RESEARCH ARTICLE

Parents' experiences of support: Co-constructing their stories

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Abstract

This paper presents some of the findings of a study of parents' experiences of support services

for their young children with special needs, combined with an argument about the value of the

process of co-structing the stories of those experiences. The study was conducted in England

with six parents using an ethnographic case study approach with narrative analysis. The parents'

narratives, interwoven with the reflection of the researcher/early years professional, illustrate

that engaged listening offers a way forward for professionals and parents (as well as researchers)

to understand each other as they participate in co-construction. The process elicits much of what

each are fearful of telling or hearing and about the balance of fragility and resilience in their

assumptions and relationships.

Key words: narrative; co-construction; early years; parents; professionals

Introduction

The research discussed in this paper is about how parents of young children in need of early intervention experience support. It is the remit of various professionals and educators to support parents and children in the crucial years before formal schooling. The nature of that support makes a difference – to how parents feel and cope (DfES 2006), to their future relationships with support systems and individuals (Degotardi, Sweller and Pearson 2013), and to the educational and social outcomes for their children (Allen 2011). It is, therefore, important that providers get the support right and an understanding of how parents experience support is vital. Furthermore, to understand parents' experiences we need to do more than merely listen to their stories – we need to actively engage with them. There are studies that look at parents' perspectives, but the study we discuss here went further with an in-depth process of rapport-building, listening, empathising, and co-constructing stories about support. This enabled the gathering of parents' stories and insights in ways that were not not just not harmful to them, but in ways that were beneficial for them. Thus, we discuss both the findings regarding what parents experience, and the process involved that went beyond parents turning their stories into 'something for us' (Silverman 2007, 61). We explore the concept of co-construction as a rich transactional process that has much to offer in early years education.

Support for parents: background

In the UK, the concept of professionals working with parents to support the progress of their child was embedded in the recommendations of the Warnock Report (DES 1978). Professionals were advised to share decisions with families as a key component of providing support to children with special educational needs. This practice continued to be highlighted in the Education Reform Act 1988 and the Children Act 1989. The Every Child Matters: Change for Children Framework (DfES 2003) went on to recommend that practice within Sure Start Centre's involved professionals providing support to parents by working with them. The centrality of the position of parents was clarified in The Statutory Framework for the Early Years Foundation Stage (DCSF 2008; DfE 2012). In 2001 the Special Educational Needs and Disability Act specified the rights of parents to access Parent Partnership Services, provided through the local education authority as part of the SEN Code of Practice. This remains in place until September 2014 when a revised SEN Code of Practice, subject to parliamentary approval, will be contained in the Children and Families Bill.

Policy concerns with partnership between professionals and parents reflects evidence that parental involvement in early years settings and school improves academic outcomes for children (Desforges and Abouchaar 2003; Allen 2011). It is recognised that a relationship of listening to parents is essential in that they have significantly greater knowledge of their child than do professionals (Paige-Smith 2010). Interpretation of the principle has varied greatly, however, and in the 1980s Cunningham and Davis (1985) identified three models to describe the relationship between parents and professionals. In an 'expert model' parents are passive recipients of services, receiving information from professionals who are deemed to know best. In a 'transplant

model' parents follow the advice of professionals who train them in strategies for managing their child which are transplanted from professional to family domains. Professionals monitor parents' progress and value them as a service delivery resource. Cunningham and Davis (1985) were critical of this model for sometimes making parents feel overburdened and they questioned whether parents' more natural interactions with their children were disrupted. In a 'consumer model' parents indicate a desire to become involved and participate in promoting their child's progress, buying into professional dominance as much as information sharing.

Appleton and Minchom (1991) recognised the need for parents to feel valued in their role and developed an empowerment model of partnership aimed to promote parents' sense of control over the decisions that were made about their child. Dale (1996) acknowledged the complexity of managing the needs of the parent alongside scarcity of resources and added yet another model to partnership working. She recommended that negotiation play a role in deciding on effective support for children and described this as providing 'a framework for exploring a partnership practice that can embody or respond to the constraints and reality of actual power relations' (p.14). More recently Davis and Melzer (2007) have shown how the key features of empowerment and negotiation can be merged within a family-centred model emphasising the strengths rather than deficits of family members, promoting family choice and control over resources within a collaborative relationship with professionals.

