

Quality of Life Index
for Inclusive Education
and how to use it in
the monitoring of
the European Child
Guarantee
Executive Summary





European Association of Service providers for Persons with Disabilities

Executive

summary

The European Association of Service Providers for Persons with Disabilities (EASPD) has proposed, within its "Commit!" strategy, to monitor European policies with a right-based approach. This research follows up on this, by exploring how the Quality of Life Index for Inclusive Education (QoLI-IE) could be used for monitoring the European Child Guarantee (ECG). The ECG is a Recommendation adopted by the European Council in 2021 that seeks to prevent and combat social exclusion by guaranteeing the access of children at risk of poverty and social exclusion to a set of key services: early education and care, education (including school-based activities), healthcare, nutrition, and housing.

Understanding the usefulness of the QoLI-IE for the goals proposed by EASPD (i.e., monitoring the ECG) requires that the reader understands the suitability of the instrument as well as the conditions under which the instrument should be implemented to monitoring the ECG in terms of validity and reliability (i.e., so that the evidence collected regarding the ECG is as accurate as possible and one can trust it to feed decision-making regarding enhancement strategies). Bearing this need in mind, the current report offers a comprehensive framework that will help the reader to understand why using this instrument to monitor the ECG and, most important, how to monitor it, and the added value that the use of this instrument has to enhance the own ECG.

The present report includes a series of chapters that, in a consecutive manner, will help the reader to find an answer to all these questions. The report starts with a conceptual chapter presenting the Quality of Life Model of Schalock and Verdugo (2002). This model has been the matrix for the development of the *QoLI-IE*. The conceptual and applied bases of the model are explained in detail in the chapter. These foundations are necessary to

understand how the Quality of Life Model gets translated from a conceptual approach to a series of evidence-based actions focused on enhancing the quality of life and enjoyment of rights of individuals and the improvement of schools and organisations, and public policy. In this first chapter, a complete rationale explaining why to use the *QoLI-IE* to address the monitoring of the educational areas of the ECG is provided (i.e., early childhood education and care, and education, including school-based activities).

Offering opportunities for the development and validation of the *QoLI-IE* in the different European Union countries that are interested in doing so is also provided in the report. Together, Chapters II and III offer a methodological framework so that those countries interested can localise, design, develop and validate the *QoLI-IE* in their territories. These chapters highlight the chief steps involved in the design and validation of quality of life assessment instruments:

- a) Identification of target group(s) and context(s) of interest (i.e., identification of group(s) and context(s) that constitute a priority due to their vulnerability regarding the access to and enjoyment of education)
- Determination of core quality of life indicators and items to measure personal outcomes in said groups and contexts.
- c) Validation of the items regarding their content.
- d) Development of a pilot instrument.
- e) Field work.
- f) Pilot study
- g) Calibration of the instrument through the analysis of its items and analyses regarding evidence of validity and reliability.





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Counting with instruments such as the QoLI-IE is an important and necessary step, but not enough to monitor quality of life or, as is the case of the present report, to monitor the educational areas of the ECG. Therefore, beyond instruments, it is necessary to provide a framework for action focused on how to monitor personal outcomes and what to do with the evidence gathered, since monitoring always should be followed by concise strategies aimed at enhancing what has been monitored under a functional assessment approach. Thus, Chapter IV offers a systematic framework for collecting evidence to monitor the educational areas of the ECG and it also offers guidelines on how to use the evidence collected to feed enhancement strategies focused on the improvement of:

- The quality of life of students, especially, the most vulnerable ones (e.g., like those with intellectual and developmental disabilities).
- b) The quality of schools' cultures, policies, and practices, so that these elements are aligned and directed towards the access, participation, learning, and development of students to their fullest potential, key elements of a high-quality inclusive education.
- Social initiatives and recommendations such as the ECG.

Monitoring of these three elements and the implementation of enhancement strategies is essential to go beyond the understanding of the implementation of the ECG (i.e., to see if students really have access to and enjoy the areas of early education and care, and education, including school-based activities). This will also allow improving the ECG itself on an ongoing basis: the key is that countries learn on what they are doing well or bad (i.e., monitoring) to act consequently so that their students (especially those in need) can enjoy their rights (i.e., evidence-based enhancement strategies at different levels).

Chapter IV ends with a series of concise recommendations on how to establish a









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framework to facilitate the national action process to feed in the European framework to monitoring the ECG. Recommendations for those countries that are still developing their national action plans on the Child Guarantee are also provided.

