applied most likely to the key persons, who seemed keen to paint a good image of their respective schools (chapter 3.8.3, 4.3.6.3). On their part, however, the children and parents were less likely to give seemingly expected answers, as group members corrected one another for wrong responses, which the research facilitators reported (diary 8:12). The four power dimensions also brought many other biases, leading to a reduction in the internal validity of my PAR results, e.g. sustainability (chapter 3.8.8.1, 3.8.8.3). Nonetheless, it is also important to note that the four power dimensions had

positive effects on my results, e.g. PAR's organisation in collaboration with the Kenyan ministries might have increased interest among the children and teachers.

The third bias that my PAR design brought to my results stemmed from the research sample selection. I group such selection biases into three, all of which contributed to a reduction in the external validity of my results. First, my voluntary selection procedure biased the research sample as only committed and interested children might have taken part in the research. This bias became even more relevant in the smaller children's groups attending the research sessions after the Christmas holiday break, as the research facilitators reported that only the more engaged children took part during this time (diary 6:11-12, 7:56, 8:14) (chapter 3.8.2). Second, the two key persons' practice of caning children for not attending sessions on time or for joining sessions even though they had not been selected, may have biased children's voluntary partaking in the PAR (chapter 3.8.2). Nevertheless, the research facilitators and I concluded that most of the children affected still joined the sessions voluntarily. Referring to their views when we discussed the issue of being caned most children stated that they still came to the sessions *because when we come we learn many things*; however, a few of them said that *they did not feel like coming to the research as others were beaten*, but they still came (b./g. verif. No. 107). Third, my inability to select the three sample schools based on my originally defined three criteria biased my PAR results (chapter 3.3.1, 3.8.2). I could only select the three schools based on their geographic location. Their data seemed similar as my data analysis revealed (chapter 3.7). A few differences in the schools unfolded during this analysis (Annex: Table 8). The difference in head teachers', key persons' and parents' commitment to the PAR resembles my original criteria of different school management styles. I often reflected upon such different commitments and drew conclusions for my results' external validity (chapter 3.4.3, 4.3.6.2). I conclude that my data would most likely have exhibited the same similarities if I could have selected the three schools in accordance with the other two of my originally defined criteria, namely ethnic groups and poverty level. I suppose that the three aforementioned selection biases of my research sample, only slightly reduced the external validity of my results (chapter 5.6).

I finalise the discussion on the overall quality of my PAR by applying Greenwood et al.'s (2007) standards for AR credibility. The difficulties I outlined to ensure the full validity and credibility of my results is a widely known experience in AR (Greenwood

et al. 2007, Kvale 1989, Reason et al. 2001). Greenwood et al. (2007) build their standards on the AR belief that knowledge generated and tested in practice is credible. By contrast, conventional social research believes that generalisation creates credibility. Based on Greenwood et al.'s (2007) standards, I conclude that my PAR partly complied with the first standard of workability, it complied with the second of making sense, and the third of trans-contextual credibility. I base my conclusions on three aspects of my results. First, workability was partly a given since various actions taken during the PAR contributed to solving its social problem of realising the children's right in the CSHP. However, some of these actions might not be sustained after the PAR (chapter 3.8.1). Second, making sense was attained since further meaning construction could not offer a better explanation to the children's ultimately recommended concepts on realising their right in the CSHP on a national scale. Third, trans-contextual credibility was also achieved in my data analysis as I included reflections on similarities and differences on contextual factors (chapter 4.3, 5.6).

5.2 Discussion of results on AR with the children

In this chapter, I discuss my results on AR with children, which was a minor research objective of my PAR (chapter 4.1). I modified Greenwood et al.'s (2007) Cogenerative AR model and adapted it for AR with children. I also defined the criteria for AR with children. These findings resulted from my experience in conducting the PAR with primary school children in Kenya. I propose that these results should be generalised for all AR with children, particularly with primary school children. Such results contribute to the very few studies on AR with children and to the field of Participatory Health Research (PHR) (ICPHR 2013).

My modification of Greenwood et al.'s (2007) Cogenerative AR model resulted in four, instead of the original two phases. The objectives of the initial two phases of the AR model changed, along with those I defined for my two newly inserted phases. The objective of the first additional phase was to learn from the children's views of and practices on the research subject. I underlined the fact that this phase could take quite long, especially when an outsider initiated the AR or the children are unfamiliar with the research subject. The objective of the third additional phase was to generate a mutual learning and reflection process with children. The result would be actions or a verbal resolution to solve the research problem, e.g. as the outcome of my PAR's third phase, children's recommendations resolved my research problem verbally (interim

results, Annex: Figure 14) (chapter 4.1.1). It is important to note that the collaborative adult-child relation envisioned in this third phase often takes a long time to build. Langhout et al. (2010) and Porter et al. (2010) report similar experiences in PAR with African children (chapter 2.8.5). My modified AR model for AR with children does not specify the parents' role, so it needs to be clarified in each context, e.g. actively involve them in the AR process.

The main advantage of the new four phases for AR with children is a clearly defined objective and expected result for each phase: first, gain insight into children's perspectives; second, clarify knowledge for defining a mutual research problem; third, generate a mutual learning and reflection process, and, fourth, implement and reflect actions (chapter 4.1.1). The clear objectives facilitate a better focus on the children's knowledge and their defined solutions. Such a focus reduces adult-children power imbalances and makes children's engagement in AR more likely. These advantages affirm how my modified AR model adapted the AR process for children. One disadvantage of my AR model's four phases could be the elongation of the AR process. Langhout et al. (2010) and Porter et al. (2010) reinforce this weakness; they argue that a PAR's long time frame might generate a clash with African children's households or school responsibilities (chapter 2.8.5). Nevertheless, I still propose a global application of my modified Cogenerative AR model with children. Literature describes AR as most applicable with children in the fields of education and programme implementation, which I propose as the two fields where my AR model should find the most likely use (chapter 2.8.2).

I combined my modified Cogenerative AR model with my seven defined criteria for AR with children (chapter 4.1.2). These criteria sought to make the AR process with children more enjoyable and sustainable. The criteria are: parents have to agree on children's involvement; parents to have a distinctive role in AR; new first AR phase is long; second AR phase includes fun elements for the children, room for mutual definition of the research problem; it guides children to solve the research problem; during overall AR, adults ensure children own actions, and learning and reflection arenas guarantee children's continued involvement during entire AR. With reference to Langhout et al.'s (2010) and Porter et al.'s (2010) recommendation in their critique on PAR's length, I now define an additional eight criteria to balance AR's time frame commitments with children's daily tasks. Other experience in AR with children in Namibia confirm my fifth defined criteria, stressing adults' guidance of children and children's

ability to develop solutions (Tubaundule 1999) (chapter 2.8.2). I propose that all eight of the criteria can be applied to AR with children in all contexts.

5.3 Discussing my results on the appropriateness for Kenya to realise the UNCRC's defined children's right of participation

In this section, I discuss the appropriateness of implementing the UNCRC's Article 12.1 in Kenya based on my defined first problem area. This area examines problematics on the appropriateness of Article 12.1 to the African and Kenyan contexts, making reference to the two dominant contradictory childhood perceptions documented by scholars: that of focusing on children's contributions to the household and community and that of focusing on their dependency and subservience by adults (chapter 2.5.1). I discuss the Article's appropriateness, in the first part, based on my results on the perceptions of childhood among the children, parents and teachers. In the second part, I discuss how my results on children's own understanding of their right confirm the broad understanding of Article 12.1 proposed by other scholars. I structure this second part, based on my results on children's understanding of their right as actions and as features identified to support its realisation. In the third part, I examine my reasons for my results' confirmation of my proposed appropriateness to realise UNCRC's Article 12.1 in Kenya. As such, my discussion responds to my first problem area by affirming that the realisation of this Article is appropriate in Kenya. Its appropriateness confirms the relevance of two arguments on which I built my research objective for Kenya: UNCRC's Article 12.1 has normative importance as a legally binding document in Kenya and its importance based on the New Sociology of Childhood (chapter 2.1.1, 2.2.1). In the fourth part, I add my results on the views of children and teachers confirming the third argument on which I built my research objective: the health-enhancing effects of the children's right to participation (chapter 2.2.2).

First, I discuss how my results on the perceptions of childhood compare with those described by other scholars concerning opposing childhood understandings in Africa (chapter 2.5.1). On the one hand, my results present childhood as a time of assigning children daily tasks to assist in the family. The parents said they assigned children tasks depending on gender and age, e.g. cooking, washing dishes (girls); digging, feeding the cows (boys). Parents and children concurred that childhood was a time of education and when children start to take up tasks (chapter 4.3.5.1). Okwany

et al. (2011) observe that this educational intention and assigning of tasks explain the understanding of childhood that emphasises children's involvement in daily family routines in Kenya and Uganda. Omolo (2015), citing Kenyatta (1938), affirms this educational intention of children among the Kikuyu tribe, saying children are trained during upbringing through collaborations with parents in activities that are pertinent to family welfare. On the other hand, my results identified childhood as a time when children are expected to show respect to adults. As some children stated, childhood is a time *to respect his/her parents and adults* (g. M. No. 87, b. M. No. 90) (chapter 4.3.5.2). The reviewed literature indicated this as the dominant perspective in Kenya, so that children are thought of as 'being there to be seen, but not to be heard' (diary 2:49) (UNICEF 2010). Such a perspective was illustrated by a few statements that emanated from my results. For instance, some boys stated that it was impossible to give their views in school as teachers considered such actions a sign of rudeness that invited punishment; one girl asserted, *teachers should stop telling them they are children, they cannot give opinions (*g. K. No. 46*)* (chapter 4.2.1.1). Moreover, some parents said children are supposed to be told what to do, and one parent indicated children taking part in decision-making was disrespectful *as it is like they want to act like adults* (par. M. No. 106) (chapter 4.3.1.3). The prevalence of these perspectives in my research area was reinforced by two teachers with the following statements: *in the Kikuyu culture decision-making is for adults* (diary 4:25) and *Africans always say children what to do, but the mzungu want to involve the children* (diary 2:60) (chapter 4.3.1.3). Despite such reported perspectives, most parents said they still listened to their children's views. On their part, the children clarified that being listened to or involved in decisions, e.g. on their daily chores, depended on the nature of relationships between the parents and children (chapter 4.3.1.3, 4.3.5.2).

Second, I discuss the conformity of my results with scholars' proposed broad understanding of the UNCRC's Article 12.1 (chapter 2.1.3). The children's own views on their right affirmed this broad understanding (chapter 4.2.1.1-4.2.2.5). They understood this right and its realisation as particular actions and as features that support its realisation (Puzzle model 1: Figure 10, chapter 4.2). The actions they emphasised included taking part actively in the club, carrying out their duties at home, engaging in community activities, helping and teaching others, teaching their friends to read as well as helping injured and older people in the community (chapter 4.2.1.1-4.2.1.4). They also suggested *to come up with projects to help the school* (b. G. No. 44) (chapter 4.3.3.3).

Initially, the children understood their right as their daily involvement in chores, e.g. washing dishes, cooking, fetching water, feeding cows and in basic needs, e.g. sleeping, bathing, shoe polishing (chapter 4.3.3.2). This initial understanding of their right also demonstrated the children's behavioural changes that some parents reported, such as: *they offer to help when something needs to be done in the house* (par. K. No. 104) or want to do what we gave them as tasks at home (par. M. No. 106) (chapter 4.3.3.3). Okwany et al. (2011) report Kenyan and Ugandan parents' perspectives on children's participation, in line with my results on children's initial views, emphasise their active contributions to the family and community (chapter 2.1.3). Many other authors have stressed such a broad understanding of children's right for Southern countries. Furthermore, current literature interprets this right globally in such a broad sense. My results accentuate Percy-Smith's (2014a) understanding of this right as a process of democratic and collaborative involvement in social processes in the context of everyday life (chapter 2.1.2). Examples of such involvements in my results were actions children described as understanding of their right, e.g. undertaking their daily tasks, teaching others or actions they described when adults took a more interpretative behaviour, e.g. *there were projects that they decided to do and did* (b./g. verif. No. 107) (chapter 4.3.5.2). Hence, my results greatly reinforce scholars' broad understanding of this right (chapter 4.3.5.1-4.3.5.3).

I consider my results on children's already existing agency as a crucial precondition for the appropriateness of such a broad understanding of Article 12.1 in Kenya. I highlight children's great agency in their accomplishment of their daily tasks at home and school and in their capacity to surprise the research team during the PAR (chapter 4.3.5.3). Children's existing agency also indicates their precisely defined preconditions that must be in play to support teachers to take a more interpretative role, e.g. need for a good leader among pupils, pupils to respect each other and *we should have a plan of that something we want to participate to before you participate* (b. K. No. 65). In line with my observations, one teacher pointed to the children's existing agency when he said that *they can initiate changes by themselves* (diary 4:22).

In conformity with what scholars urge on a broad understanding of this right, the children's views emphasised, in addition to actions, specific features that support the realisation (chapter 4.2.2.1-4.2.2.5). They stressed, as one of such feature, being able to give their views. This emphasis affirms what Okyere et al. (2014) stress: the Article's definition includes children expressing their views as well as activities they undertake

to take part in their communities (chapter 2.5.1). The children specified giving their views to include being able to give their opinions, speaking their mind, asking for clarifications and taking decisions, e.g. on what to learn (chapter 4.2.1.1). Another important feature for them was to hold discussions among themselves in order to agree, decide or learn to do things together. As a behavioural change needed for such discussions, they mentioned being listened to by colleagues, being taken seriously, being kind, loving and unselfish to fellows and never hurling insults (chapter 4.2.2.1, 4.2.2.2). Such perspectives of the children are included in other scholars' understanding of this right as a dialogical process. They elaborate such dialogue as a relational process of collaborative learning between adults and children (chapter 2.1.2). Three additional features of the children's views reaffirm their own understanding of this right as a dialogical process: a good relationship with teachers, teachers listen to them and the need for children to exhibit good behaviour (chapter 4.2.2.1-4.2.2.3). For a good relationship with the teachers they indicated the behavioural change needed for children was to respect teachers and teachers needed to listen to the child and *do the right things to the child* (b. G. No. 83). 'Right things' included teachers not assigning too much work to children, protecting them from abuse and teaching them without insulting, shouting or caning (chapter 4.2.2.3). Children's exhibiting good behaviour entails for them maintaining cleanliness, showing respect, listening to others, being obedient and using courteous language. They saw such behaviour as being supportive to children being given attention by adults (chapter 4.2.2.2). The children's following understanding of their right summarises their emphasis on a dialogical process: being able to hold discussions freely with the teachers on what they wished to do and to agree with them (chapter 4.2.2.3).

However, they urged that, in such discussions, teachers always make the final decisions, saying *that is how it will be* (g. K. No. 46) (chapter 4.3.1.3). Just like the children, the teachers and parents also mentioned aspects of a dialogical learning process in their understanding of this right. As one of the advantages of its realisation, the teachers pointed out that *it is not the teacher who says and decides things* (t. train. No. 103) (chapter 4.3.1.2). They advocated the need for them to teach children to express their views towards adults in a respectful manner, which the children also urged (chapter 4.2.2.2). Most parents saw the need to hold discussions with their children, e.g. ask why if they do not want something (chapter 4.3.2.2).

Third, I give five reasons to explain why I think my results affirm my proposed appropriateness to realise the UNCRC's Article 12.1, in the broad understanding of this right as urged by many scholars, in Kenya (chapter 2.5.1). First, my results confirm such a broad understanding of this right, which includes children giving their views and their activities contributing to their community. Second, my results confirm scholars' emphasis on the importance of realising this right in form of a dialogical learning process, which includes collaborative involvements (Hart R. 2008, Okyere et al. 2014, Percy-Smith 2014a). Other findings in Africa underscore my results' revealed appropriateness of this right's realisation as a dialogical process. For instance, adults in South Africa increasingly recognise children's views and nurture meaningful communication with them (Bray et al. 2008). Similarly, children in Ghana say they exchange their opinions more with their mothers than with their fathers, which they attribute to their relatively better relationship with their mothers (Twum-Danson 2010). Third, the dominant understanding of childhood in my results is that of a time of educating children by assigning them daily chores. In the sense of the rights' broad understanding, children, through such chores, contribute greatly to family and community routines. I see such contributions as one indicator for children's great amount of existing agency. Fourth, this perception of childhood confirms the practice of children's participation to be deeply rooted in the Kenyan culture. Such grounding in the form of children's community contributions has also been documented by Okwany et al. (2011) in Kenyan and Ugandan contexts. Fifth, the scattered statements in my results regarding conceptions of childhood that hamper the realisation of the rights constitute a challenge, although they do not put its appropriateness into question. My overarching results included adults seeing the need to listen to children's views, to involve them in decisions and teachers demonstrating a changed attitude towards children, arising out of the knowledge and skills they gained in realising Article 12.1, e.g. key persons increasingly sought children's opinions or allowed children to make more decisions in clubs (diary 3:50, 4:25) (chapter 4.3.2.2, 4.3.6.2).

I conclude, from my five arguments and based on my results that the realisation of the UNCRC's defined right to participate is appropriate to be implemented in Kenya. Its appropriateness affirms one of the three arguments that I used for my research objective to realise children's right: the UNCRC's Article's 12.1's normative importance. My second argument, the New Sociology of Childhood, reinforces my results in the one understanding of childhood describing children's expected contributions to the

family and community lives which underscores their agency. My results also affirm the third argument I used, namely the health-enhancing effects of children's right to participation, which I discuss in the next section.

Fourth, I discuss the results that affirmed this third argument I used for my research objective. The perception by the children and the teachers of children's right to participate touched on the three areas of advantages that scholars describe as the health-enhancing effects of children's realised right (chapter 2.2.2). The first area is that it improves children's well-being by enhancing their individual health resources. In my results, the children expressed this effect as feeling happy, comfortable, satisfied and alive whenever they were given a chance to decide on what they wished to do. They described the feelings they experienced when they were denied a chance to speak their mind: *to feel bad and like you are not satisfied* or *when you sit down and remember what happened you get disappointed* (b./g. verif. No. 107) (chapter 4.3.1.3, 4.3.2.1). On this first area of health-enhancing effects, the teachers stated that *this right will lead to a sense of ownership of the club; it will help the children to make good decisions in future, e.g. about sex* and *help them to participate in a bigger group, e.g. on community level* (t. train. No. 103) (chapter 4.3.1.3, 4.3.5.3). The second area was that the realisation of children's right improves children's education quality. On this issue, the children emphasised that for the realisation of their right, they have to take part actively in the club (chapter 4.2.1.3). The teachers also stated that *participation in the health club is important, because matters of health require group work to be understood well* (chapter 4.3.1.1). The third area consisted of the benefit of this right to adults and community. The children expressed this benefit as *the health club will spread the healthy news in the school and community* and *be able to spread signs of health to schoolmates* (g. M. No. 42), *the community get healthy by watching what we do as health club members* (b./g. M. No. 55) and they teach other children on health issues (chapter 4.3.3.3, 4.3.5.3). The teachers expressed their appreciation of the children's views as this helps them to know how children think, e.g. their desired changes in schools (chapter 4.3.2.2).