The literature portrays a sense of working towards an elusive ideal. Following a review of how partnership relationships work, Wolfendale and Cook (1997, 3) observed 'that there is encouraging progress towards partnership but there is much yet to achieve'. Reports that include

evidence of parents' experiences make the benefit of partnership visible and define the key features that contribute to this:

Successful and effective practice is where the systems that are set up and the information that you have mean that at the end of involvement with a parent, the parent feels they have understood the system, they have been listened to, their views have been seriously considered, and they have been dealt with in a way that respects them. (DfES 2006, 72)

Opportunities for policy-makers and professional leaders to hear parents' voices are few and often limited to short extracts elicited from questionnaires (DfES 2006). In contrast, in-depth narratives of how parents experience support enable relationships with professionals to be understood in a new way.

Researching parents' experiences of support: Co-constructing stories

The process of researching parents' experience of support or partnership with professionals can be straightforward: the researcher asks some predefined questions, the parent participant answers them, the researcher transcribes, analyses, and tells the academic and professional community what the parents have told them. Useful findings are generated and hopefully, reach people who can do something with them to improve future experiences for parents and their young children. There is a considerable element of this research process reflected in this paper, but there is another process too, that can best be described as a process of co-construction. Co-construction offers an alternative to the description of colonizing research by hooks (1990, 151-2):

I want to know your story. And then I will tell it back to you in a new way. Tell it back to you in such a way that it has become mine, my own. Re-writing you, I re-write myself anew. I am still author, authority. I am still the colonizer, the speaking subject, and you are now the centre of my talk.

The whole movement towards decolonizing and participatory research has been about disrupting the ordinary power dynamic and seeking something more egalitarian; it is also about whose voice is privileged (Nind 2014). By working *with*, rather than doing research *on* children or parents, the processes can become so shared that knowledge is inevitably co-constructed as Thomas and O'Kane (1998, 345) reflect: 'In the end it is hard to disentangle what was our contribution and what was theirs'. Co-construction of (life) stories can be a compromise when a desired full participatory approach is not achievable as Connolly (2008) describes, or it can be the desired product when a mutual interdependence is valued.

Co-construction offers the opportunity to see what Adelman *et al.* (1980, 143) refer to as 'tacit knowledge' reaching out through the 'shock of recognition'. In participating in story-making together, those involved share 'existing experience and humanistic understanding' (Stake, 1980, 72), exposing what Goodley and Clough (2004, 336) claim are identities 'in varying conditions of alienation and empowerment'. The results are unique rather than common descriptions, drawing out what Barr (2010, 101) calls the 'complex, contradictory nature of human subjectivity'. They are not just stories of what happened, but stories of: what happened, what it felt like then, what it feels like in the telling, and how it takes on new meaning on the page as something to be reflected upon in a new, shared process.

In this study, the initial intention was to explore parents' experiences, seeking to ensure that the accounts were as authentic as possible by asking parents to recount their experiences in semi-structured interviews and then to check over the transcripts and researcher's notes in relation to them, thus ratifying them. The methodolgocial concerns were with standards of credibility, fittingness, auditability and dependability (following Lincoln and Guba 1985). Knowing these concerns are more particular to the researcher than the participant, there was also an ethical agenda to ensure that the participating parents were able to gain something positive from sharing their experiences. The aim was to make their 'world visible' (Denzin and Lincoln 2004), not just to us and others, but to themselves. The process of co-construction offered the inclusion of rich and vivid description; a chronological narrative of events; and a blend of descriptions and analysis, which was important to their authenticity (Hitchcock and Hughes 1995) and to seeing the stories afresh. This would provide readers with an opportunity to gain 'experiential understanding' (Stake 1995, 40) of the individual case and allow the participant a new space to reflect (Sheridan and Samuelsson 2013). In practice this involved getting alongside each parent and being conscious of the influences and emotions affecting how they shared intimate details of their lives and the role of the researcher's 'presence, ... listening and questioning in particular ways' (Riessman 2008, 50) in shaping the stories participants chose to tell. The intention was to create something that represents an honest and authentic account, but as Weiss (1975) warns, wanting to appear in desirable or normative terms can interfere. Despite such limitations any resulting story should communicate 'fidelity' from the perspective of the participant (Blumefeld-Jones 1995).

Procedure

The study was designed to explore in depth parents' experiences of support when they have a young child with a learning disability/special need. For recruitment of participants, six parents who access a Children's Centre were approached via their family support worker who had recommended that they might be willing to take part. They were known to these professionals because of their children's learning disability. The family support workers were important gatekeepers, present at the initial interview and available to the parent should they require any further support during the process. All parents were given written information and asked to spend time considering the implications of taking part rather than deciding at the end of the first meeting.

