Re-framing Inclusive Education Through the Capability Approach: An Elaboration of the Model of Relational Inclusion

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Abstract
Scholars have called for the articulation of new frameworks in special education that are responsive to culture and context and that address the limitations of medical and social models of disability. In this article, we advance a theoretical and practical framework for inclusive education based on the integration of a model of relational inclusion with Amartya Sen’s (1985) Capability Approach. This integrated framework engages children, educators, and families in principled practices that acknowledge differences, rather than deficits, and enable attention to enhancing the capabilities of children with disabilities in inclusive educational environments. Implications include the development of policy that clarifies the process required to negotiate capabilities and valued functionings and the types of resources required to permit children, educators, and families to create relationally inclusive environments.

Keywords
inclusive education, children with disabilities, inclusive education environments, relational inclusion, Capability Approach, medical model of disability, social model of disability, International Classification of Functionings (ICF)

Introduction
Originally formulated by Sen (1985, 1992) as an alternative theory for economics, applications of the Capability Approach are growing in the field of education, in particular as a foundation for the reexamination of disability within special education discourses, and to challenge dominant perspectives in special education (Reindal, 2009; 2015; Taylor, 2012; Terzi, 2005; 2008; Wasserman, 2006). Two main models of disability—the medical and the social models—have long dominated the discourses of special education. Reindal (2009) identified the main difference between these two models in the way they “explain the interplay between impairment and disability” (p. 156). While the medical model explains an absolute correlation between impairment and disability without the contribution of other factors, the social model identifies the cause of disability in environmental factors, cultural attitudes and social arrangements (Terzi, 2004).
Re-framing inclusive education through the capability approach

Capability Approach does not strictly follow either the medical or the social models of disability, but instead views disability as emerging “from the interaction of personal and circumstantial factors” (Terzi, 2008, p. 99). As an alternative framework to model disability, the Capability Approach offers a theoretical perspective grounded in a “theory of justice that attempts to answer the question of equality” (Reindal, 2009, p. 158).

This article responds to calls by scholars to reconsider the theoretical stance that grounds inclusive education and to propose new frameworks for inclusive education (e.g., Slee, 2011, 2013; Thomas, 2012; Warnock, 2010). Our approach integrates Sen’s (1992) Capability Approach with a practical model of relational inclusion (Dalkilic, 2014). The first section describes two polarized models of disability that theorize the current practices of inclusive education, as well as alternate models based on a synthesis of the two. The second section outlines elements of the Capability Approach. The third section discusses the current context of inclusive education and reexamines the potential of reframing inclusive education through the Capability Approach. The fourth section elaborates a framework integrating a Capability Approach with practices of relational inclusion (Dalkilic & Vadeboncoeur, 2016). A brief discussion of implications concludes the article.

Models of Disability

Scholars have not developed consensus on what constitutes disability, or how it should be defined or measured (Mitra, 2006). Several models have emerged to address the notion of disability and, among them, the medical, social, and political/critical models have defined disability in competing and contradicting ways, based on different agendas, and serving different purposes (Baglieri, Bejoian, Broderick, Connor, & Valle, 2011; Mitra, 2006; Taylor, 2012). Some scholars have argued that the existence of multiple models to explain disability is valuable, as a single model cannot define all aspects of disability and may overlook the complexities in the construction of disability, leading to partial and limited understandings (Mitra, 2006; Pfeiffer, 2001; Taylor, 2012; Terzi, 2005). Others, however, have suggested that in the field of education, practitioners and researchers must be united in a chosen model of disability in order to provide a more equitable form of education to all children (Reindal, 2008). Descriptions of four models follow: the medical model of disability; the social model of disability; the World Health Organization’s (WHO) International Classification of Functioning (ICF) model, and; Reindal’s (2008, 2009) social-relational model of disability.

Medical Model of Disability

The medical model views disability as the “physical product of biology acting upon functioning of individual bodies” (Reindal, 2008, p. 139). Based on this model, disability is the problem and the responsibility of the individual: an unwanted condition that needs to be cured or repaired by the individual (Burchardt, 2004; Mitra, 2006). Thus, there is a causal relationship between an impairment—any physical trait limiting certain functions—and the exclusion, disadvantage, and oppression faced by an individual with an impairment (Slee & Allan, 2001). As such, the impairment must be repaired or normalized for an individual to stop experiencing the disabling conditions that are seen to go hand in hand with disability, such as exclusion. The disability is, thus, the explanation for exclusion (Allan, 2010).