I conclude that my results reinforce the three arguments I used for my research objective of realising children's participation right within the CSHP in Kenya. This conformity supports my proposed appropriateness of the UNCRC's Article 12.1 for Kenya. I also see its appropriateness being reinforced by my results, indicating the children's own desire for the realisation of their participation in the sense of their

right, e.g. the bad feelings they described when they were denied the possibility to air their views. My results confirmed those of many scholars who urged a broad understanding of Article 12.1, which is essential for my proposed appropriateness for Kenya. Therefore, my responses to the first problem area I defined for my research stress the importance of realising the children's right in Kenya by facilitating their expressing their views and contributing to community activities.

5.4 Discussing my results on the meaningfulness of approaches to realise the children's right to participation

In this chapter, I discuss the meaningfulness of the approaches to realise children's participation right, identified in my results. This discussion responds to my second defined problem area. This area portrays the gap between this right's definition in the CSHP's policy and its actual realisation in Kenyan primary schools, which I observed to be an effect of what other scholars have described as a distinct lack of approaches to children's participation (chapter 2.5.2). Consequently, my discussion refers to the meaningfulness of my approaches to realise children's right to participate, primarily in the CSHP in Kenya. However, most of my arguments also point to its meaningfulness in other contexts, e.g. Africa as a whole.

The first part of my discussion highlights my findings on already existing fora that practice children's right to participation in the CSHP. I intend to reinforce the gap I observed between reality and the CSHP's policy's definition of this right as *school children shall be allowed to actively participate in all fora to express their opinions in matters affecting their health and education* (MoPHS/MoE 2009a, p. 25). The second and third parts of my discussion elucidate my arguments for the ability of my results to respond to what other scholars describe as the two main failures of the current approaches to children's participation: the second part is its potential to target the wider spectrum of activities characterising children's everyday lives and the third part is its potential to provide spaces for children's and adults' dialogue and social learning. The fourth part discusses the meaningfulness of my approaches in relation to support implementing political regulations and incorporating existing initiatives of child participation in Kenya. From my discussion, I conclude that I expect my approach to reduce the gap between law and practice in realising the children's right within the CSHP. It aims to achieve this by facilitating children's participation in all fora of the CSHP, while understanding this right in its broad sense.

Now I examine my results on fora that already practice children's participation right within the CSHP. This further enunciates the gap I observed between CSHP's policy and the realisation of this right in health clubs in Kenyan primary schools (chapter 2.3.2). The children hint that the realisation of their right was indicated by the presence of fora to hold discussions and to agree or make decisions. However, only the children in Kiriri School reported that their club teacher took their decisions seriously (chapter 4.2.1.2, 4.2.2.1). The children talked about other fora for practising their right in the clubs: teaching other children, taking on tasks of burning, collecting rubbish or fetching water to wash hands (chapter 4.3.3.3). The forum in which the teachers said children participated within the clubs was that of selecting their chairperson. Nevertheless, one teacher said that if the children elected a child who is not disciplined as club chair she would tell them they *need to choose another person, as this person is not good* (diary 4:30*)* (chapter 4.3.1.3). The teacher from Kiriri School said he facilitated a forum for children to run the health club by themselves. This was an exceptionally positive example of children's right of participation in practice within the CSHP. I interpreted this teacher's practice as being founded in his high goal value for children's participation, e.g. he said they *know what is needed and they can also initiate changes by themselves* (diary 4:22*)* (chapter 4.3.1.3, 4.3.5.3). My findings on the gap between the CSHP's law and practice affirm what its pilot phase in 2009 revealed: The fora defined in the CSHP guidelines for pupils' representatives to be part of each school's health committee responsible for contributing to Action Plan development were missing. The fora that reports indicated as signs of realisation of children's participation in the CSHP included children's parliaments and activities to monitor schools' hygiene (chapter 2.3.2).

In this second part, I elucidate five arguments that demonstrate the response of my approach to one critique of scholars on the meaningfulness of current approaches to children's participation: the failure to focus on children's wider spectrum of activities characterising their everyday lives (chapter 2.5.2). My first argument for the meaningfulness of my approach is that it builds exactly on such everyday activities. The children understood their right predominantly as their tasks contributing to the community and family lives and as actions that are part of their daily lives (chapter 4.2.1, 4.3.3.2). Based on children's understanding, my approach prioritised children's actions for realising their right and interpreted my research findings by drawing on AR principles. Three of the six components in my final puzzle model summarise the children's focus

on realising their right through actions within their daily lives (Puzzle model 3: Figure 12, chapter 4.4): children's participation takes place in real-life situations; it is action-focused, and increases by granting them agency. My second argument for the meaningfulness of my approach is that the behaviour and practices (AR characteristics) it defines for facilitating these three components aim to support children's daily activities: children's participation takes place in real-life situations, which acknowledges their expertise, grounds changes addressed in real-life situations and ensures their active involvement in the change process. Children's learning in health clubs would, e.g. be based on their everyday lived experiences (chapter 4.3.3.1); children's participation is action-focused, which promotes their existing action competence, e.g. carrying out daily tasks, ensures their commitment to actions and identifies actions as solutions for the focused problem, e.g. teaching others (chapter 4.3.4.1); children's participation increases by granting them agency, which gives them discretion, interprets their behaviour instead of determining it and promotes children to surprise facilitators. My third argument for the meaningfulness of my approach is that all the just listed behaviours and practices are grounded in my findings' portrayal of children's realised right to participation as already being part of their daily lives, e.g. adults' engagement with them during daily tasks or responsibilities in clubs (chapter 4.3.5.1). My approach acknowledges and supports these natural ways of children's engagement, learning and acting in their environments, which Percy-Smith (2014a) urges for meaningful approaches to children's participation. My fourth argument is that my approach's focus on real-life situations, actions and agency is in line with one side of the locally prevailing notion of childhood portrayed in my findings: that of emphasising children's daily tasks and contributions to family and community lives, which entails a focus on real-life situations, actions and agency (chapter 5.3). My fifth argument for the meaningfulness of my approach is that its grounding and enhancement of local practices of children's participation promotes their great levels of agency. These local ways of participation naturally grant great amounts of agency to children and my approach fosters it. Recent literature also advocates for children's greater agency for realising children's participation (chapter 2.7.5, 4.3.5.3).

In this third part, I elucidate three arguments to illustrate the response of my approach to another critique by scholars on the meaningfulness of current approaches to children's participation: the failure to provide spaces for dialogue and social learning between children and adults (chapter 2.5.2). My first argument for the meaningfulness

of my approach is that it defines exactly such dialogical spaces that should be facilitated to realise this right. Two of the six components of my final puzzle model seek to create these spaces (Puzzle model 3: Figure 12, chapter 4.4): children's participation is a collaborative dialogue between adults and children and it gives them a voice. My second argument for the meaningfulness of my approach is that this puzzle model's defined behaviour and practices (AR characteristics) to implement these two components create such spaces: for a collaborative dialogue, it suggests the need to create multilateral-controlled communication arenas, that a cooperative learning process take place, making decisions jointly and negotiating power structures. Club teachers would, in such arenas, engage in social learning processes with children, at the same time giving up control and acknowledging the children's expertise (chapter 4.3.1.1-4.3.1.4); to give children a voice, it proposes that adults need to enable all children to contribute with their critical voice and listen to all of their views. Club teachers would, e.g. develop health-related actions collaboratively with the children, thereby giving due weight to children's opinions (chapter 4.3.2.1-4.3.2.2). My third argument is that my approaches' emphasis on a mutual social learning process promotes such dialogical spaces. The process involves children in developing creative responses to issues at hand and implements those responses with them as actors being granted agency. It responds, therefore, to scholars' criticism that adults make the final decisions on actions, instead of consulting the children (chapter 2.5.2).

I argue, in the fourth part, for the meaningfulness of my approach to realise children's participation, based on its support of implementation of national and international regulations, to decreasing Ndeiya's development challenges and to incorporating existing initiatives for children's participation in Kenya. I structure my arguments into the three levels of policy, school and community, referring to my presentation of Kenyan initiatives on children's participation (chapter 2.3.4). On the national policy level, my approach helps the realisation to fulfil several child-related policies and the Guidelines for Child Participation in Kenya, which further affirm the government's great ambition for this right's implementation (chapter 2.4.1). On Ndeiya's administrative level, my approach could potentially advance children's personal resources as well as reduce their vulnerability to the development challenges of poverty, low secondary school enrolment and insecurity. In addition, children's advanced personal resources reinforce health-enhancing effects for children (chapter 2.4.2). On the international policy level, my approach focuses exactly on GIZ's recommended areas for partner

countries seeking to realise children's participation: school environment, health and education sector (chapter 2.4.3). In my approach pupils determined the process of improving health for themselves and their community's, which is what WHO's HPS Initiative advocates. My approach could, for instance, support health club teachers in developing Action Plans to implement the CSHP jointly with children (chapter 2.3.2). On the school level, my approach predominantly sought to realise children's participation right in health clubs, where the CSHP was being implemented. Most of the already existing initiatives seeking to realise this right in Kenya are also implemented in schools. My approach could well integrate such initiatives, thus increasing their meaningfulness, e.g. schools' councils, parliaments. The meaningfulness of my approach also stems from its ability to act against the challenge of the ad hoc promotion of children's participation practiced in Kenya, which an NGO representative criticised to me. This ability arises due to its focus on collaborative dialogue between children and adults, including their already practiced dialogical ways, e.g. teacher-children, child to child discussion (chapter 2.3.4). On the community level, my approach is founded on and seeks to boost local practices of children's participation, such as their daily tasks or health-related community activities (chapter 4.3.3.3).

My discussion makes three lines of argument for the meaningfulness of my approach to the realisation of children's participation right in the CSHP and beyond. Based on my arguments, I conclude that the implementation of my approach would help to reduce the gap I observed between the CSHP's law and its practice on the realisation of this right. I see its meaningfulness not being constrained by the barriers I describe for its application in Kenyan primary schools in the next section. However, I stress the prerequisites to include drawing on my reported experiences in overcoming such barriers, finding new and appropriate ways to address such barriers cooperatively with the implementing teachers and realising children's right in the broad sense envisaged by my approach. Referring to the CSHP policy, my approach would realise the children's right to participation in such a broad sense by promoting its fora of dialogical spaces and the children's daily health-improving actions. Examples could be dialogues of their own negotiations or discussions, actions to teach others or to applying First Aid, which all the children stressed for the realisation of their right of participation (chapter 4.3.1.1, 4.3.4.1).

5.5 Discussing my contribution to theoretical frameworks on children's participation right in school health promotion in Kenya

In this chapter I discuss the contribution of my results to theoretical frameworks on children's participation. It examines how my results respond to my third research problem: Can theoretical frameworks on children's participation be applied within school health promotion in Kenya? I discuss my response along the two strands of arguments I defined for the theoretical contributions of my results.

The first section elaborates my results' response to my first strand, which was that very few theoretical frameworks on children's participation have been developed out of field practices in African schools. The theoretical contributions of my results build exactly on such practices: on my field experiences in Kenyan primary schools. I elaborate such contributions by comparing my results with current theories on children's participation, which are structured along the three sections I used to describe such frameworks: those emphasising community contributions and a dialogical process; those emphasising a dialogical process, and those emphasising community contributions (chapter 2.7.1, 2.7.3, 2.7.5). Each of these sections explains how my approach agrees with and complements such frameworks. My results agree with those frameworks that advocate for the realisation of children's participation as a dialogical process and actions, such as children's community contributions and as a relational change between children and adult. Moreover, my approach complements existing frameworks by defining six components and for each of these components clearly structured behaviours and practices needed to realise the children's right to participate. My approach summarises a final puzzle model (Puzzle model 3: Figure 12, chapter 4.4). I conclude my first section with six arguments in answer to my third problem area: the theoretical frameworks on children's participation I referred to in developing my approach can be applied in health promotion in Kenya's schools.

My second section elaborates my results on the three groups of challenges I experienced during my PAR, which I defined as my results' second strand: Western viewpoints dominate frameworks; public systems are hierarchical and deficiencies hamper the application of the frameworks. I attributed such challenges to the fact that, with my results, I drew on children's participation on existing frameworks, very few of which were developed based on practices in African schools. My discussion of these challenges points to my second strand of argument on the theoretical contributions of

my results and adds to my conclusion on the possible application of children's participation frameworks to my Kenyan health promotion context (chapter 2.5.3).

My first section begins by examining my results in light of Percy-Smith's (2014a) and Simovska's (2008) frameworks on children's participation. My approach has two points of agreement with the postulations of both scholars: emphasis on a dialogical process and children's community contributions; build on experience in schools, and aim to realise the children's right in schools. However, unlike my context, their schools were located in Europe, Percy-Smith's (2014a) being in England. Percy-Smith theorises children's participation as a collaborative involvement in reflexive processes of learning and change during daily life (chapter 2.7.1). He criticises current approaches to participation for not building on children's natural ways of engaging, learning and acting and not fostering their participatory competence, both of which my approach addresses. Simovska's (2008) genuine participation encourages children to reflect and act to bring about positive health changes in their environs. She advocates explicitly for children's participation in school health promotion, which was also my primary intention (chapter 2.7.1). The views of both scholars, together with my approach, accentuate the interactions and relations between adults and children. Four of the six components of my approach structure such similar accents: children's participation is a collaborative dialogue between adults and children; it takes place in real-life situations; it is action-focused, and increases by granting children agency. Complementary contribution of my approach stems from the precise practices it defined to support these three components. For a collaborative dialogue, it urges the following four practices: multilateral-controlled communication arenas are created; a reciprocal learning process takes place; decisions are made jointly, and adults negotiate power structures with the children (chapter 4.3.1.1-4.3.1.4). Such practices describe a social learning process in accordance with Wildemeersch et al. (1998) for facilitating children's participation, which Percy-Smith (2014a) and Simovska (2008) also mention. My four practices specify both scholars' recommended adult-child relationship, in which children are given the power to influence, decide and act, to enable their participation during dialogical engagements. Moreover, for its action focus and to increase the agency granted to children, my approach defines the following behaviours and practices: develop existing action competence; children identify solutions for focused problem, adults give discretion to children, and children surprise adults. These practices specify the nature of adult-child relationships needed to enable children to

realise what Simovska (2008) calls genuine participation, which entails reflecting and acting jointly to bring about positive health changes in their environs. They also affirm Percy-Smith's (2014a) recommendation for development of children's creative responses to issues at hand during their everyday school life.

In agreement with Percy-Smith, my approach drew on AR principles in conceptualising children's participation. I based their use on my results' prioritisation of actions and AR characteristics for the realisation of children's participation right (chapter 4.2, 4.3). However, my results differed with one of Percy-Smith's four arguments for using AR principles: to draw on AR as a paradigm mirroring the aspiration of anarchism (chapter 2.7.1). My results predominantly portrayed a childhood understanding of expecting children to take on communal responsibilities, which might contradict the autonomy, ownership and influence of children stressed in anarchism. Nonetheless, my results agree with Percy-Smith's (2014a) other three arguments: understand children's participation in its broad sense, beyond notions of voice; use AR principles to guide the participation process and understand children as natural ARer, e.g. my approach drew on their natural role of taking on communal actions (chapter 5.3). I now add two arguments for my use of AR principles in reference to the literature I reviewed: PAR's philosophy informed children's participation and PAR's relation-oriented standards and intentions affirm my results, e.g. rebalance power relations (chapter 2.8.4).

Scholars who conceptualise children's participation merely as a dialogue also urge relational changes between adults and children. In this case, I refer specifically to Fitzgerald et al. (2010) and Mannion (2010) (chapter 2.7.3). Fitzgerald et al. conceptualise children's participation as a 'struggle over recognition'. They further posit that this recognition happens through dialogue. Mannion theorises children's participation as a creation of dialogical intergenerational spaces, which are made possible by relational changes. My approach affirms both of these scholars' emphasis on dialogue. Therefore, it concurs with Fitzgerald et al.'s (2010) dialogical approach, which is the current, and third historical moment of children's participation. Two of the six components of my approach posit such dialogical perspectives on children's participation: their participation is a collaborative dialogue between adults and children, and it gives children a voice. My approach's corresponding behaviour and practices complement the views of Fitzgerald et al. (2010) and Mannion (2010) by specifying and structuring the necessary requirements for creating dialogical spaces between adults and children. Their call for mutual, cooperative and respectful relationship are affirmed and

specified by my approach's practices that facilitate children's participation though a collaborative dialogue: create multilateral-controlled communication arenas; reciprocal learning process takes place; make decisions jointly, and adults negotiate power structures with children (chapter 4.3.1.1-4.3.1.4). My approach also identifies the behaviour among adults that facilitates children's participation as that of giving children a voice to contribute with their critical voice and listening to their views. Such a relationship incorporates Mannion's (2010) suggested transformation of associated identifications of adults and children. My results suggest, for instance, this necessary transformation for teachers wanting to facilitate children's participation as: *to relate with children more as friends than as authoritative adults* (diary 7:36) (chapter 4.3.1.2). My approach adds a priority on children contributing their critical voice to Fitzgerald et al.'s (2010) and Mannion's (2010) dialogical spaces. As one of Hadfield et al.'s (2010) three typologies of voices, this voice points to my approach's emphasis on dialogical engagement between adults and children in designing and carrying out joint projects (chapter 2.7.4). For school health promotion, my approach suggests engaging with children in a collaborative dialogical process on joint projects. This is similar to Freire's (1970) educational style which proposes a dialogical exchange process between teachers and children.

Children's participation frameworks that emphasise their community contributions also have adults' and children's relational changes at the centre. Theis (2010) recognises children's participation as citizenship rights. Stoecklin (2013) considers it as a product of better understanding of children's agency. Taylor et al. (2008) and Hart R. (2008) urge that children contribute to the community and that they must dialogue with adults for such contributions. My approach does concur with most perspectives of all these scholars by highlighting children's actions, such as their community contributions. It reiterates Taylor et al.'s proposal to make children's community engagement possible by creating spaces to engage, interact and learn with adults. It relies on Hart R.'s (2008) requirements for children's participation: to foster adults' dialogue with children and to build on children's local informal participation practices. My approach's action focus builds on my results of such informal practices of children's daily chores (chapter 4.3.3.2, 5.3). Three components define the action-focus of my approach: children's participation takes place in real-life situations; it is action-focused, and increases by granting them agency. These components underscore the need to grant children greater agency, embedded in their collaborative dialogical engagement with adults,

which is in agreement with all those children's participation frameworks that emphasise their community contributions. The primary ambition of my approach is to grant children greater agency to foster their contributions at family, community or school levels, which most of these frameworks also advocate. For instance, Percy-Smith (2014a) and Simovska (2008) advocate for children's school actions, while Wong et al. (2010) stress adults'-children's shared control for health-related actions. Similarly, Stoecklin (2013) insists on recognising children's community actions to better understand their agency. My approach complements these frameworks by clearly defining the requisite behaviour and practices to facilitate the three components. My explicitly used relational perspective on agency specifies for this component: facilitators give discretion to participants; facilitators interpret participants' behaviour, and participants surprise facilitators (chapter 4.3.5.1-4.3.5.3). Such relational changes are crucial for all children's participation frameworks that place emphasis on their community contributions.
Furthermore, my approach identifies the following specific practices for the component of children's participation taking place in real-life situations: local expertise is central to the knowledge generation process, changes addressed are grounded in real-life situations, and active involvement in the change process is needed (chapter 4.3.3.1-4.3.3.3). Different to my and most frameworks' accent on children's contributions at family, community or school levels conceptualise Theis (2010) and Taylor et al. (2008) children's increased contributions on political levels. Such political actions could be long-term outcomes of my approach. For example, could children's increased citizenship competence (Theis 2010) enable them to contribute to community development through their daily autonomous social actions (Taylor et al. 2008) or to undo socio-economic conditions that entrench poverty (Hart J. 2008).