Four mothers (in two-parent families) and a father and mother from the same family agreed to participate. Table 1 (where pseudonyms that the parents chose for their family are used) shows the participants and their family situation. Following ethics approval, four lots of one-hour semi-structured interviews, subsequent observations and conversations took place in the parents' homes. This location was chosen to facilitate their comfort and to allow for a clearer picture of their culture and way of life (Hammersley and Atkinson 2007). Within the context of an ethnographic case study approach, information was gathered leading to the construction of data showing 'a unique example of people in real situations' (Cohen, Manion and Morrison 2007). By applying consistent care and support, the researcher (Gina), who was also a family learning tutor) considered and shared the impact of their story in relation to her own experiences, resisting judgment and building trust.

[INSERT TABLE 1]

The first three meetings occurred over a period of three months and involved entering the parents' homes informally and sharing personal conversations linked to the previous visit and intervening period. This led into reviewing the pre-delivered transcripts from each interview. Open-ended questions about received support became a starting point to each conversation, leading to additional prompts and probes applied sensitively to each parent's circumstances and story. Listening included awareness of body language and emotional state, consciously noticing what was and was not being said and paying attention to feelings stirred for both parties.

Detailed fieldnotes were compiled which illustrate how the parent's and researcher's knowledge and experiences combined in creating a co-constructed narrative. The intention was that each ensuing story would contain the 'individual's personal field of experience, a construct of the individual's particular biographical store of episodic memories' (Campbell 1988, 61). In listening to these experiences being recounted each parent's story became enriched as connections to the prior knowledge of the researcher and parent were made. As parents became involved in checking and editing the stories they had shared, comments, interpretations and responses made were shown alongside the transcripts and became the subject of reflection and then dialogue. This became significant as knowledge was shared and confirmed, edited or discussed.

The narratives that emerged arose from short encounters of an hour but were made possible by the researcher becoming immersed in the parents' worlds and consciously reflecting on the impact of them telling their story. Each parent was generous in providing a chronological narrative of events from the time that they had noticed their child's difficulties; the process led to vivid and detailed accounts intertwined with the researcher's responses of empathy and connection-making. Following each meeting there was a period of reflection to distil what had

been shared providing space to later re-enter the story. The co-construction was a process of recording a blend of descriptions and analysis; focusing on individuals to understand their perception of events and to portray the richness of the case in writing their story (see Hitchcock and Hughes 1995). Each story emerged as unique, shaped by the individual experiences, personal definitions, assumptions and expectations that became transparent as each parent described their experience of receiving support towards meeting their child's special needs. The researcher's prior knowledge and experience became a reference point for understanding the intentions behind the formal support systems. Each party was learning something new from the other. This took on the value of layers of new meaning from each person's perspective.

The parents were offered the opportunity to record in a format of their choice what they regarded as the significant sources of support. These paper-based artefacts became a vehicle to focus on between visits and a further channel to express how they had evaluated the experience. This was a useful tool for Barbara, who drew lines (depicting the sun) around her favourites, and for Tasmin who used a mind map for the many professionals she had met. Alfred set out with enthusiasm using a dartboard to grade the different encounters, though his interest in this waned as it did for Andrea and her top ten. For Catherine and Ruby the artefact seemed to become an unncessary encumbrance, perhaps because they had fewer professionals to focus on. In each case the parent led and could choose to set aside the product of their task

To explore longer term developments, a year later Alfred, Andrea, Barbara and Tasmin, who were still receiving support for their children, took part in a follow-up research encounter. With permission, notes were taken while a professional providing support visited them in their home. This 'non-participant observation' led to dialogue about what had been observed, bringing together the positions of a researcher/professional/observer with the experiences of the parents.

In a final interview the story of the parents' experiences of support over the previous twelve months were reviewed.

Extracts from the data were used to write each parent's story showing how single events often shaped their view of themselves and providing examples of the critical incidents which were recalled at a point when they were receiving support. Analysis was an iterative process as each recorded encounter was re-visited on six occasions; this illuminated points which may otherwise have been overlooked. Computer Aided Qualitative Data Analysis Software (Atlas ti) was used when assigning codes to the data. While the process highlighted common themes such as: personal feelings, personal values, comparing, judging professionals, parent concerns, and the value of support, they were not fundamental to the co-constuction of the stories. This was because the priority was to create accounts of a series of unique experiences rather than identify cross-cutting patterns. Interaction with the transcripts and the resulting narratives enabled the parents to contribute to constructing and interpreting data.