The medical model of disability has received criticism for its implications in education, especially for the practices of inclusive education (see Allan, 2010; Reindal, 2008; Slee, 2001; Terzi, 2004). One implication of this model in education is that it emphasizes “the additionality for the individual child,” meaning it is the child with an additional condition, a disability, who must be adjusted to
fit into the existing classroom practices, rather than reshaping classroom practices for the child (Reindal, 2008, p. 137). A system of inclusive education founded on a medical model of disability defines its purpose as the integration of a child labeled with disabilities into the general culture, or the norm, of the classroom (Slee, 2013). The resulting inclusive educational setting utilizes practices geared toward normalizing the child through the regulation of behaviours; paradoxically, exclusion is a consequence of displaying un-assimilatory behaviours (Allan, 2010; Dalkilic & Vadeboncoeur, 2016; Slee, 2001).

Social Model of Disability

The social model of disability emerged from disability rights activism against the dominant discourses of the medical model of disability (Reindal, 2008; Terzi, 2004). The primary purpose was to move beyond the relationship between a person’s individual impairment and their status of disability as determined by the medical model; the latter being regarded as a direct function of the former (Burchardt, 2004). Instead, the social model of disability identified the role of “specific social and economic structures,” such as “institutional forms of exclusion” and “cultural attitudes embedded in social practices,” in leading to the “social disadvantages” faced by people with physical impairments (Terzi, 2004, p. 141). While the medical model of disability equated a person’s status as disabled with their impairments, the social model redefined disability as a product of social and political practices, attitudes, and structures that resulted in the exclusion and oppression of certain individuals due to their biological characteristics (Burchardt, 2004; Wasserman, 2006). Therefore, the social model situated individuals and the struggles they face within “an oppressive and discriminating social and institutional structure” (Terzi, 2004, p. 143).

Although as many as nine different versions of social models of disability have been identified, each model shares a core assumption: disability is a social construction, rather than an attribute of an individual (Mitra, 2006; Pfeiffer, 2001). Based on social models, disability is different from impairment and can only be overcome by substantial changes in the structure and demands of society (Burchardt, 2004; Mitra, 2006; Wasserman, 2006). For example, an inclusive educational system based on a social model of disability implies the need for structural change in the education system, and particularly in special education; it demands the “inclusivity of the system” and a readiness for the system to be altered, rather than for the child joining the system to be assimilated (Reindal, 2008, p. 137).

The social model of disability, however, is not beyond critique (Terzi, 2004). Indeed, the social model has been critiqued by both those involved in disability rights movements, and scholars outside the movement (Reindal, 2008, 2009; Terzi, 2004). By framing disability as primarily a sociopolitical oppression, the social model of disability lacks an approach to address the “personal restrictions of impairment” (Reindal, 2008, p. 141). Thus, it fails to explain aspects of disability that are not a result of social interaction and exclusion, but of biomedical conditions (Bury, 1996, cited in Reindal, 2008). Finally, the social model of disability denies the utility of “the concept of normality in the sense of average human functioning” (Reindal, 2009, p. 156), further dismissing the role of the non-social aspect of disability.

International Classification of Function (ICF)

The ICF was advanced as a “biopsycho-social model” of disability; one that brings together the perspectives offered by the medical and social models (Reindal, 2008, p. 138). It has been adopted by the World Health Organization (WHO), as well as by some scholars who are critical of other disability models for over-
individualizing or over-socializing the phenomenon (Terzi, 2004).

The ICF defines disability as a physical disadvantage that is worsened or reduced by social factors. While the social context has a role in the construction of a person’s disability, the role it plays either “facilitate[s] or hinder[s] the individual diversity” (Reindal, 2009, p. 164). Further, norms are defined under the ICF as “activities and roles that are statistically normal or considered positively desirable in the relevant cultural context” (Reindal, 2009, p. 164). This definition, however, does not consider the intention of individuals (Reindal, 2009). The restrictive nature of impairment, and the dismissal of individual intent, tacitly emphasizes a notion of disability as a disadvantage in accomplishing roles that are deemed desirable, rather than the injustice and oppression faced due to biomedical and social factors.

Social-Relational Model
The social-relational model of disability has also been proposed as a common ground between the positions set by the medical and social models (Reindal, 2008). However unlike the ICF, the social-relational model explicitly identifies disability as an axis of oppression.

The social-relational model differentiates between necessary and sufficient conditions in the construction of disability, or the definition of a person as being disabled (Reindal, 2008). A necessary condition is a physical or biomedical characteristic that leads to a limiting of functions and abilities, or impairment. Disability, in this model, must arise from impairment. The identification of a necessary condition for a disability sets the social-relational model apart from the social model; it prevents the reduction of disability to social conditions. The social-relational model differs from the ICF with addition of the concept of sufficient conditions. According to the framework set by the ICF, the role of the social context is to determine the extent of disadvantage (Reindal, 2009). In the social-relational model, however, impairment is not sufficient to be regarded as a disability. That is to say that the social context determines whether impairments will lead to disablement: a form of marginalization and oppression following impairments (Reindal, 2008). Impairment is both a necessary and a sufficient condition for disability according to the ICF, but the social-relational model requires additional conditions created by the social environment to sufficiently define a disability. The social-relational model of disability is suited for analyses of education because it considers both biomedical and social roots of disability, while framing disability as an oppression (Reindal, 2009).