I conclude the first part of discussing the theoretical contributions of my results by proposing that the existing frameworks on children's participation, on which I relied to develop my approach, could be applied in the Kenyan school health promotion context. I justify this conclusion based on six arguments, all of which refer to the fact that my approach was created out of the children's views on their right and my PAR field experience in Kenya. First, since I developed my approach based on the children's views, it is rooted in the context of Kenyan primary schools. This argument is reinforced by the fact that the results achieved the three empirical research objectives, all of which concerned the children's views: the children's identified understanding of their participation right, their recommended concepts for realising their right within the CSHP

and the testing of such concepts (chapter 2.6, 5.6). Second, since I developed my approach out of my PAR experiences, its applicability in Kenyan schools is very feasible. The feasibility supports the fact that I built my approach on AR principles referring to Percy-Smith's (2014a) children's participation framework (chapter 2.7.1). Third, considering my approach suggests the same two focuses for realising children's right as advocated in current theoretical frameworks, its applicability to my research context is most likely. These two focuses are: dialogue between adults and children, and children's actions, especially those contributing to the community. Fourth, since my results revealed these two focuses to be in unity with the prevailing perception of childhood among children and parents, they can most likely be applied in my research context. These participants' one side of perceiving childhood was that of a period of expecting children to take on actions and of educating them through dialogue as they undertake such actions, e.g. daily tasks.

Fifth, since my approach, likewise, resonates with current frameworks' emphasis on the importance of real-life situations, children's agency and relational changes between adults and children, it can most likely be applied. This agreement underlines the values of dialogue and actions in realising this right (chapter 5.3). Examples are the frameworks of Hart R. (2008), Percy-Smith (2014a), Stoecklin (2013) who rely on children's daily actions contributing to community lives and also point to the importance of such actions in a non-Western understanding of childhood. Jerusalem et al. (2009) and Svedbom (2000) focus on children's agency to strengthen their action competence, as school health promotion strategies. Similarly, Pells (2010) recommends that for Rwanda the 'lived participation' approach necessitates supportive and participatory relationships within children's daily environment. Moreover, De Castro (2012) generalises children's need to learn specific behaviour codes so as to be considered as legitimate 'opinion-givers', just like the adults. Sixth, the possible application of such frameworks is supported by my results on the perspectives of children and parents that reinforced the frameworks' proposed emphases to realise the children's right: Parents affirmed Pells' (2010) participatory relationship, saying they collaborated with their children, supported the children's involvement in daily actions and granted them agency to carry out chores (chapter 4.3.3.2). On their part, the children reiterated De Castro's (2012) 'behaviour codes' to legitimise them as 'opinion-givers', saying these would help adults and other pupils to listen to their opinions (chapter 4.2.1.2, 4.2.2.2). The children also suggested necessary relational changes for their right to be

realised. Such changes included the need to have good relations with peers and with adults, especially teachers (chapter 4.2.2.3, 5.3), being free to hold discussions on what they wished to do and pointed to their desire for greater discretion, hence agency (chapter 4.3.5.1). These six arguments led to my conclusion that the frameworks on which I built my approach can be applied within the context of Kenyan school health promotion.

This second part completes my discussion of the theoretical contributions of my results by examining three areas of challenges mentioned earlier. I defined these challenges as constituting the second strand of arguments for the theoretical contributions of my results. I reasoned these challenges as resulting from the fact that I built my approach on current frameworks on children's participation: Western viewpoints dominate the frameworks; public systems are hierarchical, and deficits hamper application of the frameworks (chapter 2.5.3). These challenges do not debunk my conclusion on the possible applicability of current frameworks to Kenyan school health promotion. However, they could challenge the application of my approach and, thereby, the current frameworks in this context. Therefore, I complement my discussion on these challenges, as I experienced them during the PAR, with my results on ways of dealing with those challenges.

The first challenge of Western viewpoints dominating children's participation frameworks was a problem area that my research aimed to address (chapter 2.5.1). I built my approach, in particular, on Hart R.'s (2008) and Percy-Smith's (2014a) frameworks who take non-Western childhood perspectives into account. However, I primarily used the general notions from frameworks or principles referring to Western viewpoints, e.g. Fuchs (2001), Simovska (2008). Of great importance to me, when developing my approach, were my results on the prevailing perspectives on childhood in Kenya. Despite this important focus on my results on non-Western, particularly Kenyan, childhood perspectives, such results confirmed the challenging attitude towards children, which many scholars have described for Kenya: children are there 'to be seen, but not to be heard' (diary 1:51) (chapter 2.5.1, 5.3). For example, some parents described childhood as *a time when a child is told what to do* (par. M. No. 106); one teacher said that in the *Kikuyu culture decision-making is for adults* (diary 4:25) and *Africans always say children what to do, but the mzungu want to involve children* (diary 2:60) (chapter 4.3.1.3). Such attitudes towards children remain a challenge to the application of my approach. Other scholars have also highlighted this barrier to

children's participation in Africa, e.g. Okyere et al. (2014), Porter et al. (2010), Pridmore (2000) and Tubaundule (1999). Nevertheless, my approach overcomes this barrier by fostering the other side of the prevailing perspective of childhood revealed by my results: children's responsibilities, being in charge of many communal tasks and, as such, involved in decisions. An example of this attitude is one mother's statement that children *need to decide for themselves what to do as this tends to motivate them to do things better than when instructed by the parents* (par. M. No. 106) (chapter 4.3.1.3). Adults' attitudes towards giving children room to be heard, e.g. through intermediaries, confirm Okwany et al.'s (2011) findings in Kenya (chapter 2.3.4).
However, for the implementation of my approach, adults' perspective on childhood remains a great challenge that inhibits their participation. Practically, I suggest overcoming this challenge by training the facilitators (teachers) prior to and during its implementation. The training needs to include explaining my approach's foundation and envisioned promotion of perceiving children as being attributed responsibilities and agency. Such training would increase the facilitators' motivation, goal value and experience in children's participation, which also necessitates the selection of open-minded and enthusiastic facilitators (chapter 4.3.5.2, 4.3.6.2).

The second challenge to the application of my approach stems from the hierarchies in public systems. The results showed that such hierarchies impose various power dynamics on Kenyan schools. As my results indicated, these dynamics are a consequence of power imbalances between adults and children, which many scholars have also discussed as barriers to children's participation (e.g. Percy-Smith et al. 2010, Percy-Smith 2014a, Pridmore 2000) (chapter 4.3.1.4). Common practices that demonstrated such power dynamics in my sample schools were: the undermining of one another by teachers and the children (chapter 4.3.6.1); teachers caning children as a form of discipline; parents stressing the importance of this caning habit and its being rooted in the Kenyan culture (OMCT 2007) (chapter 4.3.6.3), and adults finding it difficult to give up control to children (chapter 4.3.1.3). The existence of such power dynamics in my research context rendered the questions that scholars have raised in their critique of participatory development highly relevant for the implementation of my approach: Do children actually gain power through their participation or do the already-powerful (adults) gain more power? Do decisions in which children are involved really concern their lives or those of professionals and, as Chambers (1997) asks, 'Whose reality counts'? (Cooke et al. 2001, Kothari 2001) (chapter 2.8.4).

Practically, to overcome this barrier of power dynamics in Kenyan schools, I suggest the need in training for the facilitators to reflect and learn from such questions and my PAR experience: children and adults negotiated their power dynamics constantly, resulting in most adults giving up control to children and eliminating their power pointing practices (chapter 4.3.1.4). I also propose thorough training to highlight my approach's intended communication arenas and the facilitators' increasingly interpretative behaviour.

The third challenge to the implementation of my approach comes from the deficits I experienced in the Kenyan culture and school system that hamper children's participation. The deficits touch on the five issues I raised in the second strand of my third problem area as a challenge to the theoretical contributions of my results (chapter 2.5.3): valuing children's participation; clear operational procedures in the schools; human and institutional capacities, and disseminating good children's participation practices. Based on my results, I add, the two deficits of ensuring no risks to children and lack of family economic resources.

On the first deficit, I portrayed adults' lack of value for the children's participation when discussing my results on opposing perspectives on childhood (chapter 5.3). On the second, my results revealed that schools lack clear operational procedures for children's participation, e.g. no regular health club meetings (Gatuura, Makutano School), no clear club management responsibilities, neither arrangements for children to elect school or club representatives, nor to take part in school-related decisions (g. K. No. 52; b./g. G. No. 54). Other schools in Kenya had already established such procedures, e.g. school parliaments (chapter 2.3.4). On the third deficit, my results identified a lack of human capacity for children's participation. Examples were teachers' (key persons') shortfall in capacities and motivation for PAR (Makutano, Gatuura School), except in Kiriri School (chapter 3.8.4); children lacked capacity to practice their participation in the full sense of their right, such as organising their group and initiating actions, making decisions, expressing their views or working in partnership with research facilitators as they always looked up to them (diary 8:15-16) (chapter 4.3.1.2, 4.3.4.3). Pridmore (2000) also describes the lack of motivated teachers as a barrier to children's participation in African schools. On the fourth deficit, two of my three sampled schools demonstrated a lack of institutional capacity for children's participation (Gatuura, Makutano School). This was indicated by head teachers' limited knowledge and motivation to support children's participation, which was different in

Kiriri School (chapter 4.3.6.2). I experienced the fifth deficit of dissemination of good practices on children's participation, since I mainly gained information on already applied practices on children's participation and know-how by interviewing NGO representatives in Kenya (chapter 2.3.4).

As a sixth deficit, I add the impossibility of ensuring no risks to children, which the children and adults described as a barrier to the right's realisation. The children said, for example, that adults could use caning to make children subservient, as the adults might interpret children's increasingly talkative behaviour as an assault on authority and the children stated, that *you are told to have said something wrong* or *we get beaten* (b. M. No. 84) (chapter 4.3.6.3). Many scholars have documented such risks to children's participation in Africa (Durham 2000, Okyere et al. 2014, Porter et al. 2010, Twum-Danso 2010) (chapter 2.8.5). I add the seventh deficit of lacking economic resources in families, as for example, some boys said *they do not have time to teach other people* (b. M. No. 66) (chapter 4.2.1.4). Indeed, 60% of Ndeiya's population are poor, compared to 21.75% in Kenya, so that some children, in a bid to contribute to their families' income, might be unable to attend schools' extra-curricular activities, such as health clubs (Porter et al. 2010) (chapter 2.4.2, 2.8.5). Nevertheless, during the PAR, the children showed great abilities in balancing their time commitments, so that some brought their donkeys, others their younger siblings along to research sessions (b. M. No. 90).

Practically, to overcome some of the seven shortcomings that challenge the application of my approach, I suggest the following: building of human and institutional capacities through training of teachers and head teachers (chapter 4.3.6.2); building children's participation capacities through collaborative work with them, such as the experience during the PAR when some girls were able to run club meetings without the teacher (chapter 4.2.2.4); active involvement of parents and teachers in implementation of the approach would reduce possible risks to children; all involved adults should be made aware that children accept certain risks for airing their views. For example, the girls demanded to have club meetings without the teacher and they also claimed the right to take part in the development of school rules (chapter 2.3.4, 4.3.1.2).

The three areas of challenges, which I discussed as barriers to my approach's application, do not overthrow my previous conclusions: first, that I could use current theoretical frameworks on children's participation to develop my approach and apply these in the context of health promotion in Kenya's schools; second, that the

implementation of my approach could meaningfully reduce the gap I observed between law and practice in realising the children's right to participation within the CSHP. Crucial for the continuity of these two conclusions are the prerequisites formulated earlier (chapter 5.4), which include drawing on my just reported experiences in overcoming such barriers and that my approach's implementation directly addresses the seven shortcomings I have discussed. Importantly, such avenues for implementation of my approach in Kenyan schools' health education still need to be tested (chapter 5.8).

5.6 Discussing the generalisability of my results

In this chapter, I discuss the possible generalisation of my results to the country of Kenya, to the whole of Africa and beyond. This discussion focuses on my results on the approach for realising children's right to participation (Puzzle model 3: Figure 12, chapter 4.4). This approach was the final product of my research and responded to the research question on: how the children's right to participation within the CSHP in Kenya can become a reality. This response was derived from my findings on the three empirical research objectives: the children's understanding of their right; defined concepts on how this right can be realised within the CSHP in Kenya, and the testing of this final approach (chapter 2.6, 4.2-4.4). In reference to my research objective, I discuss the generalisation of this approach primarily in the school health promotion context.

I gauge the generalisation of my results, first, on their conformity with the findings of other scholars and theories that refer to contexts outside of Kenya. Secondly, I gauge it by reflecting on similarities and differences of certain contextual features in my research area. Greenwood et al. (2007) propose this contextual analysis as a means for gauging the generalisability of AR findings. They describe this analysis to evaluate their standard of trans-contextual credibility, which is one of their three standards for AR credibility (chapter 5.1). They make little reference to the possible generalisation of AR findings and more to such findings' trans-contextual credibility. However, for reasons of clarity, I chose to talk about the generalisation of my AR findings in the following sections. Before expounding on the two lines of argument above, I clarify that the features for reflecting on the similarities and differences emerged during the data analysis (Annex: Table 8). This was the case because I was unable to incorporate certain contextual differences into my research sample or presentation of results, which I had aimed to achieve in my original research design. In my actual research sample all of the 36 girls and 36 boys came from the Ndeiya area and all belonged to

the same ethnic group of the Kikuyu. I ended up presenting my results without differentiating the multi-case level of the three schools (chapter 3.7, 3.8.2). However, my research design supported the possible generalisation of my results, as I started to generalise with the children during the PAR: each of the children's groups verified the summary model on their understanding of their right, defined recommendations for realising this summary model in the CSHP nationally and verified my summarised recommendations and preliminary results (chapter 3.7.1). I now examine my two arguments for gauging the generalisability of my results.

First, I judged the possible generalisation of my results based on their conformity with the findings and theories from other scholars. In my previous chapter, I elaborated on my approach's agreement with the two areas of focus of current frameworks on children's participation: a dialogical process and children's actions (chapter 5.5). The final puzzle model summarising my approach illustrates its emphasis on the same two areas of focus proposed in such current frameworks: adults' and children's collaborative dialogue and the action focus, which underscore relational changes between adults and children, children's agency and their daily community involvements (Puzzle model 3: Figure 12, chapter 4.4). Examples of frameworks that advocate for these features are those of Hart R. (2008), Percy-Smith (2014a) and Simovska (2008). Hart R. (2008) urges drawing for children's participation in Africa on their practiced actions of informal participation. Percy-Smith (2014a), on which my approach was built, draws on AR principles for children's participation within the school context. Finally, Simovska (2008) advocates for genuine participation of children in school health promotion (chapter 5.5). In reference to my approach's conformity with and complementation of current frameworks on children's participation, I call for its global generalisation within the school health promotion context. Many of these frameworks draw on or refer to the setting of schools, which is the reason that I call for a generalisation of my approach within the school context, although my research context was that of primary schools.

Second, I gauged the possible generalisation of my results by reflecting on the similarities and differences of certain contextual features in my research area. Key features of differences and some similarities, which emerged during my data analysis, touched on the three topics of: children, schools and research area (Annex: Table 8). Regarding the children, one feature of similarity was the fact that their age range was 10-13 years, which corresponded with the typical primary school age range of 7-13 years in Kenya (Scholaro 2018). Another feature of similarity was the selection procedure for all

sampled children, which encouraged voluntary involvement in the research. Regarding the three schools, differences stemmed from their geographical locations in Ndeiya: Kiriri was situated in a more rural area and to the East; Gatuura was in the more urbanised area and to the North, while Makutano was also situated in a more urbanised area, but to the South-West. Another difference had to do with the levels of discipline and functioning of health clubs in each school: in Kiriri, the club was most active, whereas it was least active in Gatuura. I attributed this difference to the poor discipline among learners observed in Gatuura School and the club teachers' different length and managing styles of the clubs (chapter 3.4.3, 3.8.4). An important difference for my results was the three schools' commitment to the PAR. Kiriri School was most committed while Makutano showed average commitment and Gatuura the least. The main similarity was the fact that each school's commitment was influenced by the key person, head teacher and their knowledge of children's participation: in Kiriri School, the key person and head teacher were most involved. More specifically, the head teacher demonstrated a profound understanding of children's participation while the key person was already practising it in the health club prior to our research (diary 2:45-46/48). The situation was quite different in the other two schools (chapter 4.3.6.2). Another similarity was that the key persons' and head teachers' level of engagement influenced parents' interest in children's participation.

Regarding the research area of Ndyeia, the main similarity was the prevailing understanding of childhood. Other similarities included the fact that this area was one of Kenya's poorest and schools had hardly had any history of realising children's right (Annex: Table 8). Based on these similarities and differences, I conclude that my approach (Puzzle model 3) could be applied within extra-curricular activities in all Kenyan schools, e.g. health clubs. My voluntary sample selection allows me to generalise for schools' extra-curricular activities only.

Combining my first and second line of judgements on generalisability, I propose a global application of my approach within extra-curricular school activities. Referring to my research objective, I particularly recommend its use within school health promotion activities. My reflections on the three contextual topics drove me to supplement the three practices that I defined for the facilitation of my final approach's (Puzzle model 3) sixth component of requiring an institutional culture of participation (chapter 4.3.6) by: teachers and head teachers need to be knowledgeable about children's participation; they should be trained so as to build up their knowledge; well-functioning

extra-curricular activities need proper establishment and management; the particularities of each school and region need to be taken into account, e.g. commitment, ethnicity, children's capabilities, understanding of childhood, history of implementation of children's participation (Annex: Figure 22). While I propose my approach's (Puzzle model 3: Figure 12, chapter 4.4) possible generalisation for schools' extra-curricular activities, especially within health promotion programmes, its actual application still needs to be tested (chapter 5.8). My proposed generalisation allows for such testing globally. I suggest the inclusion of children's non-volunteer involvement in its testing contexts, e.g. school lessons, as well as out-of-school initiatives and schools located in more underprivileged African areas than Kenya's Ndeiya region. Such research would provide information on possible wider generalisation of the approach's application, e.g. kindergarten and on the actual availability of less privileged children to take part in extracurricular activities, such as health clubs.