Findings: Learning from co-constructions

There is not scope within this paper to present the parents' experiences in full. Instead we present a series of snapshots of encounters with a parent and the learning that arises from co-constructing their story. The examples combine information shared and reflections on the information and process. We use extracts from the research journals and illustrate how each parent communicates information that faciliates understanding of their experiences of receiving support for their child.

The first interviews took place with Alfred and Andrea together and the notes reflect the impact of relationships on support scenarios. They provide a lens for how some partnerships between professional and parent are experienced.

Alfred gives the impression that he relies on Andrea, he writes 'wife no.1' on his picture of the dartboard recording examples of support. The information he gives me infers that each has a specific role, for example when talking about Portage he says 'my wife does the most of it'. He appears to categorise certain people as being expert in particular areas telling me that the family support worker (FSW) gives him advice on things he can't talk to his wife about. He explains that (in his opinon) the FSW is impartial as he says 'I've got someone not representing anyone else'. As he shared these stories of searching for someone to rescue him from his difficulties and perhaps 'tell him what to do' I found myself considering the role of the expert model in partnership. This partnership exists with the agreement of both parties, one seeking help, the other regarding themselves as qualified to tell the person what to do. In Alfred's case, his wife and the FSW have agreed to provide solutions for Alfred and in doing so the identity of the expert is reinforced.

Meeting Andrea tested Gina's pre-held opinions of what parents are looking for from support and illustrated the importance of listening to learn what living their lives might be like. Through listening - to what was said and that which was unarticulated below the surface - assumptions of how a parent in Andrea's positon might feel were challenged.

As we began the first interview Andrea seemed conscious and proud of her role as someone who had all the information about Amber at her finger tips. Her body language, sitting up straight, steady eye contact suggested she wanted to impress me. She told me in a clear unemotional voice that Amber 'had huge behavioural problems'. This was her reason for rating KIDS number one in her 'top ten hits'. Her examples of what they do (offering advice on behaviour management strategies) seemed poignant as I felt she

wanted me to know that living with Amber was difficult. At the same time suggesting she was up to the challenge. I was left feeling — 'I'm not sure I would be'. Her priorities, are the importance of Amber learning life skills first and education second. I wondered if this represented a resignation that her daughter would not achieve a great deal academically but that the life skills would bring about independence. However her matter of fact tone taught me not to get carried away in my own interpretation of this being a tragedy.

As Gina revisited Alfred and Andrea over the three months she began to experience feelings of unease, even frustration in the apparent contradictions in their experiences of meeting professionals.

I noted the colourful language that was applied to both positive and negative encounters. In my first meeting Alfred tells me the staff at KIDS are: 'friendly, brilliant, well mannered', yet in the third interview I hear that 'there's no one around who wants to help the parents, they will try and help the children but then it's very difficult because we haven't been getting the help that we should have been getting for our children'. A similar swing is communicated by Andrea who tells me that after she challenged the response of the first health visitor who told her there was nothing wrong with Amber, 'we've got all the help we've needed really'. Yet at the third meeting I am confronted with another reality as Andrea tells me of her disappointment in professionals, 'they do not know your up from your down and your left from your right or anything like that', her desparation as she tells me that they 'never answer what you need them to answer'.

Gina recorded the impact of this, writing

So often I note that what seems to represent a randomness sits uncomfortably with me. There is a lack of predictability and control which I know I rely on. It is only by attempting to enter her world, to form a bond of trust with Andrea that the previous determined and authoritative mask she wears begins to slip revealing a mixture of resentment, confusion, disappointment and helplessness as she tells me that professionals do not recognise 'her social phobia' thinking she is 'talking out of her bottom'. These truths are held carefully under wraps leaving me feeling privileged that Andrea is able to share something of her vulnerability with me. Yet the fact that this provoked feelings of disturbance in me leaves me wondering how the truth would be received by another professional in my position.

Barbara presented herself as positive about her situation with Bernard. It was only when Gina listened to what was happening beneath the surface that her feelings of isloation and being misunderstood began to spill over into something that was articulated in words. Without an orientation toward co-constructing a story with her, something important in her experience would have been missed.