The Capability Approach
The Capability Approach was developed by Amartya Sen (1992) “as a set of interrelated theses in welfare economics, particularly on the assessment of personal well-being, poverty, and inequality” (Mitra, 2006, p. 236). The approach created a plane on which to discuss equity on a multidimensional scale, and to answer the question “equality of what” within various aspects of persons’ lives (Terzi, 2005, p. 449). The Capability Approach looks at the given rights and freedoms of people as being relational to their ways of being and the extent to which their ultimate goals or values are obtainable given these ways of being. In this respect, the Capability Approach is conceptualized as a framework for the analysis of issues concerning social arrangements and equity (Hinchcliffe & Terzi, 2009).

There are two main interrelated concepts of the Capability Approach: functionings and capabilities (Sen, 1992). Functionings are the various roles or modes of existence that persons may participate in or take on at a given point and the tasks that they may perform in these roles. Functionings vary greatly in complexity; from survival-related to wants-related, individually-rooted to socially-rooted, and
concrete (or material) to abstract (or mental) (Terzi, 2005). Sen (1992) approached functionings as having both intrinsic value to a person with agency, and a socially legitimized reason to value these functionings, where “a person’s ability to act on behalf of what matters to her or him” (Alkire, 2007, p. 163) is defined as agency.

Capabilities are defined as “real opportunities and freedoms people have to achieve these valued functionings,” or as the set of potential functionings that are achievable (Terzi, 2005, p. 449). Using this approach, justice is determined based on capabilities, or the extent of freedom that individuals have to choose functionings that they see as valuable to their ultimate well-being among their potential functionings (Terzi, 2007). Sociopolitical structures must be analyzed based on their allowance of capabilities of all individuals to be expanded for their “well-being and hence for living good lives” (Terzi, 2007, p. 758). For an equity-based approach to social arrangements, the Capability Approach looks at capabilities, rather than needs, within the context of evaluating well-being (Norwich, 2014). In determining capabilities, whether individuals have chosen the functionings they value, and achieved those functionings, is taken into account. An equitable society is considered to be one where individuals can “[exercise their] agency in achieving valued aims” (Terzi, 2014, p. 487).

Central to the notion of capabilities is the recognition of human diversity and heterogeneity (Sen, 1992). Human diversity is defined in terms of: 1) personal characteristics, 2) external circumstances, and 3) “ability to convert resources into valued functionings” (Terzi, 2005, p. 450). Understanding human diversity requires attention to capabilities and functionings, rather than unmet needs or owned resources, in evaluating the quality of lives (Hitchcliffe & Terzi, 2009; Mitra, 2006). Individuals who are in similar situations may differ from one another in access to and/or the amount of resources available for functionings (Mitra, 2006; Wasserman, 2006). This definition of diversity interprets impairment as a form of human diversity, yet, it centers on how a disability may be constructed through the insufficiency of available resources and barriers in the social environment, leading to the limitation of capabilities and functionings (Pfeiffer, 2001; Terzi, 2005; Wasserman, 2006).

Scholars have used the Capability Approach to address disability, through the interplay of three aspects: 1) personal characteristics, such as a physiological impairment, 2) available resources, and 3) the sociopolitical, economic, and cultural context surrounding the individual (Mitra, 2006). Building from Reindal (2008), the Capability Approach can be used to evaluate disability and disabling conditions by examining the necessary condition of biomedical impairment, the sufficient conditions of resource availability and the social context, and how these conditions limit a given person’s capabilities. In other words, individuals are disabled if they cannot acquire their valued modes of existence and if they cannot perform their valued actions due to the interplay of their physical condition, barriers in the social system, and the resources they possess to help them navigate their lives (Mitra, 2006; Reindal, 2008, 2009).

**Capability Approach as a Framework for Inclusive Education**

A discussion of inclusive education through the framework of the Capability Approach follows including: an examination of the context of inclusive education; a description of Terzi’s (2014) notion of educational equality, and; an acknowledgement of the need to address children’s agency.
Inclusive Education

While there is no globally agreed upon definition of inclusive education, it is understood by policymakers and practitioners to be a universal concept (Dunne, 2009). The inclusive education movement originated as a response to institutionalized segregation in education, with the intention of integrating social justice practices in education (Slee, 2013). Despite being a relatively recent educational philosophy, inclusive education was rapidly adapted in policy after its original conception as an educational theory (Avramidis & Norwich, 2002). One prominent example of this global adaption was UNESCO’s Salamanca Statement (1994), although nations such as the United States were already implementing policies like the Education for All Handicapped Children Act (EAHCA) of 1975 decades before the Salamanca Statement was ratified (O’Laughlin, 2013). In such policies, inclusive education was regarded as the practice of educating all children in the mainstream schools that had previously excluded them. For example, the EAHCA introduced the notion of Least Restrictive Environment (LRE) as the right of children with disabilities to be enrolled in classrooms “with their nondisabled peers to the maximum extent appropriate” (O’Laughlin, 2013, p. 4).