5.7 Final recommendations for realising children's right to participate in school health promotion programmes

In this chapter, I make recommendations based on my results on how to realise children's participation right within school health promotion programmes. First, I recap my arguments on the relevance of the realisation of this right. Second, I provide my recommendations for the realisation of this right within school health promotion programmes by revisiting my final puzzle models' six components. Furthermore, I supplement its sixth component with precise recommendations for training facilitators. I derive most recommendations globally and specify some for Kenyan primary schools' CSHP.

First, I built the relevance of children's participation in school health promotion activities on four arguments (chapter 2.1, 2.2). My results confirmed the rationality of these arguments for my research area (chapter 5.3). First, the idea of participation is irrevocably linked with the WHO Ottawa-Charter's definition of health promotion: *process of enabling people to increase control over, and to improve their health* (WHO 1986a, p. 1). Thus, one core value of the WHO's HPS Initiative is the students' participation (WHO 1997, Wright et al. 2010) (chapter 2.3.1). Second, health promotion strategies define the fulfilment of human rights principles as one of their objectives. People's participation, as the UNCRC's Article 12.1 states for children, is a core principle of human rights documents (chapter 2.1.1, 2.4.3). Third, the New Sociology of Childhood advocates for the realisation of children's right of participation (chapter

2.2.1). Fourth, the health-enhancing effects of children's participation strengthen their personal resources. Developing such resources is one of the aims of current health promotion strategies (Jerusalem et al. 2009) (chapter 2.2.2).

Second, I proffer my recommendations for realising children's participation within schools' extra-curricular activities, particularly health promotion activities. My final puzzle model summarises the results approach on how to realise children's right to participation (Puzzle model 3: Figure 12, chapter 4.4). I proposed its possible global application within schools' extra-curricular activities. The few preconditions I defined for its generalisation are added to the sixth component of my approach (chapter 4.3.6, 5.6). My puzzle model's possible generalisation is reinforced by its practical intention to help facilitators (e.g. teachers) who design and regulate children's participation in programmes, e.g. CSHP in Kenya. This intention is similar to most of the already existing models of children's participation (Hart R. 2008). My puzzle model also complements current theoretical frameworks on children's participation, including the few that focus on school health promotion: Simovska (2007), Wong et al. (2010) (chapter 5.5). My puzzle model conceptualises children's participation in six components and defines the precise behaviours and practices needed to facilitate these components. The implementation of all six components would lead to the realisation of children's participation. I formulated the six components and respective behaviours and practices in accordance with AR principles and characteristics, which my results revealed (chapter 4.3). The six components emphasised the two dimensions of a dialogical process and children's actions contributing to the community (chapter 5.4). These two dimensions grounded in the fact that my results agreed with the broad understanding of children's right to participation (UNCRC's Article 12.1) as: *a process of democratic and collaborative involvement in social processes in the context of everyday life (*Percy-Smith 2014a, p. 210) (chapter 2.1.2). I now briefly examine each of my final puzzle model's six components.

The first component states that children's participation is a collaborative dialogue between adults and children. Four AR characteristics facilitate this component: multilateral-controlled communication arenas are created; a cooperative and reciprocal learning process takes place; decisions are made jointly, and power structures are negotiated. All of these characteristics describe the necessary behaviours and practices among facilitators (e.g. teachers) that must be included when engaging in dialogue with children to allow a social learning process (Wildemeersch et al. 1998) to

take place. I underscore the need for adult-children relationships to be characterised by constant negotiations, to define common points of references, and for adults to adopt an attitude of 'we know – they know'. In such scenarios, health education would become a dialogical process of exchange between the adults and children on health-related subjects. In addition, children could discuss in groups, as they advocate for the realisation of their right (chapter 4.3.1.1-4.3.1.4).

My second component states that children's participation entails giving them a voice. Two AR characteristics facilitate this component: all participants contribute with their critical voice and their views need to be listened to. The foundation for these behaviours is in the relationship between facilitators and children and in giving children space to air their views. The use of appropriate methodologies supports such spaces, e.g. PLA methods (chapter 4.3.6.1). In such spaces, children could influence key decisions in the health clubs or schools (Percy-Smith 2014a) and raise their critical voice, such as questioning the status quo or challenging power relations with adults (Hadfield et al. 2001). Facilitators could teach health subjects by simply showing value for children's experience and voice, develop health-related activities based on the children's ideas and, importantly, teach good behaviour to the children, which the children urged as a precondition for them to be listened to (chapter 4.3.2.1-4.3.2.2).

My third component states that children's participation takes place in real-life situations. Three AR characteristics facilitate this component: local expertise is central to the knowledge generation process; changes addressed are grounded in real-life situations and active involvement in the change process is needed. These behaviours, again, require facilitators' relationship towards children to be grounded in valuing children's local knowledge and their great contributions to daily family and community lives. The facilitators could educate school children by defining addressed health-related changes jointly with them and by encouraging them to have a part or share in the change process, e.g. children come up, conduct their own projects or teach health issues. In this way, the change process would be rooted in the children's real-life situations (chapter 4.3.3.1-4.3.3.3).

My fourth component defines children's participation as action-focused. Three AR characteristics facilitate this component: existing action competence needs to be further developed; the participants' commitment is essential for actions, and participants identify solutions for the focused problem. These practices require facilitators to support the children in carrying out actions by developing their existing action

competence further and by embedding their actions into a social learning process (Wildemeersch et al. 1998). Facilitators could develop children's action competence by fostering their ability, willingness and qualification for actions (Jensen et al. 1997). They could engage in a social learning process by jointly identifying actions with the children, which is supported by the use of the four action cycle steps. Within school health promotion, children would, thus, identify actions as solutions for the focused-on problem, increase their motivation and commitment to actions and develop their action competence. This greater competence would facilitate the children's more proactive engagement in actions. Current health promotion concepts for developing human resources advocate for children's action competence (Svedbom 2000) (chapter 4.3.4.1-4.3.4.3).

My fifth component states that children's participation increases by granting them agency. Three variables of Fuch's (2001) relational perspective on agency facilitate this component: facilitators give discretion to participants; they interpret the participants' behaviour and participants surprise facilitators. These three prerequisite behaviours increase children's intention for actions. Such a relational change requires facilitators to take an intentional stance, meaning that they attribute a rich inner life to children. They also need to be more interpretive, instead of deterministic, towards the children. Children's capacity to surprise adults is enhanced within such a relationship, hence their agency. As a result, children would, for example, act more as health agents in their environs. Additional factors that motivate adults to grant children more agency include fostering permissive learning environments by not being repetitive or supervising discipline, having small group sizes and valuing children's existing agency (chapter 4.3.5.1-4.3.5.3).

My sixth component states that children's participation requires an institutional culture of participation. Three obligations support the achievement of such a culture: learning arenas need to be created by using suitable techniques; high motivation of facilitators is needed, and zero risks to participants must be ensured. PLA methods, combined with FGI, are suitable techniques to fulfil the first obligation, e.g. Ranking Line (Annex: Figure 21a, 21b), Preference Ranking to identify health subjects (Example 2: Figure 8, chapter 3.5.3.3), Problem Tree to formulate actions (Mahr-Slotawa 2020: Graphics 9, 10 and 15, 16). Such methods require facilitators to learn from the children, encourage children's views and be well-trained. My second obligation needs facilitators (e.g. teachers) to have high goal value for children's participation. Training, experience

in children's participation and head teachers' motivation increase their goal value for children's participation. My third obligation demands identification of different measures be carried out in each cultural context. In my research context, these measures entailed involving parents in the approach's implementation (chapter 4.3.6.1-4.3.6.3).

I now supplement this sixth component of my approach with three additional obligations, which emerged from discussing my research results (Annex: Figure 22). These obligations include the preconditions I defined for my puzzle model's possible global application (chapter 5.6). Therefore, the fourth obligation is that each schools' (e.g. commitment, ethnicity, children's capabilities) and every regions' (e.g. childhood perspectives, history in implementing child participation) particularities need to be taken into account. The fifth obligation is that school's extra-curricular activities (e.g. health clubs) need to function well. For the fulfilment of this obligation, I advocate the need to ensure children's clear membership and leadership, deciding jointly with them on the criteria for determining membership and leadership, on the club's meeting times and on the language to be spoken in the club (chapter 3.8.8.1, 4.2.2.4). The sixth obligation is that training needs to build the facilitators' (e.g. teachers') and head teachers' knowledge about children's participation. I summarise my recommended objectives and contents for such a training in a table. I give these recommendations for my puzzle model's global application and specify them for the CSHP (Annex: Table 14). I justify such detailed recommendations on the importance of training facilitators well for proper implementation of my puzzle model. I urge each schools' head teacher to take part in the training. The training will improve the motivation of the facilitators and the head teachers to realise the children's right and, in this way, advance the institutional culture for the children's participation and my puzzle model's sustainable implementation.

5.8 Final conclusions

At the end of my discussion, I first draw practical conclusions from my results, on testing my puzzle model's implementation and, second, on theoretical conclusions on my academic contributions.

First, my practical conclusions outline the need to test my puzzle model's workability in realising children's participation. The key aims of the tests are to examine my puzzle model's global application and complementation of these for its application, specifically

in the African and Kenyan context of the CSHP. Globally, my puzzle model's application should start with an examination of whether or not the behaviours and practices defined actually facilitate each of its six components. Some behaviours and practices might need to be adapted or added, since my puzzle model has not yet been completely applied. The primary setting for my puzzle model's testing should be schools' health promotion initiatives while secondary settings could be school lessons or kindergartens. The current literature describes children's participation as being predominantly realised in schools, which reinforces schools as primary settings for testing my puzzle model (Frische 2008a, Percy-Smith et al. 2010). My approach drew on Percy-Smith's (2014a) five AR principles (chapter 2.7.1). Therefore, the testing of my approach should seek to observe whether its application leads to the five practices that Percy-Smith derived for implementing his AR principles in schools, e.g. experiencing children's participation by engaging and learning through actions. Moreover, I recommend using my puzzle model for monitoring the realisation of children's participation, which needs to be tested. My puzzle model's implementation could also be accompanied by a long-term study investigating the positive effects of children's participation, such as building personal resources, health-related skills, citizenship competence, community and political engagement. Ideally, this study could provide more evidence for those widely discussed positive effects of children's participation (chapter 2.2.2, 2.7.5).

Furthermore, I add that my final puzzle model's specific application in Kenyan primary schools' CSHP should start with a pilot phase. The MoPHS should facilitate this phase and it should be undertaken by a person experienced in children's participation, e.g. from StC, KAACR or GIZ. This pilot phase should examine: how my puzzle model's implementation fills the gap I observed between practices in the CSHP and its definition in its policies of children's participation as: *school children…actively participate in all fora to express their opinions in matters affecting their health and education* (MoPHS/MoE 2009a, p. 25), and if my puzzle model guides facilitators (e.g. teachers) in implementing children's participation right in the broad sense I envisioned. Responding to these questions should include finding out: MoPHS's own will to realise children's participation; my puzzle model's workability in often highly hierarchical school systems; its ability to enable facilitators to promote children's action competence and agency by adopting a less commanding but more interpretive relationship with them and to engage in a collaborative dialogue; its ability to overcome the various challenges, for

example, that of facilitators' motivation or children being caned. The sustainable implementation of my puzzle model also needs be investigated during this pilot phase. Such sustainable implementation also prevents ethical risks, e.g. children's discouragement (chapter 3.8.8.4). This investigation needs to include a review of: my recommended objectives and contents for facilitators' training; ways to ensure facilitators' and the parents will; means to involve parents in implementation; facilitators' and parents' understanding of my puzzle model's intended strengthening of the daily practices of children's participation: Among these are that collaborative dialogue educates children during daily tasks or joint health-promoting actions by adults and children.

The pilot phase should also seek out possibilities, in the application of my puzzle model, of including the existing participation initiatives of the children in each school (chapter 2.3.4). Moreover, long-term possibilities could be explored to include child participation initiatives at political levels in my puzzle models' implementation. Each health club could, for example, select a child for Children's General Assembly in Nairobi, which was suggested by the Assembly's coordinator, aiming to improve children's genuine participation in the Assembly and to *give it a link to the ground* (diary 5:51-52). My globally suggested long-term study on the positive effects of children's participation should be complemented with my expected effects particularly for the CSHP: teacher-centred education becomes increasingly a process of interaction and action-based learning, improves learning about sensitive heath subjects, e.g. SRH (chapter 4.4.1).

Second, I draw conclusions for the academic fields. These concerns the theoretical conceptualisation of children's participation in the results (Puzzle Model 3: Figure 12, chapter 4.4) and briefly the results on practicing AR with children (Figure 9: chapter 4.1). My conceptualisation of children's participation contributes to academic fields that theorise on children's participation. Such fields are still scattered, involving childhood studies, community development studies, psychology and governance. Therefore, the theories on children's participation are also still scattered (Percy-Smith 2014a). The academic fields from which my results add to this theory are: childhood and development studies, as well as health science: the role of development studies in my theoretical contributions stem from my PAR experiences and the fact that I drew on AR principles (chapter 4.3); childhood studies since my contributions are a result of the children's own views on their right to participate (chapter 4.2), and health science since

my research context and objective was to realise children's participation right within the CSHP (chapter 2.6). Testing my puzzle model's practicability advances the theoretical contributions of my results through findings on: the approach's workability; its realisation of children's participation, grounded in AR principles; its components that are used to monitor children's realised participation; its presumed applicability with most of the existing theoretical frameworks on children's participation within Kenyan primary schools (chapter 5.5), and the relevance of notions from current frameworks on children's participation that my approach has, so far, disregarded, e.g. children's citizenship (Percy-Smith et al. 2010, Theis 2010), capability approach (Nussbaum 2011, Stoecklin et al. 2014).

My research also contributes to the academic fields of Action Research, particularly its field of Participatory Health Research (PHR) (ICPHR 2013). My results add on conducting AR with children. Such knowledge is very necessary, as little has been published on the particular research group of children in these academic fields of AR and PHR. I summarised my results on AR with children in modifying Greenwood et al.'s (2007) Cogenerative AR model (chapter 4.1). I urge that this modified AR model needs to be tested during an AR with children. Its application would affirm or refute my new four phases, my newly defined objectives and outcomes for each phase, as well as the criteria I outlined for AR with children. It could be tested globally, since I proposed a global application of this AR model (chapter 5.2). However, I advise testing the AR model separately from testing my final puzzle model on the realisation of children's right to participation. Both are independent models that resulted out of my research.

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DOCUMENTS FROM OWN RESEARCH

hm. K. No. 1 (headmaster, Kiriri School, protocol No.1): Minutes of meeting at Kiriri Primary School with headmaster, 11. Sept. 2013

hm. G. No. 2 (headmaster, Gatuura School, protocol No.2): Minutes of meeting at Gatuura Primary School with headmistress, 11. Sept. 2013

hm. M. No. 3 (headmaster, Makutano School, protocol No.3): Minutes of meeting at Makutano Primary School with headmistress, 11. Sept. 2013

b./g. M. No. 9 (boys/girls, Makutano School, protocol No. 9): Protocol for meeting with boys and girls at Makutano Primary School held on 19th Sept. 2013 at 4.00 PM

g. K. No. 10 (girls, Kiriri School, protocol No. 10): Meeting with the girls at Kiriri Primary School held on 24th Sept. 2013 at 3.20 PM

g. M. No. 12 (girls, Makutano School, protocol No. 12): Meeting with the girls at Makutano Primary School held on 26th Sept. 2013 at 3.20 PM

b. K. No. 13 (boys, Kiriri School, protocol No. 13): Protocol for meeting with boys at Kiriri Primary School held on 24th Sept. 2013

g. K. No. 16 (girls, Kiriri School, protocol No. 16): Protocol for girls' session at Kiriri Primary School held on 1st Oct. 2013 at 3.30 PM

b. K. No. 19 (boys, Kiriri School, protocol No. 19): Kiriri Primary School boys' session held on Tuesday 1st Oct. 2013

b. G. No. 20 (boys, Gatuura School, protocol No. 20): Gatuura School health club meeting on 2nd Oct. 2013 starting from 3.30 to 4.40 with the boys

b. M. No. 21 (boys, Makutano School, protocol No. 21): Makutano Primary School health club meeting with the boys, held on 3rd Oct. 2013 from 3.30 to 4.40 PM

g. K. No. 22 (girls, Kiriri School, protocol No. 22): Protocol for girls' session at Kiriri Primary School, held on 8th Oct. 2013 at 3.20 PM

b. K. No. 25 (boys, Kiriri School, protocol No. 25): Kiriri boys' health club session held on 8th Oct. 2013 from 3.25 to 4.50 PM

b. G. No. 26 (boys, Gatuura School, protocol No. 26): Gatuura boys' health club session held on 9th Oct. 2013 from 3.25 to 4.50 PM

b. M. No. 27 (boys, Makutano School, protocol No. 27): Makutano boys' health club session held on 10th Oct. 2013 from 3.20 to 4.45 PM

g. M. No. 30 (girls, Makutano School, protocol No. 30): Protocol for girls' session held at Makutano Primary School on 17th Oct. 2013 at 3.20 PM

g. M. No. 36 (girls, Makutano School, protocol No. 36): Protocol for girls' session held at Makutano Primary School on 24th Oct. 2013 from 3.20-4.35 PM

b. K. No. 37 (boys, Kiriri School, protocol No. 37): Kiriri boys' session held on 22nd Oct. 2013 starting at 3.20 till 4.40 PM

b. G. No. 38 (boys, Gatuura School, protocol No. 38): Gatuura boys' session held on 23rd Oct. 2013 starting at 3.20 till 4.40 PM

g. K. No. 40 (girls, Kiriri School, protocol No. 40): Protocol for girls' session held at Kiriri Primary School on 29th Oct. 2013 from 3.20-4.50 PM

g. G. No. 41 (girls, Gatuura School, protocol No. 41): Protocol for girls' session held at Gatuura Primary School on 30th Oct. 2013 from 3.20-4.40 PM

g. M. No. 42 (girls, Makutano School, protocol No. 42): Protocol for girls' session held at Makutano Primary School on 31tst Oct. 2013 from 3.30-4.45 PM

b. K. No. 43 (boys, Kiriri School, protocol No. 43): Kiriri boys' seventh session held on 29th Oct. 2013 from 3.20 to 4.55 PM

b. G. No. 44 (boys, Gatuura School, protocol No. 44): Gatuura boys' session held on the 30th Oct. 2013 starting from 3.20 to 4.45 PM

b. M. No. 45 (boys, Makutano School, protocol No. 45): Makutano boys' seventh session held on 31st Oct. 2013 starting from 3.30 to 4.45 PM

g. K. No. 46 (girls, Kiriri school, protocol No. 46): Protocol for girls' session held at Kiriri Primary school on 5th Nov. 2013 from 3.20 to 4.45 PM

g. G. No. 47 (girls, Gatuura School, protocol No. 47): Protocol for girls' session held at Gatuura Primary School on 6th Nov. 2013 from 3.20 to 4.45 PM

g. M. No. 48 (girls, Makutano School, protocol No. 48): Protocol for girls' session held at Makutano Primary School on 7th Nov. 2013 from 3.40 to 4.55 PM