Suddenly she finds a way to communicate loneliness and feeling misunderstood by expressing her desire to have a friend who she already knows who 'just happened to have another child with Down's, um, so friends first'. As soon as it is out of Barbara's mouth she seems horrified by what she has said, 'I know it wouldn't be lovely' she says quietly. Here I catch a glimpse of her conflicting feelings about Down syndrome, a contrast to her mainly positive examples expressed using a bright enthusiastic tone. I realise how the disguised stress cloaks ambivilent feelings, perhaps the truth she is afraid to admit?

Gradually Gina learned of Barbara's journey of adjustment in coming to terms with Bernard's condition and the impact of appointments:

'It's the difference between feeling included and accepted and actually feeling isolated and abnormal, (small laugh) its that, its that important! That one appointment or one visit if it goes wrong or isn't good, for again for what ever reason because it is so huge can actually leave you feeling kind of awful again, for whatever reason and a good appointment can make you feel on top of the world.'

During interview encounters this theme regularly emerged showing how important it is to consider the messages professionals leave with the parent and their lingering impact.

Catherine illustrated the significance of the professional building a relationship with the parent so that the support offered met her needs. The information was a clear challenge to the judgements and frustrations that are prompted in professionals when a mother seems reluctant to take a path recommended.

Her tone was almost strident, as though willing me to sit up and listen, she did not want to be, as she saw it, 'labelled, like the teenage mum groups'. I wondered what she did want and on the script she wrote 'I wanted to go out shopping and visiting friends not to groups'. As she continued she talked about finding it [the groups] 'a real chore' and that she had been 'sent along', a point reinforced in the handwritten comment, 'I felt I had no choice'. When she was there she indicated that she was marking time until she could leave and go home and concludes with the stark statement, 'so it wasn't helpful'. I felt myself squirm and yet instinctively to protect myself I found myself judging her. I wanted to justify behaviour that I might have followed by criticising her for identifying herself as

too good for the support groups. However I had to acknowledge that whatever the reasons and my probably misplaced indignance the resources were clearly missing their target.

Ruby's story helped to tell us more about parents' relationships with professionals that they might be unaware of. She wanted staff to give her more information about what Reece had been doing in pre-school because with his speech and language delay he couldn't tell her himself. She feared being labelled by professionals and negative implications for Reece.

Ruby thinks if she phoned up the pre-school they would say 'oh here we go'. Although she concedes that it is their job to give her information. Looking down and changing her pace of speech she slowly tells me that 'I was worried they would treat him differently because he had that delay'. I ask her to explain what she means and she stumbles over an answer saying, 'I didn't want them to sort of pick on him and ... I know that sounds terrible, but um you know I didn't want them to sort of, you know? Not focus on him as much, you know?'. This concern she said arose from reading 'horror stories about nurseries' wondering if they might 'isolate him as such'. As I realised Ruby's fears for her son, I felt shock and imagined that these thoughts were hidden from the professionals covered by her apparently jovial and informal communication style.

Encounters with Tasmin led to questions about how perceptions need to be challenged as judgements are often made on first impressions.

In embarrassment and shame I recall how, because of the lack of a diagnosis for Tony, I had questioned whether Tasmin was an appropriate participant for this study. As I listen to her story, the reality of my misjudgement hits me. Tasmin's worries are real, acute and

clearly defined as she describes the impact that Tony is having on the family. I consider what my own story might look like in her situation comparing it to my relatively trouble-free experiences of mothering. I listen as she discloses how Tony's behaviour is influencing their relationship as she almost whispers the confession that her friends do not want to look after Tony saying, 'I don't blame them to be honest Gina, 'cause I think sometimes if I didn't have to look after him (laughs) I probably (begins to laugh), I wouldn't want to either'.

In the initial meetings Tasmin shared her frustration, anger and exhaustion in trying to convince the professionals that Tony was different. In the final meeting her relief at finally being taken seriously was palpable as the educational psychologist confirmed that Tony 'did have special educational needs um or additional educational needs and that he would probably benefit from going ... going to um an SEN pre-school'. She explained that although people still tried to explain Tony's behaviour in terms of 'he's a boy and that's what boys are like' she knew 'that he hasn't been given a place at the pre-school because he's a boy and a bit naughty'. Her story prompted a breakthrough for Gina in realising how to listen differently.