An impetus behind the rapid and global shift in educational policy is the perspective of schooling as a microcosm for societal attitudes and practices. Implementing a system of education where all children were included within the same class and treated equitably was seen as a means to a global society in which all individuals coexist (Artiles, Harris-Murri, & Rostenberg, 2006; Baglieri et al., 2011; Terzi, 2014). This humanitarian, social justice oriented reasoning behind UNESCO’s endorsement of the Salamanca Statement of 1994, declared the universal principle of all children’s fundamental right to an education “in regular schools” amongst their peers (Terzi, 2014, p. 479). Inclusive education was seen as a potential remedy for the exclusion of individuals labeled with disabilities from educational environments and, by extension, society in general. Based on this understanding, children labeled with disabilities would attend the same school environment as their peers and receive the same education (Baglieri et al., 2011; Terzi, 2014).

Despite being conceptualized as a direct extension of social justice and equity discourses, and despite the rapid global adoption of the “inclusive education agenda,” inclusive education has not realized its intended aim of honouring diversity, and welcoming all learners into educational systems (Broderick, Mehta-Parekh, & Reid, 2005; Slee, 2001, 2014). While not denying the significance of the inclusive education movement in recognizing and reducing the harmful effects of institutionalized segregation, it is important to recognize that the positive intent of inclusive education’s aims do not eliminate the problematic aspects of its practices (Terzi, 2014). Inclusive education has become synonymous with the practice of mainstreaming: placing students labeled with disabilities in mainstream classrooms, or what Baglieri et al. (2011) identified as “fundamentally about issues of place” (p. 2125). The emphasis on mainstreaming appears to assume that the location, a mainstream classroom, generally resolves the problem of inclusivity, rather than continuing to elaborate comprehensive changes to the structure of mainstream schools and classrooms to enable them to be inclusive contexts.

One criticism offered is that inclusive education—as a practice of mainstreaming—has been taken up by schools as a solution to students’ exclusion given their divergence from the norm (Baglieri et al., 2011; Broderick et al., 2005). Thus, inclusive education has been represented as an intervention for specific children, and synonymous to special education, rather than a structure for reframing education and enabling the participation of all learners (Baglieri et al., 2011; Slee, 2001). Placement
practices targeting children labeled with disabilities are employed under the guise of inclusive education, leading to segregation between students as those who are targeted by inclusion and those who are not targeted by inclusion (Baglieri et al., 2011). Thomas and Loxley (2001) noted “Inclusive education has to become more than a synonym for special systems in mainstream schools, more than a peripheral dimension to mainstream education” (p. 142).

This criticism extends further to how inclusive education has been conceptualized and implemented. Beyond asserting all children’s fundamental right to attend school among their peers, policies of inclusive education such as the Salamanca Statement have remained vague in their approach as to what inclusive education entails (Dunne, 2009; Terzi, 2014). In addition, inclusive education has been interpreted as a form of in situ intervention to assimilate children to a set of normalized characteristics (Baglieri et al., 2011). Through behavioural modification practices, for example, children labeled with developmental disabilities are regulated to adjust their behaviours to the norms of the institution. To date, the practices of inclusive education have not been reflective of social justice and equity based theoretical frameworks (Artiles et al., 2006; Broderick et al., 2005; Slee, 2001; Terzi, 2014).

**Educational Equality**

Responding to the call to reevaluate inclusive education, Terzi (2014) introduced the notion of educational equality based on the principle of equal entitlement of all individuals to certain standards of living in their society: social and institutional arrangements, such as those found in schools, must be structured to serve all members of the population in an equitable manner. Rather than providing the same resources for all members, the principle of equity aims to provide equal opportunities through equitable treatment of all members of a social arrangement (Underwood, Valeo, & Wood, 2012). The concept of equity dovetails with acknowledging and respecting individual differences: differences that are intrinsic to an individual, differences that are extrinsic or attributed to environmental and social factors, and differences that focus on the conversion of resources to expanding capabilities and, thereby, obtaining functionings.