b. K. No. 49 (boys, Kiriri School, protocol No. 49): Kiriri boys' eighth session held on 5th Nov. 2013 starting at 3.20 to 4.50 PM

b. G. No. 50 (boys, Gatuura School, protocol No. 50): Gatuura boys eighth session held on 6th Nov. 2013 starting at 3.20 to 4.50 PM

b. M. No. 51 (boys, Makutano School, protocol No. 51): Makutano boys eighth session held on 7th Nov. 2013 starting from 3.30 to 4.40 PM

g. K. No. 52 (girls, Kiriri School, protocol No. 52): Protocol for girls' session held at Kiriri Primary School on 11th Nov. 2013 from 12.30 to 1.50 PM

b. K. No. 53 (boys, Kiriri School, protocol No. 53): Kiriri boys' ninth session held on 11th Nov. 2013 starting from 12.45 till 2.00 PM

b./g. G. No. 54 (boys/girls, Gatuura School, protocol No. 54): Gatuura ninth session held on 13th Nov. 2013 starting from 3 to 4.20 PM

b./g. M. No. 55 (boys/girls, Makutano School, protocol No. 55): Protocol for session with boys and girls held at Makutano Primary School on 14th Nov. 2013 from 3.45 to 5.00 PM

g. K. No. 56 (girls, Kiriri School, protocol No. 56): Protocol for girls' session held at Kiriri Primary School on 19th Nov. 2013 at 3.40 to 5.00 PM

b. K. No. 59 (boys, Kiriri School, protocol No. 59): Kiriri boys' tenth session held on 19th Nov. 2013 starting from 3.30 to 4.30 PM

b. G. No. 60 (boys, Gatuura School, protocol No. 60): Gatuura boys' tenth session held on 21st Nov. 2013 starting 1.30 till 2.15 PM

b. M. No. 61 (boys, Makutano school, protocol No. 61): Makutano boys' tenth session held on 21st Nov. 2013 starting 3.00 till 4.00 PM

g. K. No. 62 (girls, Kiriri School, protocol No. 62): Protocol for girls' session at Kiriri on 26th Nov. 2013 from 10.30 AM to 12.15 PM

b./g. G. No. 63 (boys/girls, Gatuura School, protocol No. 63): Gatuura eleventh session with the boys and girls held on 27th Nov. 2013 starting at 3.30 to 5.00 PM

g. M. No. 64 (girls, Makutano School, protocol No. 64): Protocol for girls' session at Makutano on 28th Nov. 2013 from 2.40 to 4.25 PM

b. K. No. 65 (boys, Kiriri School, protocol No. 65): Kiriri boys' eleventh session held on 26th Nov. 2013 starting from 10.30 AM to 12.30 PM

b. M. No. 66 (boys, Makutano School, protocol No. 66): Makutano boys' protocol for eleventh session held on 28th Nov. 2013 starting 2.30 till 4.30 PM

g. K. No. 67 (girls, Kiriri School, protocol No. 67): Protocol for girls' session held at Kiriri Primary School on the 3rd Dec. 2013 from 10.00 AM to 11.30 AM

b./g. G. No. 68 (boys/girls, Gatuura School, protocol No. 68): Gatuura twelfth session with the boys and girls held on 4th Dec. 2013 starting from 3.30 to 4.30 PM

b. K. No. 70 (boys, Kiriri School, protocol No. 70): Kiriri boys' twelfth session held on 3th Dec. 2013 starting from 10.30 AM till 12.30 PM

b. M. No. 71 (boys, Makutano School, protocol No. 71): Makutano boys' twelfth session held on 5th Dec. 2013 starting from 2.45 till 4.30 PM

g. G. No. 73 (girls, Gatuura School, protocol No. 73): Protocol for girls' session held at Gatuura Primary School on 11th Dec. 2013 from 3.10-4.40 PM

g. M. No. 74 (girls, Makutano School, protocol No. 74): Protocol for girls' session held at Makutano Primary School on 10th Dec. 2013 from 2.20-4.40

b. K. No. 75 (boys, Kiriri School, protocol No. 75): Kiriri boys' thirteenth session held on 10th Dec. 2013

g. K. No. 79 (girls, Kiriri School, protocol No. 79): Protocol for girls' session at Kiriri Primary School on 17th Dec. 2013 from 10.30 AM-1.30 PM

g. G. No. 80 (girls, Gatuura School, protocol No. 80): Protocol for girls' session at Gatuura Primary School on 18th Dec. 2013 from 2.45-4.50 PM

g. M. No. 81 (girls, Makutano School, protocol No. 81): Protocol for girls' session at Makutano Primary School on 19th Dec. 2013 from 2.30-5.30 PM

b. K. No. 82 (boys, Kiriri School, protocol No. 82): Kiriri boys' fourteenth session held on 17th Dec. 2013 starting from 11.00 AM till 1.00 PM

b. G. No. 83 (boys, Gatuura School, protocol No. 83): Gatuua boys' fourteenth session held on 18th Dec. 2013 starting from 2.00 till 4.00 PM

b. M. No. 84 (boys, Makutano School, protocol No. 84): Makutano boys' fourteenth session held on 19th Dec. 2013 starting from 3.00 till 5.00 PM

g. K. No. 85 (girls, Kiriri School, protocol No. 85): Protocol for girls' session held at Kiriri Primary School on 7th Jan. 2014 from 3.20 to 5.20 PM

g. G. No. 86 (girls, Gatuura School, protocol No. 86): Protocol for girls' session held at Gatuura Primary School on 8th Jan. 2014 from 3.20 to 5.00 PM

g. M. No. 87 (girls, Makutano School, protocol No. 87): Protocol for girls' session held at Makutano Primary School on 9th Jan. 2014 from 3.25 to 4.05 PM

b. G. No. 89 (boys, Gatuura School, protocol No. 89): Gatuura boys' fifteenth session held on 8th Jan. 2014 starting from 3.20 till 5.00 PM

b. M. No. 90 (boys, Makutano School, protocol No. 90): Makutano boys fifteenth session held on 9th Jan. 2014 starting from 3.25 to 4.00 PM

g. K. No. 91 (girls, Kiriri School, protocol No. 91): Protocol for girls' session held at Kiriri Primary School on 14th Jan. 2014 at 3.30 to 4.45 PM

g. M. No. 93 (girls, Makutano School, protocol No. 93): Protocol for girls' session held at Makutano Primary School on 16th Jan. 2014 at 3.30 to 5 PM

b. K. No. 94 (boys, Kiriri School, protocol No. 94): Kiriri boys' sixteenth session held on 14th Jan. 2014 starting from 3.30 till 5.20 PM

b. M. No. 96 (boys, Makutano School, protocol No. 96): Makutano boys' sixteenth session held on 16th Jan. 2014 starting from 3.20 till 4.00 PM

g. K. No. 97 (girls, Kiriri School, protocol No. 97): Meeting with the girls held at Kiriri Primary School on 21st Jan. 2014 from 3.30 to 5.00 PM

g. G. No. 98 (girls, Gatuura School, protocol No. 98): Meeting with the girls held at Gatuura Primary School on 22nd Jan. 2014 from 3.30 to 5.00 PM

g. M. No. 99 (girls, Makutano School, protocol No. 99): Meeting with the girls held at Makutano Primary School on 23rd Jan. 2014 from 3.30 to 5.00 PM

b. M. No. 102 (boys, Makutano School, protocol No. 102): Makutano boys' seventeenth session held on 23rd Jan. 2014 starting from 3.30 till 4.45 PM

t. train. No. 103 (teachers' training, protocol No. 103): Teachers' meeting held Friday 10th Jan. 2014 in Makutano Primary School starting from 11.20 AM to 3.00 PM

par. K. No. 4 (parents, Kiriri School, protocol 4): Protocol for meeting with parents at Kiriri Primary School held on 17th September 2013 at 2.30 PM

par. G. No. 5 (parents, Gatuura School, protocol 5): Protocol for meeting with parents at Gatuura Primary School held on 18th September 2013 at 2.30 PM

par. K. No. 104 (parents, Kiriri School, protocol 104): Meeting with parents from Kiriri Primary School held on 14th Jan. 2014 from 1.35-3.30 PM

part. G. No. 105 (parents, Gatuura School, protocol 105): Meeting with parents from Gatuura Primary School held on 15th Jan. 2014 from 2.00-3.30 PM

par. M. No. 106 (parents, Makutano School, protocol 106): Meeting with parents from Makutano Primary School held on 16th Jan. 2014 from 1.35-3.30 PM

b./g. verif. No. 107 (boys/girls, verification session, protocol No, 107): Children meeting held on Friday 17th Jan. 2014 starting from 2.00 till 4.30 PM

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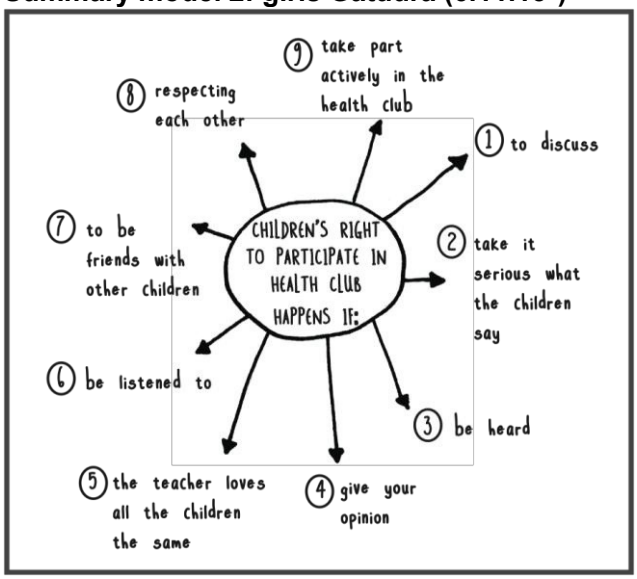
Table 7: Initiatives aiming to realise children's participation in Kenya (society, public policy, school, community/family level)[1]

Initiative on children's participation	Ways of children's participation	Role of facilitators	Location	Implementing organisation	Information source[3]
Media (Club Kiboko; Angel's Café; Kids Club)	Children express their views/create programmes for other children		nationwide Kenya (located in Nairobi)	KTN; Citizen TV; KBC[2] TV	UNICEF 2010
National Child Committee (includes temporarily active Child Participation Committee)	Children elect children members at each county; these work with ministry, e.g. for UNCRC reports 6 children are trained in each area, they collect data and present it to politicians in Nairobi/Geneva	KAACR staff/other NGOs set up; give directions, e.g. for UNCRC reports, they train local facilitators in listening to children; accompany them to Geneva	nationwide Kenya (meets in Nairobi)	KAACR; NCCS; Kenyan government	diary 4:46, 5:32/37/51
Children's General Assembly	Improvement needed as children's views are not represented	KAACR staff sets up; gives directions	nationwide Kenya (meets in Nairobi)	KAACR	diary 5:12-13
Child Assembly	6 children are elected (improvement needed as adults, not the children, appoint their representatives)	Local Child Officer sets up; supports	each county	KAACR; NCCS	diary 5:33/52
Day of Children's Voices	Children speak to politicians/present the changes that they want	KAACR/other NGO staff set up; support continuation	specific areas in Kenya	KAACR	diary 5:32/36
Day of the African Child	Adults of community government listen to children, e.g. changes wanted	Adults in each community support organisation	nationwide Kenya	KAACR; Kenyan government	diary 5:30-32
School Councils (required in Education Act 2013)		Each school sets up; supports	intended nationwide in Kenya	UNICEF; local government	diary 8:23
School Parliaments			6 areas (provinces)	World Vision	UNICEF 2010
500 Child Rights Clubs ('Msingi Bora')	Children run club/take decisions; are trained on rights; they involve parents	PLAN International sets up; supports; trains children/parents	8 areas (located in 4 counties)	PLAN International	diary 5:8-13; UNICEF 2010
300 Child Rights Clubs	Children establish/ran clubs by themselves	KAACR/teachers assist children to start/ran club; KAACR trains teachers	7 areas (Kisumu County)	KAACR	diary 4:47, 5:30; UNICEF 2010
122 Child Rights Clubs				StC	UNICEF 2010
5 Child Rights Clubs	Run/owned by children	CLAN staff set ups; assist		CLAN	diary 4:43
22 Girls Empowerment Clubs			3 areas	Girl Child Network	UNICEF 2010
Health education in schools (Health Clubs; PHAST)	Children promote healthy practises/ PHAST: children teach hygiene	Schools set up health clubs; club teachers train children on hygiene	nationwide Kenya/ Kibera slum	MoPHS/ AMREF	UNICEF 2010; diary 1:14/17
Local community and family	Participate in everyday routines; education interwoven in routines	Parents practice children participation; give indigenous education	nationwide Kenya	all parents, communities	Okwany et al. 2011

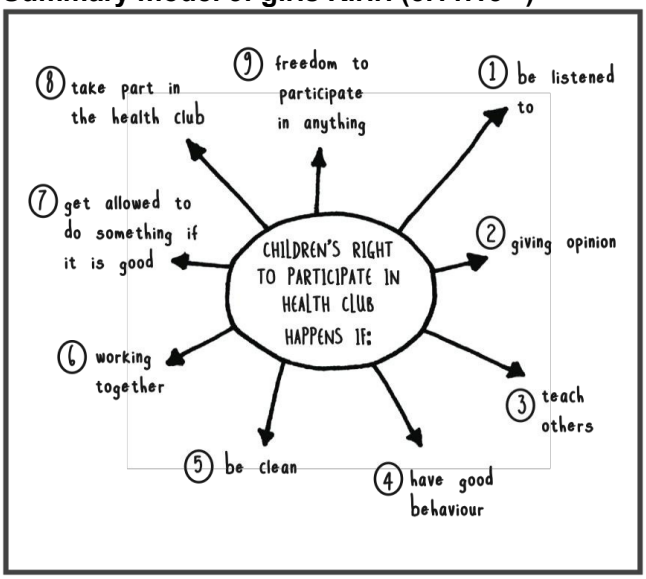
[1] I list the initiatives I knew about, but others of which I was not aware might exist.
[2] KBC stands for Kenyan Broadcasting Corporation Channel.
[3] I also give my diary pages as an information source, since I reported the content of my interview with the respective person of the implementing organisation (Table 10).

Figure 13: Summary models on children's understanding of their right to participate in the health club[1]

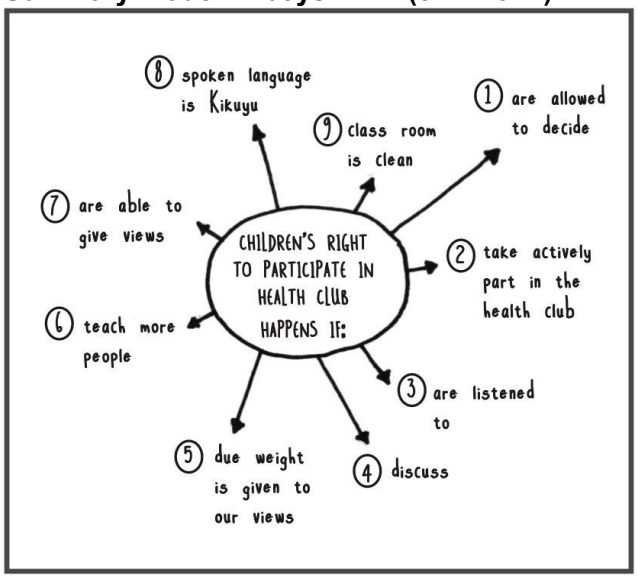
Summary model 2: girls Gatuura (6.11.13*)



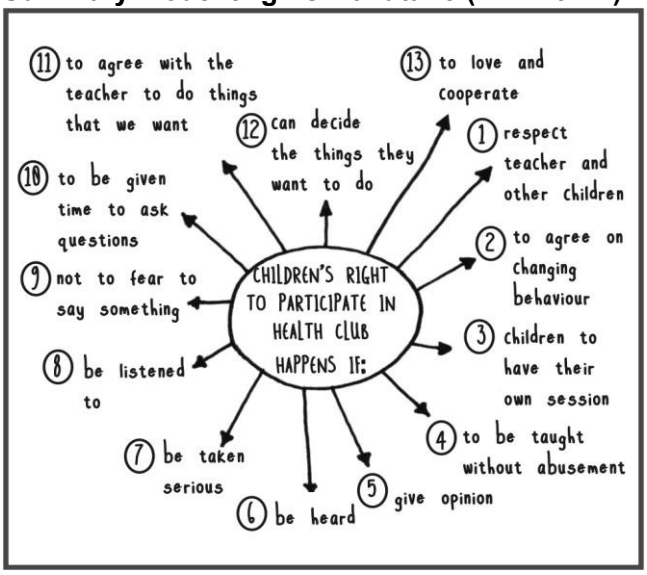
Summary model 3: girls Kiriri (5.11.13)**



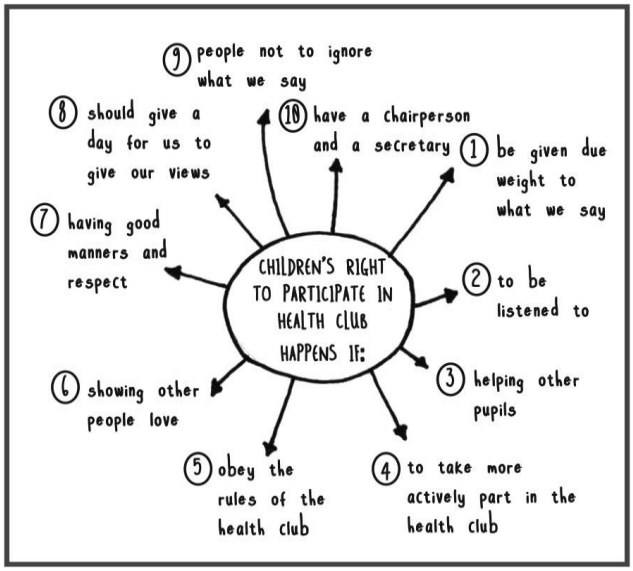
Summary model 4: boys Kiriri (5.11.13*)**



