THE LUNDY MODEL

Lancashire and South Cumbria Integrated Care Board

1. Children's rights

In recognition of the inherent vulnerability that being a child brings, children have their own distinct set of human rights (UNCRC, 1989).

According to article 12, children have a basic human right to participate in all decisions that affect them, have their views carefully considered and for their view to be given due weight in line with their age and maturity.

In health and social care, article 12 is known as 'voice of the child.'

7. Further Reading

The Lundy Model of children's participation has been adopted by L&SC ICB as part of the Working with People and Communities strategy.

Lundy, L, (2007) "Voice" is Not Enough: Conceptualising Article 12 of the United Nations Convention on the Rights of the Child; British Educational Research Journal, 33: 6 927-942

2. When Voice is Not Enough

Professor Laura Lundy (2007) developed a children's participation model as a way of conceptualising a child's right to participate as defined by Article 12 (UNCRC, 1989.)

The model is useful as it anchors 'voice of the child' to the international children's rights agenda and extends the concept of participation beyond a child's spoken word.

> 7 Minute Briefing

3. Space

The Lundy Model (2007) breaks down a child's participation right into two stages.

Stage 1 is the right to form and express a view in all matters that affect them. It is a universal right and applies to ALL children.

The first component of stage 1 is **Space**.

Children must be given access to safe, inclusive space that allows them to form and express a view.

Information should be presented to them in a way that they can absorb, retain, and make sense of.

4. Voice

The second component of stage 1 is **Voice**.

Children must be facilitated to express a view in whichever way they are able. This should consider age, development, and all forms of social communication.

Children must feel safe enough to express an independent view, free from influence or fear of reprisal.

6. Influence

The second component of stage 2 is **Influence**.

Children must have their views acted upon as appropriate. The child's view should be visible in all decisions made and be supported by a clear rationale as to why view has / hasn't been acted upon.

There is a need to consider the child's competence and capacity but also be mindful of factors that impact on decision making e.g., adverse childhood experiences or a history of trauma.

5. Audience

Stage 2 is the child's right to have their view given due weight i.e., listened to and responded to appropriately.

The first component of stage 2 is **Audience**.

Children must have their view presented to the right audience. This should be people who can influence decision making and are able to take actions in response to the child's voice.