Framed by the Capability Approach, Terzi (2014) argued that the level of justice in social and institutional arrangements should be evaluated based on their recognition of individual differences, and the extent to which they provide each individual the opportunity to benefit from resources, given his/her choices and individual differences. Education is one of the few fundamental capabilities, essential to human well-being (Sen, 1992). School systems, as institutional arrangements, are just to the extent that they provide equal educational opportunities for individuals to approach the level of well-being that extends to a “conception of good life—the life that one has reasons to value” (Terzi, 2014, p. 486). A just education should provide children with the capabilities to stand as equals in society, where children have agency in determining valuable functionings (Terzi, 2008). In inclusive education, the Capability Approach may be used provisionally to determine the practices that allow for equitable treatment within school systems by providing children the capabilities to accomplish their valued functionings and stressing the principles of well-being and agency (Terzi, 2007).

**Valued and reasonable functionings for young children**

In previous proposals uniting the Capability Approach with education, a question has emerged: how will educational professionals determine the functionings children should obtain? (Terzi, 2014; Underwood, Chan, Koller, & Valeo, 2015; Underwood et al., 2012;
Warnock, 2010). Education as a social arrangement created on behalf of children and youth may be considered to be difficult to unite with the Capability Approach as children and youth are often not perceived to be equipped with the ability to decide and communicate their own valued functionings. This is, particularly, the case for young children labeled with disabilities (Underwood et al., 2015). Even those advocating for education within the framework of capabilities often overlook the agency of children in determining valued functionings in favour of adult decision-making on the matter (see Terzi, 2007). Indeed, educational professionals are privileged in determining the capabilities that children should expand in their schooling (Alkire, 2011). The agency that children have is dismissed as a function of their age and their current stage of neurobiological development: young children with disabilities are not seen as equipped to decide on, or even contribute to the decision regarding the functionings they value, thus educational professionals are granted the right and responsibility to decide on practices that serve their students’ well-being in schools.

The dismissal of a child’s agency, given age and development, in determining valued functionings has certain implications that compromise the main promise of a capability-oriented educational system (Taylor, 2013). From a consideration of capabilities, diversity is recognized and highly valued, and agency is considered for all individuals regardless of the unique set of characteristics they may possess. As one example, Underwood et al., (2015) proposed a capability-oriented approach for acknowledging children’s agency in determining their own valued functionings. Their research, employing a multi-modal methodology—including verbal language, behavioural cues, signs and symbols, drawings, and play—fostered the communication of valued functionings between the children and the researchers. They argued that young children labeled with disabilities are often able to express their valued functionings when provided with an array of methods to express themselves (Underwood et al., 2015). This research provided evidence for the possibility of an inclusive education setting that considers children’s agency in determining their valued functionings.

In addition to the need to overcome barriers to communication, the structure and framework behind practices in schools may disregard children’s values. A child’s wish may be understood, but declined due to an educator’s understanding of the activities children must do. Here, the discussion of valued functionings also incorporates the reasonability of functions. The dismissal of children’s agency leaves functionings in education systems to be selected based on whether they are deemed necessary, ethical, correct, and achievable, as determined solely by adults. The consideration of children’s agency requires that a discussion of reasonability also include the child at hand, alongside educators and parents. While the authors acknowledge that this may be practiced in some early learning settings, based on the first author’s empirical research (Dalkilic, 2014) and related literature, this does not appear to be a dominant practice (see Todd, 2007).

Reframing Inclusive Education: Education Based on Well-Being and Agency

Following Terzi’s (2014) notion of educational equality, equitable education with the aim of furthering the capabilities of children based on well-being and agency, this section advances relational inclusion (Dalkilic & Vadeboncoeur, 2016) as central to the development of equitable educational practices to equalize learning and well-being, and discusses the alignment between principles of relational inclusion and the main ideas of the Capability Approach. The model of Relational Inclusion emerged from the authors’ empirical research as a practical application of social justice principles in education, and as an
alternative to current practices of inclusive education (Dalkilic, 2014). Relational Inclusion suggests that inclusive education should both contribute to and be the outcome of an educational system that provides an equitable opportunity to all children to be active agents in their own learning. Relational Inclusion is founded on five core principles that are closely linked to the capabilities of children within the social arrangement of schooling, attending to diversity and agency including: 1) context and culture responsive inclusive practices, 2) holistic child-focused inclusive pedagogy, 3) inclusion as a spectrum of practices, 4) inclusion as increasing participation in democratic classrooms and societies, and 5) relational ontological practices (Dalkilic & Vadeboncoeur, 2016).

**Culture and Context Responsive Inclusive Practices**

The principle of culture and context responsive inclusive practices situates inclusive education within the culture and context of the individuals, rather than assuming universal practices can be applied across culture and context. According to this principle, inclusive education practices cannot be defined and universally applied separate from the relationship between a child, educator, and caregiver. Instead, the specifics of the situation at hand must be examined in order to proceed with practices that are regarded as beneficial for all members of the educational community.