Summary model 5: girls Makutano (7.11.13**)**

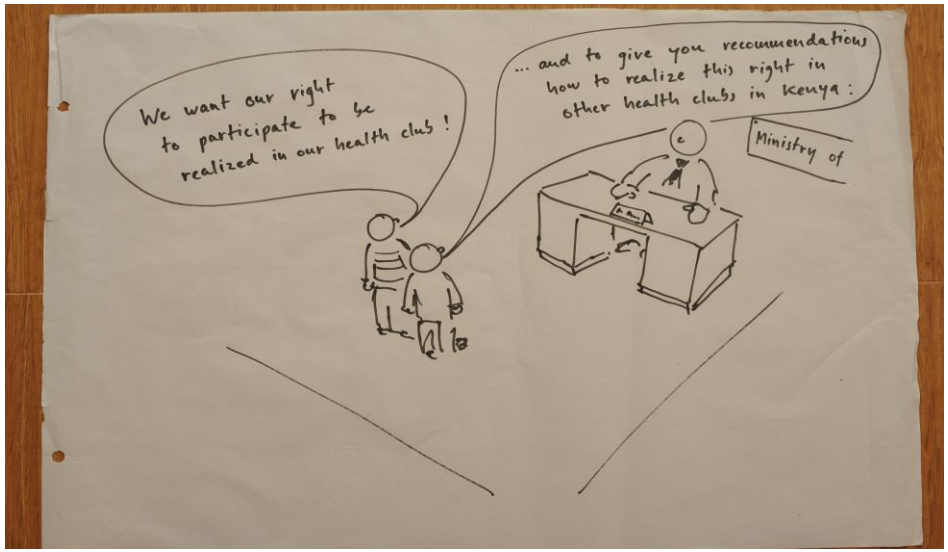


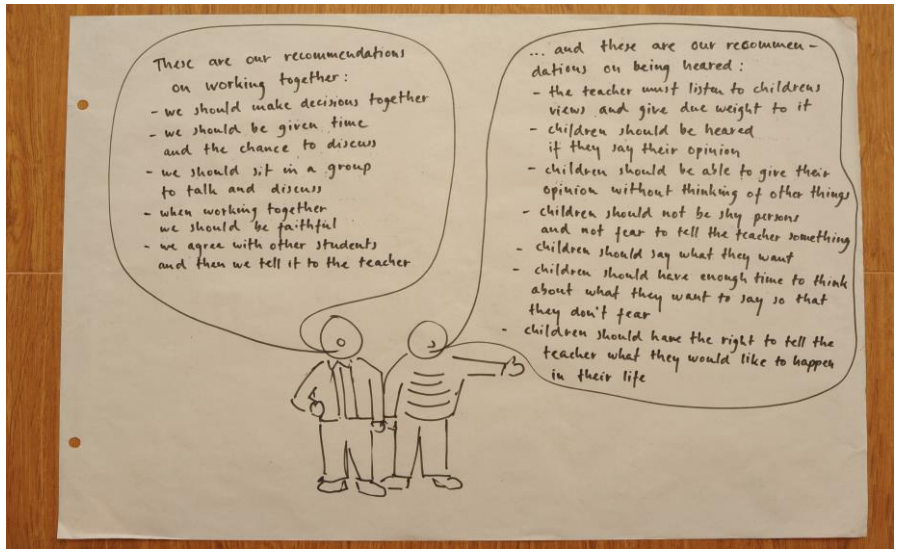
Summary model 6: boys Makutano (7.11.13***)**

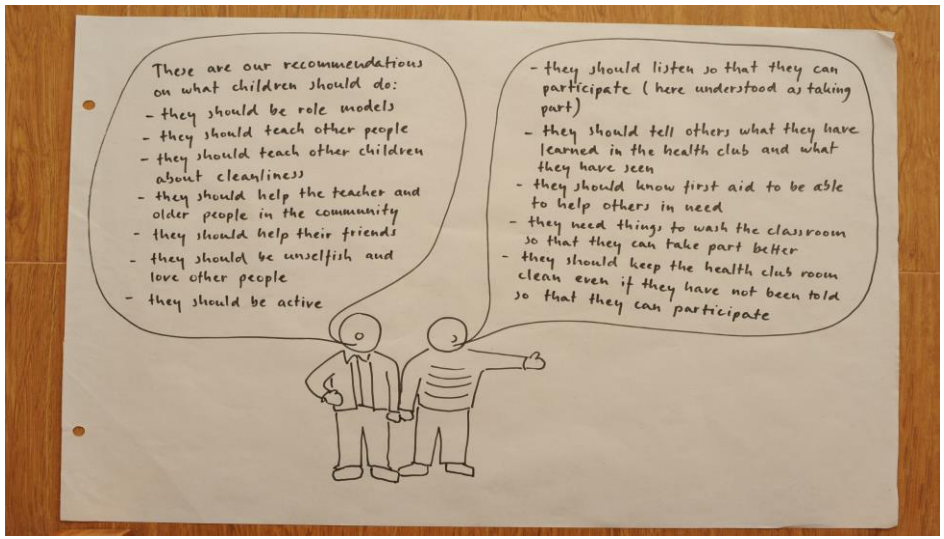


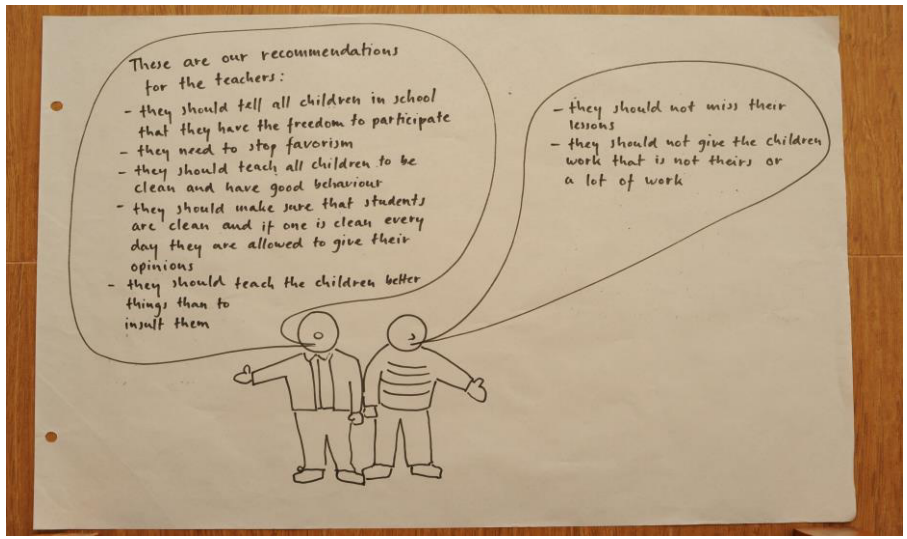
[1] Summary model 1: boys Gatuura see Figure 7 in chapter 3.5.3.3
*research facilitator's protocol of a children's session:
*g. G. No. 47
**g. K. No. 46
***b. K. No. 49
****g. M. No. 48
*****b. M. No. 51

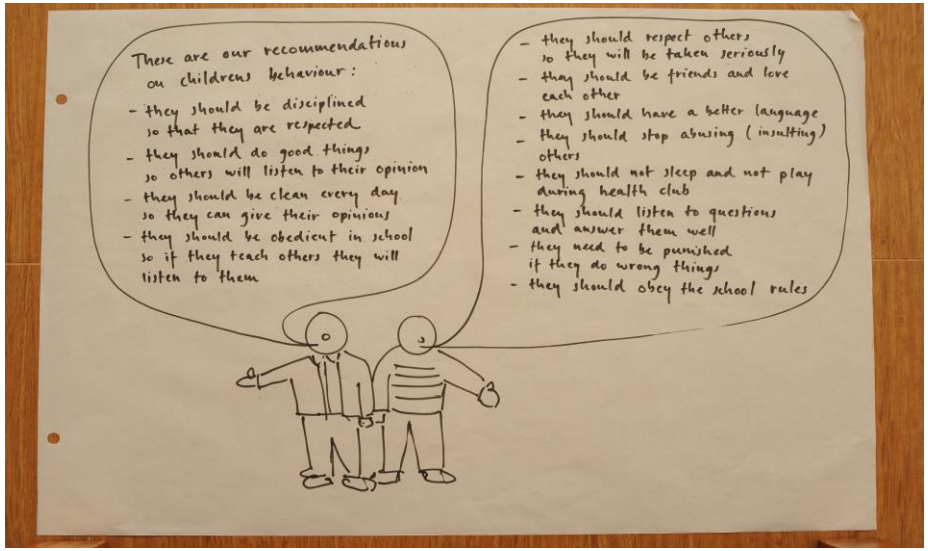
Figure 14: Interim results: series of posters summarising children's recommendations for realising their right to participate*

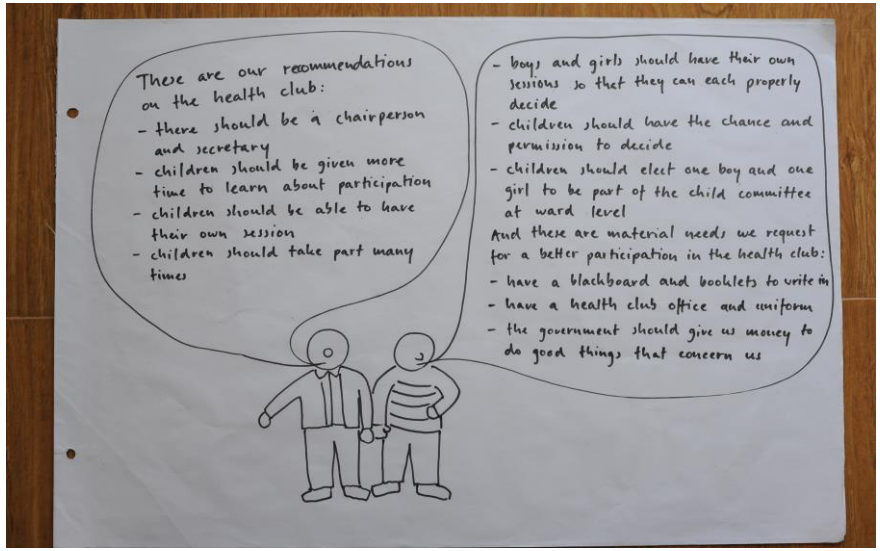


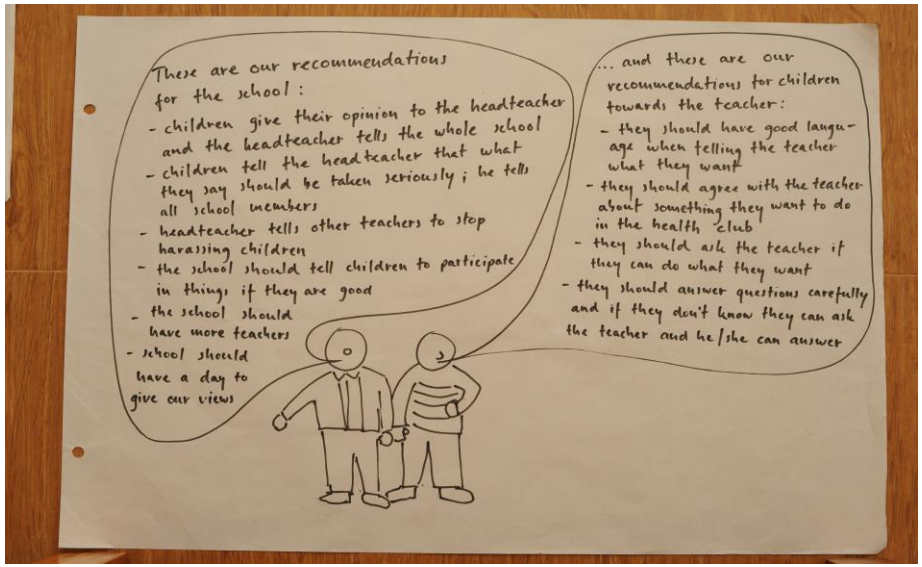












*summarising results from research facilitators' protocols of children's sessions: g. K. No. 79, g. G. No. 80, g. M. No. 81, b. K. No. 82, b. G. No. 83, b. M. No. 84

Table 8: Key features of differences and some similarities that unfolded during my data analysis in three sample schools

Feature	Schools located in the area of Ndeiya (Kiambu County in Kenya)			Source of information
	Kiriri Primary School	**Gatuura Primary School**	**Makutano Primary School**	
Topic: children				
Age	10-13 years			chapter 3.3.2
Selection procedure	voluntary sample selection			
Attendance during PAR	good attendance, also during school holiday	good attendance by girls, less by boys; little attendance during school holiday	good attendance, also during school holiday	chapter 3.8.5, Table 9
Engagement in PAR	very engaged, also after school holiday	engaged at PAR start, after school holiday boys more engaged than girls	very engaged, also after school holiday	diary 3:6
Ability to control own actions	girls yes, boys needed support	boys/girls needed adults' support	girls yes, boys needed support	chapter 4.3.4.3
Topic: schools				
Different geographical location	eastern part of Ndeiya region	northern part of Ndeiya region	south-western part of Ndeiya	chapter 3.3.2
Location in area of Ndeiya	more rural area	mixture of rural and urban area	more urban area (road, shops)	
Impression on discipline	medium discipline of learners	poor discipline of learners	good discipline of learners	diary 2:62, 3:5/19
Functioning of health club	most active: met regularly; be-longingness; learned on health	least active: did meet irregularly; unclear membership	active: met regularly, but seldom; learn little on health, do cleaning	chapter 5.6
Commitment to PAR	very committed	not committed	modest committed	chapter 3.2.3
Head teachers				
Interest/involvement in PAR	very interested/involved	little interest/no involvement	fairly interested/little involvement	chap. 3.2.3, 4.3.6.2
Knowledge on children's right to participation	profound knowledge	no knowledge	little knowledge	diary 2:45/47-48
Key persons				
Interest/involvement in PAR	very interested/involved	little interest/involvement	interest/involvement got less	chap. 3.8.4, diary 4:49
Relationship towards children	cooperative/directive	authoritative	authoritative/trusting	chapter 3.4.3
Position in school/health club	school teacher/health club teacher for 4 years	school teacher/new club teacher	senior school teacher/assistant club teacher	chapter 3.4.3, 3.8.4
Parents				
Interest	very interested	little interested	very interested	chap. 3.8.6, diary 4:46
Attended/engaged in FGD	all attended/engaged	three attended/little engaged	all attended/engaged	chapter 3.6.2, 3.8.6
Topic: research area (Ndeiya)				
Understanding of childhood	understanding of childhood is similar to that known in the whole country of Kenya			chapter 2.1.3
Socio-economic situation	one of the poorest areas in Kenya			chapter 2.4.2
History of realising children's participation right	schools/communities have little history in children's participation: StC/MoPHS set up school clubs; StC involved children in start of CSHP; celebration of Day of African Child; few child members in National Child Committee			chapter 2.3.4

Figure 15: Three points of differentiation between token and genuine student participation (Simovska 2007)

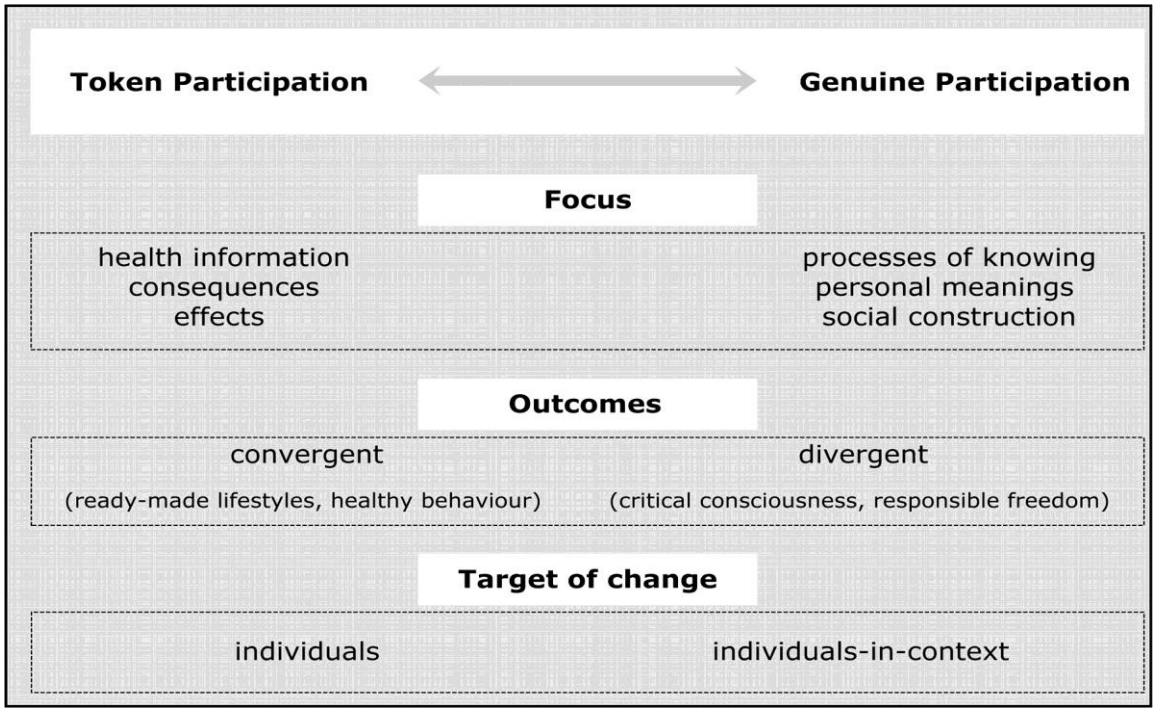


Table 9: Age range of selected children and average attendance during school and holiday times

	Kiriri Primary School			Gatuura Primary School			Makutano Primary School			
	Girls	Boys	**total**	girls	boys	**total**	girls	boys	**total**	**Overall total**
Number of pupils of 10 years	3	2*	**5**	2	1	**3**	4	1	**5**	**13**
Number of pupils of 11 years	2	3	**5**	1	5	**6**	2	5	**7**	**18**
Number of pupils of 12 years	3	4	**7**	7	3	**10**	5	2	**7**	**24**
Number of pupils of 13 years	4	3	**7**	2	3**	**5**	1	4	**5**	**17**
Total										**72**
Average attendance during school time before holiday⁺	13	12		11	10		12	11		
Average attendance during holiday time⁺⁺	7	7		3	2		7	8		
Average attendance during school time after holiday⁺⁺⁺	16	9		9	5		10	10		

*one of these boys was 9 years old
**one of these boys was 15 years old

⁺school time: 7.9. to 21.11.13
⁺⁺school holiday: 26.11. to 19.12.13
⁺⁺⁺school time: 7.1. to 23.1.14

Table 10: List of selected experts I talked to on the implementation of children's right to participation in Kenya

Organisation	Type of conver-sation	Subjects discussed	Date of conver-sation	Content re-ported at
United Nation Children's Fund (UNICEF)	telephone	- interventions, good practices on children's participation in Kenya - understanding of children's participation; challenges, gaps in children's participation practices in Kenya	23.1.14	diary 8:20-25
Save the Children (StC)	telephone	- documents on helpful information of StC's interventions in Ndeiya region - my experience with the habit of caning children in Ndeiya	14.1.14	diary 7:45-46
Kenyan Alliance for Advancement of Children (KAACR)	personal meeting	- interventions, strategies on children's participation; practices for children's ownership; work on SRH - Child Rights clubs, CRC reporting; celebration of Day of the African Child, Day of Ch.'s Voices - understanding of children's participation, good practices; experience in habit of caning children	6.12.13	diary 5:29-39
National Council for Children's Service (NCCS)	personal meeting	- set up, function of Child Participation Committee, Day of the African Child, Children's Assembly - children's actual participation in these structures; CSHP's possible link to Children's Assembly	10.12.13	diary 5:49-52
PLAN International	personal meeting	- interventions, challenges on children's participation, interventions linked to CSHP - interventions on children's participation in Kenya, what is needed - recommendations on implementing children's participation in CSHP, e.g. parents' involvement	29.11.13	diary 5:7-14
Children's Legal Action Network (CLAN)	personal meeting	- experience with children's rights clubs, children's empowerment, e.g. involve teachers in club managing - difficulties with interventions on children's participation in Kenya, e.g. Child Participation Committee	15.11.13	diary 4:43-48
GIZ representative child's right (Eschborn)	telephone	- GIZ documents, interventions on children's rights	29.10.13	diary 4:14
Ministry of Public Health & Sanitation (MoPHS)	personal meeting	- history, structure of CSHP implementation in Kenya; funding of it by various organisations - specific implementation structure of CSHP by StC in Ndeiya region	11.10.13	diary 4:33-38
German Society for International Cooperation (GIZ) officers at HSP Kenya	personal meeting	- GIZ's general interventions, on health, Sexual Reproductive Health, rights based-approach to health - GIZ's support to CSHP development, to other national interventions with children	22.2. & 15./ 28.3.12	diary 2:30-32/ 50-51

