CHILDSPLA: a collaboration between children and researchers to design and animate health states

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## Sample

Children recruited from a local primary school (n = 38) and a paediatric specialist hospital
(n = 36) in London. Children were aged 4–11 years and from a diverse range of ethnic backgrounds.

## Implications For Stakeholders About

# Abstract

The children's health state preferences learnt from animation (CHILDSPLA) project developed an interactive application presented on a touch screen device using an animated character to collect information from children about their health. The underlying hypothesis was that health information could be directly collected from children as young as 4 years old by the use of animated characters. This paper describes in detail how children were involved in the development of the application, and recounts both the challenges and benefits of that process. A child psychologist and an animation filmmaker worked closely with children to design a character and to animate it to represent different health states. Children were recruited from a local primary school (n = 38) and a paediatric specialist hospital (n = 36). Diverse interactive activities were organized to help children give feedback and guide the design process. The activities for each session were adjusted to the children's needs, based on the experience of previous sessions. The character and the animations were modified according to the feedback provided by the children. Developing the CHILDSPLA app in collaboration with children was a worthwhile and enriching experience, despite the required iteration and extension of the design process, as it enabled us to adjust the tool to the children's needs.

# Outcome

"There is a lack of child-friendly quality of life measures.
• Young children are able to communicate how they feel if
asked with the appropriate method.
• Parents’ ratings about their children’s health tend to differ
from children’s ratings.
• The use of animation allowed us to develop a method to
children’s views about their health, which is accessible for
very young children and children with low literacy skills.
• Involving children in the development of new methods
targeted at them ensures the future feasibility of the method." (Abrines Jaume et al., 2015: 1150)