Moving away from universal practices is consistent with an approach that attends to capabilities because individuals have different preferred functions from one another, based in their cultural and contextual values. For that reason, an inclusive education based on the Capability Approach cannot provide a universal *recipe* for practice. An example from the first author’s practice related to a young child with profound hearing impairment illustrates the disconnect that can occur at times with a universal approach. The standard of care for a child with profound hearing impairment suggests that he/she is provided with the means of sign language communication in early learning settings to suit their needs. However, in the experience of the first author, the parents, who were deaf and communicated via sign language with the child, proposed that minimal or no sign language be used at the daycare so that the child could practice lip reading skills. The parents argued that their valued functioning for the child was to be fluent in lip reading in addition to sign language, as that would be a constituent of her well-being, enabling her to understand the spoken words of peers and adults who did not use sign language. They also made it clear that developing this skill was desired by the child. Although this practice was not considered developmentally appropriate and responsive to the perceived needs of the child with a profound hearing impairment, the parents communicated that one of their main goals for participating in the early learning setting was for her to develop lip reading skills to socialize with her peers who were not proficient in sign language.

The aim of Relational Inclusion is to be mindful of the culture and context in determining which practices will expand on the capabilities of children for them to obtain their valued functionings. In short, practices aimed at adding to children’s capabilities to enable them the choice of obtaining valued functionings must be responsive to the culture and context of children and their families. In the previous example, the daycare expanded this child’s capabilities by providing her opportunities for face-to-face verbal communication with adults and peers, involving only minimal signing for accessibility, so that she could practice lip reading skills.

**Holistic Child-focused Inclusive Pedagogy**

The principle of holistic child-focused inclusive pedagogy further emphasizes the significance of
the relationships between the child and the educator, and states that children’s identities should be considered beyond their label of disability. Just as inclusive education practices should not be assumed to be universal, practices should not apply universally to all children who have been given a particular label of disability. In order to have a child-focused inclusive pedagogy, it is crucial to focus on the involved persons and their relationships with one another: the educator, the child labeled with disability, and his/her family. The emphasis on the whole child and the relationships between individuals adds further context to practices that become inclusive given the relationships between these participants.

While the context of our research is early childhood education in Canada, it is also important to note that this principle draws upon the acknowledgment of human diversity and the relationship between the capabilities of a person and their valued functionings, and thus requires going beyond the standard Individual Educational Plan (IEP) that shapes K-12 education in Canada and in the United States. The Capability Approach places diversity at its center, and notes the uniqueness of human beings. While disability labels may refer to physical conditions that children are described as “having,” different children sharing the same disability label are still vastly different from each other. There are no sets of practices that are guaranteed to provide an equitable education to all children who share the same particular label, as the diversity of children is impacted by a multitude of factors. In order for inclusive education practices to expand the capabilities of a child, the practices must be centered on the child, rather than his/her label. This requires that the relationships between the child, the educator, and the families be used as a foundation to create and evaluate the type of practices that will expand the capabilities of a particular child, given his/her culture and context.

**Inclusion as a Spectrum of Practices**

The principle of inclusion as a spectrum of practices aims to deconstruct the polar thinking that dominates current discourses of inclusive education. Examples of polarities that frequent the inclusive education literature include classifying practices as inclusive vs. exclusive, and children as typical vs. atypical. Binary perspectives assume environments labeled as inclusive are such under all conditions and for all participants; aspects of such environments that may exclude some children, or children under some conditions, go unassessed.

A system of education based in the Capability Approach enables movement away from restrictions imposed by binary thinking by taking an inherently anti-binarist stance. There are no rigid sets of capabilities that have been determined to categorize social arrangements such as systems of education, as either inclusive or exclusive. Rather, the Capability Approach argues for a holistic review of these systems, and evaluates how the system both enhances and hinders the participating individuals’ ability to obtain their valued functionings under specific conditions. Within Relational Inclusion, the Capability Approach allows for a dynamic assessment of educational practices, as environment or practices are not labeled as being absolutely inclusive or exclusive; rather, they are continuously evaluated and modified for new ways to further expand on capabilities of the children. The Capability Approach enacted through Relational Inclusion considers educational practices as a spectrum and open to change in relation to a particular students’ functionings, given that all children are diverse from one another, and that student’s capabilities change over time. Diversity in capabilities implies that children have a spectrum of different valued functionings and, thus, require a spectrum of different practices and resources to expand their capabilities.
Inclusion as Increasing Participation in Democratic Classrooms and Societies

The principle of inclusion as increasing participation in democratic classrooms and societies identifies a task of inclusive education to be the recognition of diversity and valuing individual contributions and participation as significant for a democratic society. Compatible with Slee’s (2001) concept of democracy in education, this principle is opposed to practices that are aimed at erasing children’s personal characteristics as a requirement for them to belong to a classroom that is assumed to be homogenous. Drawing on this principle, Relational Inclusion condemns the excessive regulation of behaviour and the assimilation of the child to fit the existing structure of the classroom through behavioural modification techniques, instead defining democracy in education as a practice of welcoming differences and embracing the heterogeneity of contributors to the classroom culture while working together toward educational goals.