Figure 16: Speech babble story to explain Article 12.1 to children

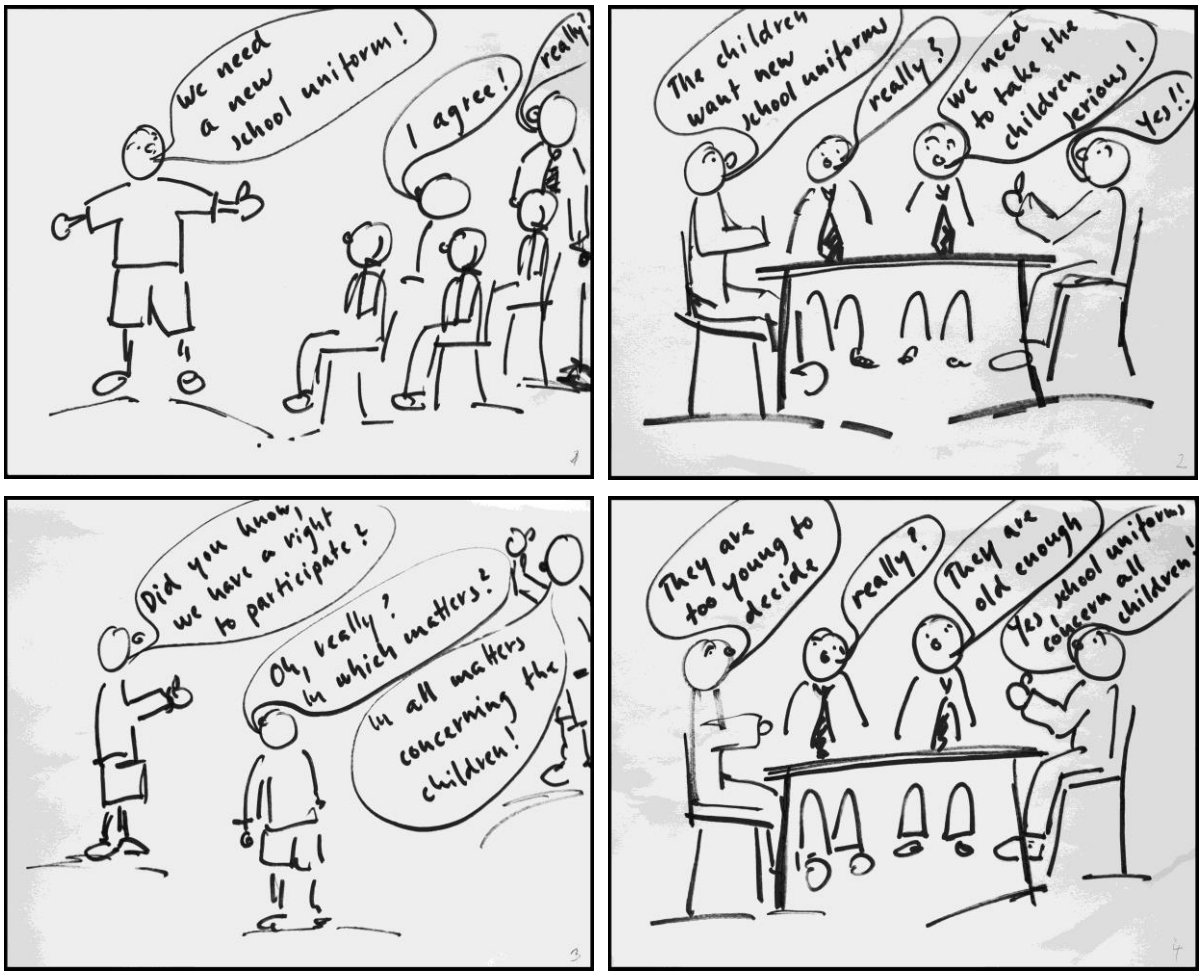


Table 11: List of small tasks given to children at the end of each session

Session	Task given to children
1	Talk to others in the community or home about what one needs to be healthy
2	Talk to three friends in school on how they would like to be more involved within the school
3	Write down every activity you are involved in during your everyday school life within this week
4	Draw situations in which you are able to be involved in decision-making or to decide by yourself
5	Ask five people in the community and write down what they know about children's rights
6	Explain Article 12.1 to five people in the community and write down what they think about it
7	Make your own puppet out of any locally available material
8	Think about a puppet play in which you participate in decision-making in the health club
9	Think about rules for the health club and write these down on a paper
10	Think about more health club rules which will help you to participate in the health club
11	Write down ideas on why it is difficult for you to participate according to Article 12.1 in the health club and work on actions for chosen change at school
12	Work on actions for chosen change at school and think about how to show other children what you learned during the PAR
13	Draw a map indicating locations where you are able to participate (symbolise with '+') and locations where you are not able to participate (symbolise with '-')
14	Write down or draw ideas on the four subjects: What is a child? What does it mean to be a child? What is an adult? What does it mean to be an adult?
15	Ask five friends what they want to learn about Sexual and Reproductive Health (SRH)
16	Tell four friends what you learned about SRH

Table 12: Overview of the field research period of my Participatory Action Research (PAR) (September 2013 to January 2014)

Session	Phase of PAR	Date	School	Subjects (main subject: children's right to participate; second subject: children's desired changes; research organisation and parents sessions)	Method used	Boys attended	Girls attended	Parents attended	Specific remarks
Organisation		02.09.13		Meeting district education officer and selection of 3 schools	Discussion				
0	1. PAR Phase	11.09.13	Kiriri	1.) Introduction of research to head teachers	Discussion				
			Gatuura	2.) Discussion on needed key persons					
			Makutano	3) Selection of 12 boys and 12 girls	Stratified purposive sampling selection				
1		17.09.13	Kiriri	1.) Introduction of research to parents and in a separate session to children	Presentation, Discussion			21 parents	Research facilitators forgot to count number of children in each group
		18.09.13	Gatuura	2.) Parents sign consent forms (Annex: Fig. 20)				12 parents	
		19.09.13	Makutano	3.) Children's views on what is needed to be healthy	Brainstorming*, FGI			18 parents	
2		24.09.13	Kiriri	Children's views on their involvement in their everyday lives	Circle Diagramm*, Focus Group Interview (FGI)	13 boys	17 girls		
		25.09.13	Gatuura			12 boys	15 girls		
		26.09.13	Makutano			12 boys	12 girls		
3		01.10.13	Kiriri	Children's views on what they like in school/health club and what they want to change	Ranking Line (Annex: Fig. 21), FGI	14 boys			Research facilitator forgot to count number of girls in each group
		02.10.13	Gatuura			11 boys			
		03.10.13	Makutano			12 boys			
4		08.10.13	Kiriri	1.) Continue on children's views on what they like in school/health club and what they want to change	Ranking Line (Annex: Fig. 21), FGI	14 boys	13 girls		
		09.10.13	Gatuura			11 boys	15 girls		
		10.10.13	Makutano	2.) Children's views on what they want to change as part of this research	Preference Ranking (Fig. 8 in chapter 3.5.3.3), FGI	12 boys	12 girls		
5		15.10.13	Kiriri	Children's views on 1.) What is their right to participate? and 2.) In which situations were they able to take part in decision-making?	Drawing in Groups*	13 boys	15 girls		
		16.10.13	Gatuura			11 boys	11 girls		
		17.10.13	Makutano			9 boys	12 girls		
6		22.10.13	Kiriri	We explained and discussed Article 12.1 (children's right to participation) to the children	Discussion, used my drawings (Annex: Fig. 16)	13 boys	13 girls		
		23.10.13	Gatuura			12 boys	12 girls		
		24.10.13	Makutano			11 boys	12 girls		

7	2. PAR Phase	29.10.13	Kiriri	1.) Repetition on Article 12.1	Four Corners*	14 boys	16 girls			
		30.10.13	Gatuura	2.) Children's views on how their right to participate helps the health club	Web Method*, FGI	9 boys	10 girls		Children did not understand the question of this Web Method	
		31.10.13	Makutano			12 boys	12 girls			
8		05.11.13	Kiriri	1.) Children's views on what the children's right to participate is (Articel 12.1)	Brainstorming*, FGI	14 boys	14 girls			
		06.11.13	Gatuura	2.) Children's views on what needs to happen so that they can participate in the health club according to Article 12.1	Web Method* (Fig. 6 & 7 in chapter 3.5.3.3), FGI	14 boys	12 girls		Children understood well this reformulated question of the Web Method	
		07.11.13	Makutano	3.) Introduction of Puppet Story by practicing a story of puppets' greeting each other	Practice Puppet Story*	12 boys	12 girls			
9		11.11.13	Kiriri	1.) Children's views on general issues of health club	FGI	10 boys	10 girls			
		13.11.13	Gatuura	2.) Children's views on how to make the changes that they chose for their school/health club happen	Discussion	2 boys	1 girl	Session done togethor with boys & girls		Defining actions to make changes happen was difficult
		14.11.13	Makutano			3 boys	7 girls	Session done togethor with boys & girls		
10		19.11.13	Kiriri	1.) Children's views on the application of their newly formulated health club rules	Agree-Disagree Method*, FGI	5 boys	8 girls			
		21.11.13	Gatuura	2.) Children's views on actions they could do to make changes that they chose for their school/health club happen	Problem Tree 1*, FGI	5 boys	9 girls		Problem Tree helped children to define actions on how to make changes happen	
		21.11.13	Makutano	3.) Children's puppet stories on a situation in which they decide in the health club	Puppet Story*	12 boys	11 girls		Only the girls in Kiriri showed a Puppet Story (chapter 4.2.1.1)	
11		26.11.13	Kiriri	1.) Children's views on how their newly formulated health club rules ensure their participation in club	Barometer 1*	8 boys	8 girls			
		27.11.13	Gatuura	2.) Children's views on how their additional defined health club rules help them to participate in club	Barometer 2*	4 boys	3 girls	Session done togethor with boys & girls		
		28.11.13	Makutano	3.) Children's views on which rules should be added to the health club rules to ensure their participation	FGI	7 boys	9 girls			
12		03.12.13	Kiriri	1.) Children's views on which aspects of their right to participation (each group's summary model, Fig. 7 & Annex: Fig. 13) are difficult to realise	Paper Slip Method*, FGI	9 boys	9 girls			
		04.12.13	Gatuura			2 boys	1 girl	Session done togethor with boys & girls		
		05.12.13	Makutano	2.) Discuss with children how they could teach other children about their participation right and the new health club rules	Discussion, Poems*	7 boys	8 girls			

13		10.12.13	Kiriri	1.) Children's views on difficulties that explain why their chosen aspects of their right of participation (results of Paper Slip) are difficult to realise	Road Block*, FGI	6 boys	6 girls		
		11.12.13	Gatuura	2.) Discuss with the children the actions they have carried out to make their chosen changes at school/health club happen	Discussion	1 boy	5 girls		Nearly all 6 groups of children had difficulties organising to make their chosen change happen
		10.12.13	Makutano			6 boys	7 girls		
14		17.12.13	Kiriri	1.) Children's views on which places in the community they were able and where unable to participate	Community Mapping*, FGI	5 boys	6 girls		
		18.12.13	Gatuura	2.) Children's views on risks and advantages of their participation at each place on their map (results of Community Mapping)	Advantages/Risks of children's participation*, FGI	2 boys	2 girls		
		19.12.13	Makutano	3.) Children's recommendations on how to realise their right to participate in the CSHP nationwide	Problem Tree 2*, FGI	6 boys	7 girls		Children's recommendations are interim results (Annex: Fig. 14)
15		07.01.14	Kiriri	1.) Children's views on who is a child and who is an adult	Boxes*, FGI	8 boys	14 girls		
		08.01.14	Gatuura	2.) Children's views on what is important and not important for them to learn on the subject of SRH	Card Sorting*, FGI	7 boys	14 girls		
		09.01.14	Makutano	3.) Discuss with children series of posters summarising their recommendations on how to realise their right to participate in the CSHP nationwide	Discussion	12 boys	9 girls		Series of posters summarises children's recommendations (interim results, see Annex: Fig. 14)
		10.01.14	Makutano	Teachers training				4 teachers (2 w, 2 m)	
16		14.01.14	Kiriri	1.) Children discuss their chosen SRH subject (results of Card Sorting*) in small groups of 4-5	Discussion Group 1*	9 boys	17 girls	13 parents (12 w, 1 m)	
		15.01.14	Gatuura	2.) Respond to children's questions they have from their discussions and on their chosen SRH subject	Explaination	3 boys	1 girl	3 parents (3 w)	
		16.01.14	Makutano	3.) Separate session with parents to discuss subjects of: children's right to participation, series of posters on children's recommendations, caning children, our research etc.	Boxes*, Focus Group Discussion	8 boys	11 girls	13 parents (12 w, 1 m)	
		17.01.14	Makutano	Verification meeting with children: their views on some topics of my preliminary results, e.g. agency, insulting one another, being caned	FGI	6 boys	6 girls	Session done togethor with boys & girls	
17		21.01.14	Kiriri	1.) Children's feedback on our research	Discussion	11 boys	17 girls		
		22.01.14	Gatuura	2.) Hand out certificates and small prizes to children for drawing competition (Annex: Fig. 18)		6 boys	10 girls		
		23.01.14	Makutano			10 boys	11 girls		

*see Mahr-Slotawa (2020) for explanation of each PLA method applied and graphics of our results gained from each method

Figure 17: One example of research facilitators' instructions that I wrote for each of the 17 children's sessions

Eighth session with children at each of the three schools (5./6./7.11.13)*

Objective and methods used:

a) **Brainstorming** on what the children's right to participate is
b) **Web Method** on what needs to happen so that you can participate in the health club in the way that Article 12.1 says?
c) **Follow-up** on main aspects from the last session, which concerned the health club and changes at school
d) **Introduction to puppets** and a small game about puppet greetings
e) **Task for next week:** practice or think about a small puppet show on a scenario in which you as children participate in decision-making in the health club

Semi-structured guidelines for the session:

a) **Brainstorming** on what the children's right to participate is (how can this right help you?)
   - ⇨ Brainstorm with the children on what they understand their right to participate is (e.g. voice my opinion, say what I want, share my views)
   - ⇨ Write all the ideas, thoughts and other aspects mentioned on a flipchart paper
     - ➢ **Result**: Know and summarise what the right to participate is for the children

b) **Web Method on** what needs to happen so that you can participate in the health club in the way that Article 12.1 says?
   - ⇨ Ask children to discuss the subject with a neighbour: What needs to happen so that you can participate in the health club in the way that Article 12.1 says?
   - ⇨ They could come up with examples, ideas, thoughts, questions etc.
   - ⇨ Each pair of children writes their points on paper (each point on one paper)
   - ⇨ Give them enough time and then collect all points
   - ⇨ While placing each of the points on the Web Method drawn on ground, you organise all points into logical groups in cooperation with the children
   - ⇨ Each group of points should be placed at different distances from the centre, where health club is written
     - o The points placed nearest to the centre are most important for children's participation in the health club to happen
     - o The points placed furthest away are not so important for children's participation in the health club to happen
   - ⇨ Discuss with the children while carrying out the activity and make sure you understand the points they mentioned
     - ➢ **Results:** Find out what the children think should happen in order to be able to participate in the health club (participation understood as in Article 12.1)

c) **Follow-up** on main aspects from the last session
   - ⇨ Follow-up main aspects from the last session, which concerned the health club and changes at school
   - ⇨ Find your own way to discuss with the children all points that I marked in your protocol from last session, e.g. Where did the children learn about their rights? (in one school they also learned about their right to participation)
     - ➢ **Results**: Have all open questions answered

d) **Introduction to puppets** and small game of puppet greetings
   - ⇨ two children introduce their puppets to each other
   - ⇨ they should find a way to talk differently, as the puppet might talk
   - ⇨ they choose a simple story in which the puppets greet each other, briefly practice it and show to the whole group
     - ➢ **Results**: Children got first impression of how to work with their puppets

e) **Task for next week:** Practice or think about a small puppet show based on a scenario in which you, as the children, participate in decision making in the health club

*The results of these sessions are in the research facilitators' protocols of: g. K. No. 46, g. G. No. 47, g. M. No. 48, b. K. No. 49, b. G. No. 50, b. M. No. 51

Figure 18: Example of children's drawings on the subject of children's participation[1] (boy*, Kiriri, 14.1.14)**

[1] These two pictures complete the picture story on the front cover of this book. We chose these pictures to win first prize in the competition, which we ran on children's drawings on the subject of the children's right to participate during last two weeks of the PAR. Each of the three winners received a t-shirt as a prize (see footnote 4, p. 92). All of the other children, who drew a picture, received an exercise book.

*Joseph Maina (12 years) at Kiriri Primary School

**research facilitator's protocol of a children's session: b. K. No. 94

Figure 19: My standards for research facilitators' preparation of each session's protocol

What should be included in the detailed research protocol of the research entitled:

'The Children's Right to Participate within the Comprehensive School Health Programme in Kenya – How can this right become a reality?

- A detailed research protocol is prepared by each research facilitator
- It should include the information described below. This information could first be written in the Kikuyu Kiswahili languages and afterwards should be translated into English
- The final English protocol should be sent to Johanna

Content of each research protocol:

1. General information

- ⇨ Name of school
- ⇨ Date of session and time (start, end, breaks)
- ⇨ Is the session with the boys or the girls?
- ⇨ How many children took part in the session (If children are missing why?)

2. Procedure of the session

- ⇨ Describe what happened, one activity after the other, during the session
- ⇨ Describe how/who decided if a change happens within the session
- ⇨ Describe what actions are taken. Who had the idea?
- ⇨ Did any changes happen? and Why?