Increasing participation in education, in many respects, goes hand in hand with Terzi’s (2014) notion of educational equality, which is a derivative of the Capability Approach as applied in education. This principle necessitates that—in order to support agency and diversity—inclusive practices must increase participation in classrooms and societies for the attainment of valued functionings within personal capabilities. Thus, the capabilities of children ought to be expanded within a social arrangement that is inherently democratic, and their valued functionings achieved through their participation, without compromising their diversity (Taylor, 2013). This principle implies that children can decide and/or contribute to decisions regarding their well-being, and their view should be incorporated into a social system. The role of individuals—from educators, to parents and children—within a social arrangement is to foster a system that provides the resources for all to expand their chosen capabilities, rather than to create a system that requires everyone to ultimately possess the same capabilities, regardless of the value these capabilities may have for the varied individuals (Taylor, 2013).

Our perspective of democracy in education, in short, refers to implementing practices that enable all children to participate in their education without having to disregard the characteristics that make them unique (Artilles et al., 2006; Slee, 2001). In a democratic education system, it is recognized that children are unique individuals, have varied characteristics from one another, and that the solution to their exclusion is not to shape them with the same capabilities as others, but rather to provide them with the capabilities to obtain their valued functionings.

Relational Practices

The principle of relational practices is the foundation of each of the first four principles. This principle suggests that the frameworks currently dominating education based on individualism are a cause for exclusionary and inequitable practices (e.g., Slee & Allan, 2011). A relational ontology, or a relational way of being, insists that educational professionals see themselves and the children and families with whom they work in a web of relationships that are primary and valued as such. For educational professionals to enable relationally inclusive environment, this last principle suggests that a change in framework to guide the implementation of inclusive education is necessary.

As a theory of evaluating equality of opportunities, the Capability Approach may enable the assessment of policies and practices consistent with a relational approach to inclusive education (see Norwich, 2014; Reindal, 2009; Terzi, 2004; Wasserman, 2006). Capabilities can be applied to education, as a social arrangement, and the approach can be used to guide inclusive education to create settings...
where children are provided with the resources and practices that allow them to obtain their choice of functionings. In a capability driven education system, the agency of children in identifying valued functionings and the role of families in selecting reasonable functionings for children are surfaced as contributing to educational practices for that particular setting via the relationships between educators, children, and parents as central to the practices of inclusive education.

Drawing once again from the example of the child with profound hearing impairment, in order for the educator to respond to the child’s needs and interests and the parents’ concern that the child be supported to learn lip-reading, she needed to engage in a number of actions. First, she needed to meet with the parents and the child, to listen to and hear their concerns, and then consider how to organize the classroom. Second, she needed to reexamine the standard of care for children with profound hearing impairment in early childhood education contexts and consider attending to the concerns of the parents and interests of the child. Third, she needed to find additional time to develop and implement shifts to her pedagogical approach, and then share these with her colleagues at the preschool. Fourth, she needed to make an ongoing commitment to this child and her family to undertake a different approach to education (that was contradicted by her own education) that was responsive to the child and parents. Fifth, these actions had to be taken with the utmost respect and sensitivity to the feelings of the parents and child, and with consideration of valued functionings and capacities of the child to engage in the world both inside and outside the classroom.

Taken together, these five principles offer a framework that is theoretically grounded in the Capability Approach and that guides the reconceptualization of educational practices through Relational Inclusion. In order for these integrated principles to be applied to inclusive education, however, professionals must be educated in the principles of Relational Inclusion and in applications of the Capability Approach that emerge as a function of the relationship between person and context. The implications of these principles go beyond the practices implemented within the classroom to include practices that involve children and their families and, further, to include the policies required to support the education of professionals. Although some educators may be involved in this sort of approach incidentally, through teacher education and professional development that is supported by changes in policy, educators will be more able to facilitate the emergence of capability-oriented practices that are based upon their relationships with children and families is they study this approach through teacher education and professional development that is supported by changes in policy.

**Concluding Thoughts**

The aim of this article was to extend the literature on inclusive education by describing an integrated framework based upon Sen’s (1992) Capability Approach and the practice-based model of Relational Inclusion. The Capability Approach is particularly useful in analyzing justice and human rights in social arrangements, as it considers how the same amount and quality of resources may impact different individuals, with reference to the achievement of their personal valued functionings within their capabilities (Burchardt, 2004). Further, we discussed the potential for a capability-oriented inclusive education system through the model of Relational Inclusion. Five principles of relational inclusion were elaborated and were discussed with reference to capabilities, diversity, agency, and well-being. As a flexible model of inclusion that challenges taken-for-granted and universalized practices of inclusive education, this integrated model creates a challenge for
practitioners and education policy makers, and indicates areas in need of additional research.