3. Representation of the session's content

- ⇨ Write down the main content of the discussions
- ⇨ Write down verbatim the children's words on important statements (e.g. on cards during PLA methods)

4. Visual results

- ⇨ Write down all visual results acquired during the session with the children
- ⇨ Write down the results of each PLA method in detail, showing all information exactly as in the method

6. Observations

- ⇨ Write down any observation which seems important to you
- ⇨ This should include:
  - o Children's reactions, roles and interactions
  - o Impressions of children's feelings
  - o Impressions you have from your actions with the children or when applying a PLA method
  - o Reactions from key persons or people who are involved or simply show up

7. General thoughts on differences among the three schools or any other differences, e.g. girls/boys

Figure 20: Information sheet and consent forms that parents signed

20a: Information sheet about the research
20b: Parents' consent form to permit their children's involvement in the research
20c: Parents' consent form to agree on their involvement in the Focus Group Discussion

Figure 20a: Information sheet about the research

We explained the research aims in the meeting. We prepared this sheet to summarise the information. We attach a consent form for you to sign if you agree to your child's involvement in the research.

Summarised information about this research entitled:

The Children's Right to Participate within the Comprehensive School Health Programme in Kenya – How can this right become a reality?

Research Management:

- Johanna Mahr-Slotawa, a student from Germany, is managing the research.
- It is part of Johanna's studies to receive a doctoral degree in Public Health at a university in Germany.
- Johanna has carried out a lot of work with children and young people in Africa and Asia aimed at developing health education programmes in cooperation with the young people.
- The proposed research in Kenya is organised in collaboration with the organisation German Society for International Cooperation (Deutsche Gesellschaft für Internationale Zusammenarbeit, GIZ).

Research objective:

- The objective is to work in a collaborative process with a group of primary school children on approaches to improve their participation within the Comprehensive School Health Programme.

Research design:

- The design is an Action Research that works in collaboration with children on the research question.
- The targeted research areas will be three primary schools in the district of Ndeiya.
- In each school, 12 girls and 12 boys will be involved in the research. They are from different classes and are aged between 10 and 13. They will be selected in consultation with school teachers.
- Group discussions will also be conducted with parents and, separately, interviews with teachers.

Research management:

- The time schedule for the research is: started with small pilot study at one school in March 2012; research will be carried out from September 2013 to January 2014 in three primary schools.
- The research team consists of the research manager, Johanna, two research facilitators and one key person at each school. The key persons should be well known to the children and able to work with them once the research is finished.

Research notices:

- A few important notices on the research process, which were already discussed in the meeting:
  - Questions about the research and all related aspects can be asked at any time.
  - A collaborative approach is used to work with the children during the entire research period.
  - The research facilitators will write a protocol of each session in English. The information will be kept anonymous. The results of each protocol will be verified with the children.
  - The children and adults involved in this research are free to withdraw at any time or to decline to discuss any particular questions.

Figure 20b: Parents' consent form to permit their children's involvement in the research

To be completed by the parent

I hereby agree that my child will be able to take part in the study entitled: The Children's Right to Participate within the Comprehensive School Health Programme in Kenya – How can this right become a reality?

During this study, my child will be involved in a research session once a week at the school and explore the research question in collaboration with the research team and 11 other students. I agree that:

☐ My child can be involved in the above described research process

☐ I am aware that the research period from September 2013 to January 2014 includes the holiday time during which the research will continue.

☐ Yes, my child will be able to attend the weekly research sessions during the school holidays as well.

☐ No, my child will not be able to attend the weekly research session during the school holidays.

I have attended the information session about the research and read the information sheet. I therefore know what the study is about and how my child will be involved. I know that my child does not have to answer all questions and can withdraw from the research process at any time.

For further question, I can always talk to the key person for the research at our school or the research team.

Name of the child: _____

Name of parent: _____

Date: _____

Signature: _____

Figure 20c: Parents' consent form to agree on their involvement in the Focus Group Discussion

I hereby agree to take part in the study entitled: The Children's Right to Participate within the Comprehensive School Health Programme in Kenya – How can this right become a reality?

Apart from the research with the children, Focus Group Discussions (FGD) will take place with parents separately. I agree to take part in these FGD.

☐ As a parent, I take part in the Focus Group Discussions

I have attended the information session about the research and read the information sheet. I therefore know what the study is about. I know that I do not have to answer all questions and can withdraw at any time.
For further question, I can talk to the key persons for the research at our school or to the research team.

My name: _____

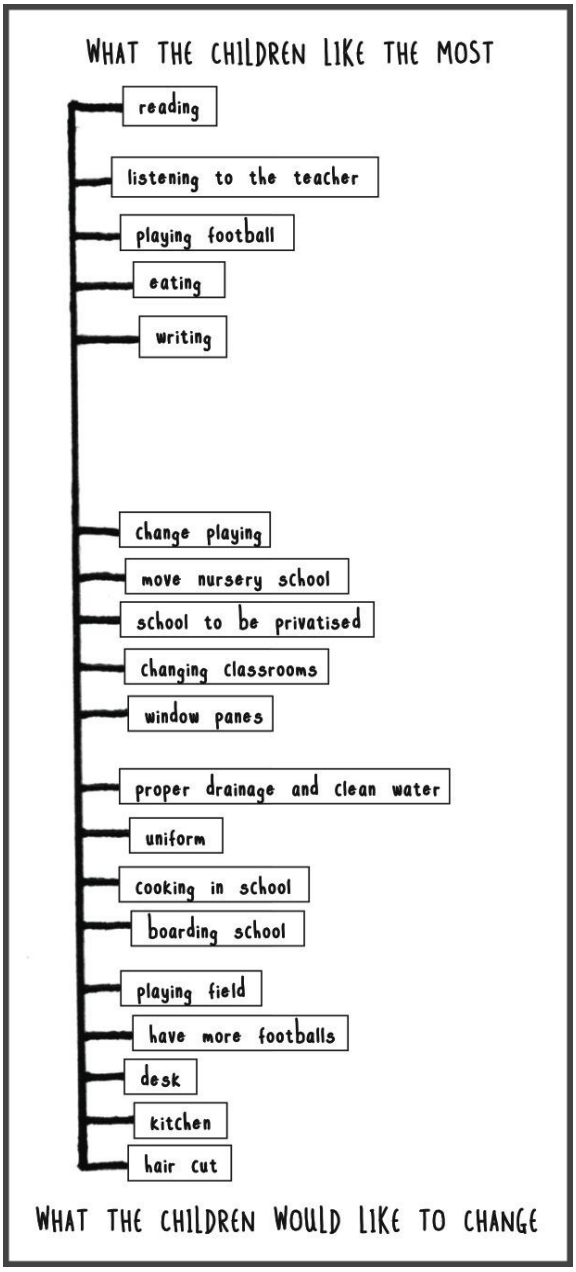
Date: _____

Signature: _____

Figure 21: Ranking Lines on likes and changes at school/health club

Explanation of method Ranking Line: The method of a Ranking Line is generally used to place things on a drawn line in order of their importance (IHAA 2006, Pretty et al. 1995). With the use of this Ranking Line in my PAR, the children decided, first, what they liked about their everyday school life and what they wanted to change (Figure 21a). The research facilitators wrote each point, which the children mentioned on this subject, on one paper. The children then ranked all their points along a vertical line drawn in the sand. On the top of the line they placed the points they liked the most about their school life and on the bottom the points they wanted to change the most. They often discussed where to place the points and replaced some when adding the next ones. We used the method of Ranking Line a second time on children's likes and changes in the health club (Figure 21b).

Figure 21a: Ranking Lines on likes and changes about school life (boys, girls Kiriri, 1.10.13*)



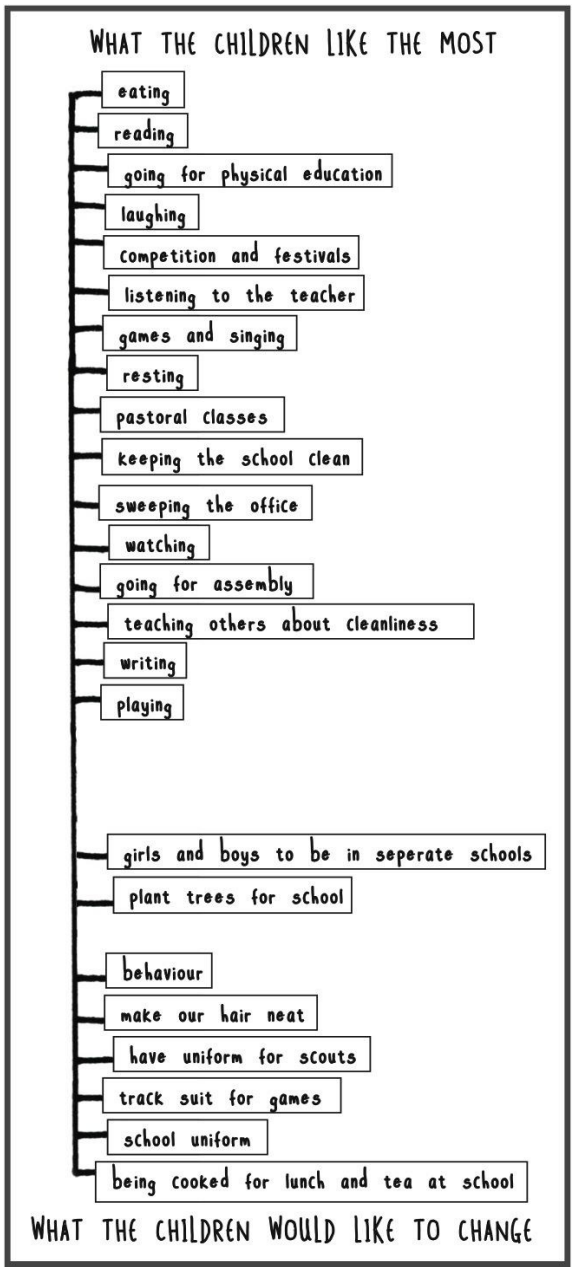
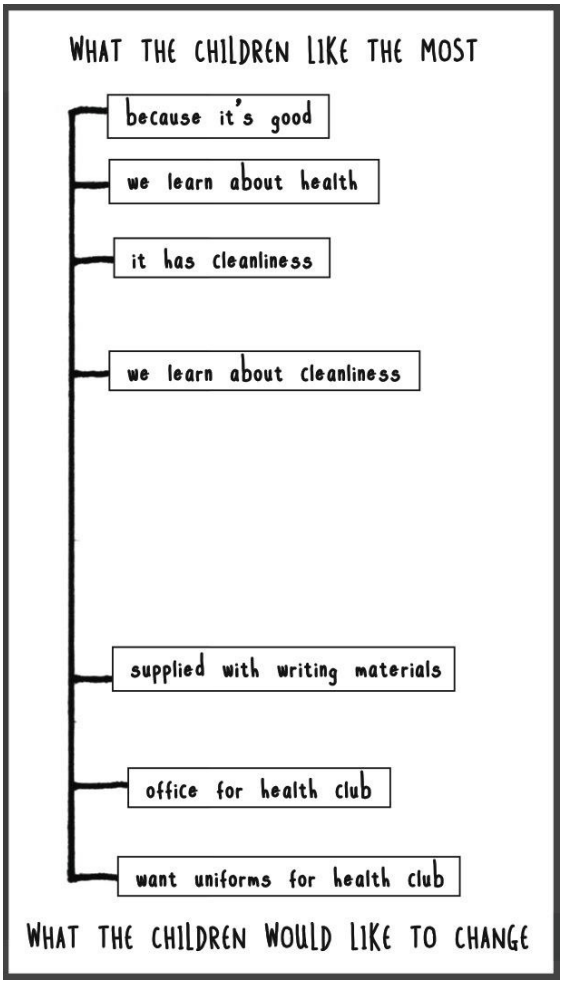
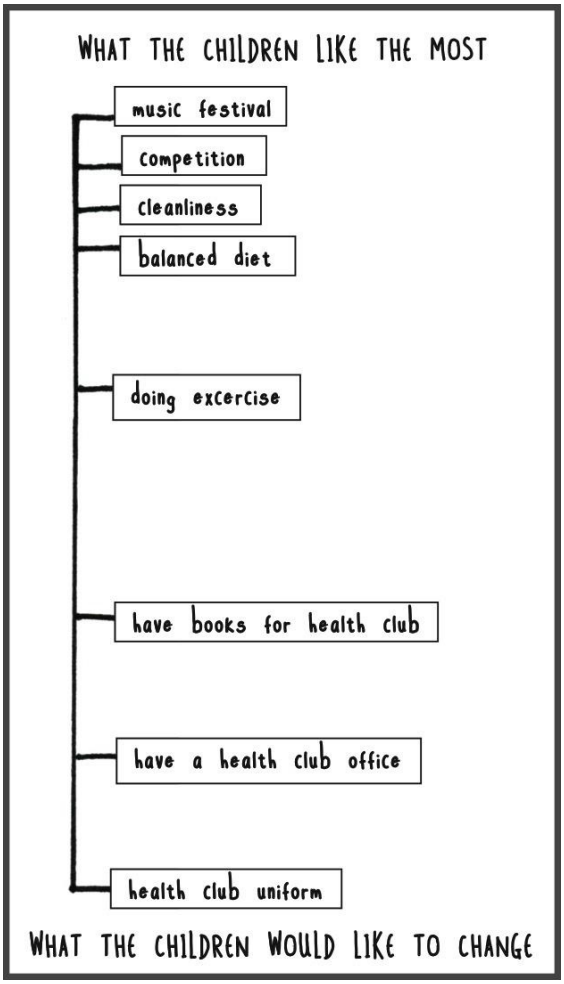


Figure 21b: Ranking Lines on likes and changes at the health club (boys, girls Kiriri, 1.10.13*)





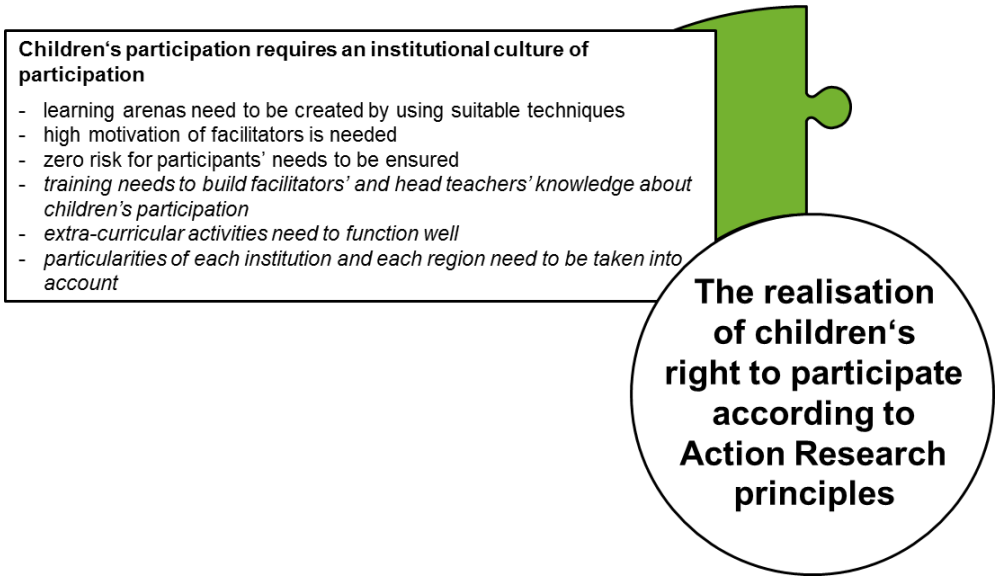
*research facilitators' protocols of children's sessions: g. K. No. 16, b. K. No. 19

Table 13: First coding approach resulted in 22 categories[1]

Categories formed in MAXQDA[2]
No 1: Children's involvement in everyday activities
No. 2: School environment
No. 3: Concepts and understanding of childhood
No. 4: Adult-child interaction
No. 5: Existing ways of children's participation
No. 6: Children's rights in general
No. 7: Facilitation of children's participation
No. 8: Understanding of children's participation
No. 9: Power structures
No. 10: Children as partners in health
No. 12: Participatory Action Research conducted
No. 13: Participatory learning approaches about health
No 15: Recommendations to realise children's right to participate in nationwide CSHP
No. 16: Design and organisation of research
No. 17: CSHP at the three schools
No.18: Important differences among three schools
No. 19: What is needed to be healthy (contribution to health)
No. 20: Subjects to take up when working on SRH
No. 21: Interaction between children not linked to participation
No. 22: Take up when working further on participation

[1] I presented my categories. The presentation of my 223 codes would be too much and they are similar to my results presented in Puzzle model 1 (Figure 10, chapter 4.2).
[2] I am aware that I missed out category No. 11 within my coding structure.

Figure 22: The complementation to the sixth component of my Puzzle model 3 on 'children's participation requires an institutional culture of participation'*



*I describe the three complementing obligations to this sixth component of Puzzle model 3 (Figure 12, chapter 4.4) in chapter 5.6 and 5.7.

Table 14: My recommended objectives and contents for facilitators' (e.g. teachers') training (general and for CSHP in Kenya)

	General	CSHP in Kenya
Objectives	Equip for implementing my Puzzle model 3 (Fig. 12, chapter 4.4 & Fig. 22: Annex); build up lasting high goal value for children's participation	
		Inform on children's right to participation is core value of CSHP; several Kenyan school clubs realise it; practices of children's participation are part of most Kenyan families' routines
		Equip for realising children's right in my Puzzle model 3's broad sense: includes to strengthening adults' skills that they acquire usually during daily children's participation practices, e.g. educate children by dialogical encounters or carry out daily tasks cooperatively
		Equip with skills that ensure children's participation in 'all fora' of CSHP
Contents	Teach necessary new skills for my Puzzle model 3's broad understanding of children's participation right, e.g. work collaboratively with children	
	Teach anticipated understanding of right	for CSHP include: children's instance that they be educated in behaving well and speaking respectfully to adults
	Define content-specific means to implement my Puzzle model 3	for CSHP such means could be 'fora' of: health learning is a dialogical exchange process; involve children in health committee and Action Plan design for CSHP; existing participatory initiatives become more collaborative
	Reflect each context's challenges for the realisation of my Puzzle model 3	for CSHP reflect on: habit of caning children; adults' commanding attitude towards children; children's risks of practicing participation; Article's 12.1 stated participation being an alien notion
	Determine requirements to implement my Puzzle model 3 sustainably, e.g. how to overcome challenges; select motivated facilitators; ensure that children enjoy and know benefits of their participation; children are not forced to participate and gain ownership for mutually developed actions	
	Teach monitoring the realisation of my Puzzle model 3 by using its six components as indicators, e.g. is children's participation a collaborative dialogue between adults; is their participation focused on realised action; assess whether children's 'reality really counts'	

Selbständigkeitserklärung und Erklärung über frühere Promotionsversuche

Hiermit bestätige ich, dass ich die vorliegende Arbeit selbständig verfasst und keine anderen als die angegebenen Hilfsmittel benutzt habe. Die Stellen der Arbeit, die dem Wortlaut oder dem Sinn nach anderen Werken (dazu zählen auch Internetquellen) entnommen sind, wurden unter Angabe der Quelle kenntlich gemacht.

Hiermit erkläre ich zudem, dass ich keinen vorausgegangenen Promotionsversuch unternommen habe, und dass kein Promotionsversuch an einer anderen wissenschaftlichen Einrichtung läuft.

Datum: 29.04.2020_____

Unterschrift: _____
Johanna Mahr-Slotawa