**Implications for Practice, Policy, and Future Research**

Five implications for practice derive most obviously from the five principles discussed earlier, including the need for the continued development of these principles. For example, which aspects of practice need to change to build relational inclusion across cultures? Which aspects of children need to be attended to when Relational Inclusion is approached holistically? How does the consideration of inclusion as a spectrum of practices change assessment of “inclusive” vs. “exclusive” classrooms and how can it be used to highlight how classrooms vary for different students at different moments in time? How does an approach to Relational Inclusion support participation in classrooms? What are the characteristics of relationships between educators, children, and families that enable the negotiation of capabilities? While some educators may practice in ways consistent with some of these principles, it is likely to be in spite of educational systems. Enhancing these values and capacities—including the capacity to interpret the principles in relation to each child and family, and the expectation that this interpretation will guide engagement with a particular child and family—requires immersion in the model through education and professional development.

While enacting the principles of Relational Inclusion in practice partially requires educators’ initiative and internalization of these values, a structural change at the policy level is required to support educators. We highlight three policy implications to begin building a system within which educators can shift from the conventional principles of inclusive education to the model of Relational Inclusion. Although these policy implications have been thought of with an early childhood education context in mind, we believe that they may also inform K-12 schooling policy considerations.

One implication for policy is that universal standards of care cannot be decided upon as baselines for regulation. Instead, policies need to be drafted that can be interpreted by educators in relation to a specific child and family as situated by cultural and contextual factors. This would provide the flexibility required and communicate the expectation that educators can and must engage with children and families to design pedagogy. Granting further flexibility, and thereby more administrative responsibilities, will require additional changes to support child care practitioners in fostering relationally inclusive settings and programs with the potential to influence a number of aspects of the work of educators, including their workload and the ratio of educator to children and families.

These policy implications do not suggest the removal of central regulation by authorities. Rather, central regulation must be designed to assess the ways in which these principles are adhered to, and to suggest improvements for given situations, with context and participants in mind. More flexible regulation—rather than universal standards of care—with agency at the level of individual childcare centres, would permit educator, parents, and child to build practices of inclusion that are child and context specific. Regulation focusing on the principles of Relational Inclusion would measure how these principles are actualized, thus ensuring assessment and ongoing revision for the program. To support educators, ongoing professional development and formative assessment of the program through the collaborative effort of parents, children, educators, management, and regulatory authorities is required. These efforts can also be assisted through central regulation.

A second policy implication is more rigorous early childhood educator preparation programs. Some suggestions include adding a
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strong theoretical component to education curricula, including the theory and practice of disability models, responsiveness to valued capabilities, and relational ontology. In the long run, the benefit of regulating practitioners' education and providing an in depth theoretical education is that it can enable the implementation of inclusive education that is context, culture, and participant-responsive.

A third implication for policy is that, in order to build relationally inclusive pedagogy to support capabilities, educators must be given the freedom to build closer relationships with the children and families with whom they work. Currently a number of factors prevent many educators from being able to engage in more frequent and thorough interactions with children and parents, such as funding for time allotted to work, pupil/teacher ratios, and resources for professional development. These are factors that can be regulated at a policy level without infringing on the flexibility that centers need to build their unique inclusive settings. Educational policy should be drafted to provide practitioners with the necessary resources to shape the particular inclusive settings they create.

Research must be undertaken to examine applications of a Capability Approach extended through Relational Inclusion to the structure of schooling, with the recognition that early childhood centres and K-12 schools vary along a number of dimensions, such as classroom and school size, education and experience of teachers, and resources, including funding, time, and location. As a practical framework for capability-oriented schooling, there is a need for further research and, in particular, case studies that define the unit of analysis as the relationships formed between the child, educator, and families (see Vadeboncoeur & Rahal, 2013).

Further, the question of the ability of young children labeled with disabilities to contribute to decisions made regarding the reasonability of their valued functionings needs continued theorizing. While this question was partially addressed here, a consideration of how the relationships between different participants of the school system collectively contribute to reasonable functionings so that all members of the collective can benefit, needs investigation. In this article, we suggested that parents are important as part of a collective that assesses reasonable functionings for their children; observing and analyzing their roles will further elaborate this idea and contribute to the development of theory and practice.

Reframing inclusive education in order to enhance the opportunities for a child to work toward achieving valued and reasonable functionings through practices that are formed relationally may lead to the creation of many different practices. This variation will be an improvement provided that it expands the capabilities of children in achieving their valued and reasonable functionings. The practices of inclusive education that are derived must be observed, interpreted, analyzed, and continually assessed, with input from educators, children, and parents, to ascertain the extent to which children’s capabilities are being expanded through this model.

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