The process of reflection for the participants and the researcher could be discomforting at times, but even with the discomfort this could become transformative. Ruby reflected that: 'it's really helped me to talk about Reece's and my experience throughout this rollercoaster journey'. Tasmin commented on how she was surprised at the rawness of of her emotions still, but that it was useful to 'reflect on how Tony's care is overall' which was different from going 'from one appointment to another'. Barbara's reflection, though, illustrates the potential of this iterative and collaborative approach:

On a more personal level, I have found the whole experience actually quite empowering, I knew that there were some types of 'support' that I preferred and others that I really didn't like, and being able to talk to someone and then take a step back and read the transcripts of our discussions has helped me work myself out a bit.

Discussion: The value for practice

The examples above prompt a review of the relationships and practices of early years support professionals. Historically, policy in the UK has consistently recommended that where intervention is needed positive partnerships with parents are a necessary ingredient to promote the welfare of the child (DCSF 2007). However, more recent research highlights that support often goes against the wishes of the family (DfE 2011). Lamb's (2009) investigation of Special Educational Needs services in England found that parents wanted professionals to listen more carefully to bring them 'into a partnership with statutory bodies in a more meaningful way' (p.3). The examples provided in this paper illustrate how stories and understandings can be coconstructed and what that 'meaningful way' might look like as the professional begins to identify with the parent at a level that offers new insights into effective intervention for the child and family. This is made possible by combining the unique knowledge of the parent with that of the professional.

A key ingredient of co-construction is reflection and Rix and Paige Smith (2011) embrace this idea using the example of professionals engaging by providing a collective model of development, which exposes 'values, beliefs, practices, knowledge and underlying assumptions arising within their own personal, professional, cultural and situational experiences' (p.38). Espe-Sherwindt (2008) also recommends that the beliefs and values of parents are

considered by the professionals who meet them. Our findings illustrate the benefit of applying this to practice when the disposition of the professional is rather like the open disposition of the researcher here – receptive to challenge and new insights.

The success of working in partnership that leads to effective intervention for children and their families is dependent on a relationship which is shaped by the attitudes and definitions of each party (Krauss 2000). Co-construction facilitates this through identifying parents' strengths and expertise but not leaving this at face value or as a truth that trumps all other truths. Frankham (2009), discussing participatory research, is not alone in recognising the tendency 'to over-claim the benefits of partnership working and to avoid acknowledging the complexities of the field'; furthermore that there is a need to counter 'celebratory narrative[s]' without undermining 'the idea or the ideal of carrying out research with service users'. The same could be said of partnership work for support rather than research purposes: honesty is needed about the nature of the challenges as well as benefits. It is honesty that Rix and Paige Smith (2011) advocate, so that contradictions and struggles become a starting point for reflecting on practice and personal perspectives. When the parent and professional explore together there is the potential for the family to 'move on' and for intervention to be worthwhile and more cost effective (Pinney 2007); there is potential for professionals to move on also. Sameroff and Fiese (2000) argue that when the professional works alongside the parent, targets that emerge are more likely to match 'a specific child in a specific family in a specific social context' (p.149). Co-constructing a story in the way we have described can bring to light new information as both parties share their experiences, skills and knowledge, and as they share their responses to what the other is saying (and not saying) and how they are saying it.

A further facet of professionals working with parents in providing support is that of achieving an effective balance of power and control. The unequal power that emerges from the type of relationship in an expert model means that support for children's special educational needs becomes something that is managed by professionals. Case (2000), Dunst, Boyd, Trivette and Hamby (2002) and Brett (2002) argue that this removes responsibility from the parent leaving them powerless. The answer, we argue, is not to view power as a commodity that can instead be handed back to the parent in the interests of the child. Power is better viewed as something we 'do' rather than 'have' (Thomson 2007, after Butler 1990). An argument for co-construction of stories is that it contains narratives from both positions, acknowledging the specialist and flawed knowledge that each party holds and creating something new. Moreover, it encourages the joining up of their powers to reflect and act in shaping improvements in support for the young child.

Developing a collaborative relationship helps to facilitate a family-centred model of partnership which enables children's special needs to be more effectively met. Paige Smith and Rix (2006) acknowledge that such supportive relationshipstake time to grow. Dale (1996) endorses this, also describing how applying family-centred partnership leads to parents feeling more equal, confident and competent in their role. What is often missing from academic and professional support for such collaborative working is the detail of how it is achieved. Unusually, Puigvert, Christou and Holford (2012) outline methods to achieve the egalitarain dialogue that is needed for transformation to happen between researchers and participants, including their communicative daily life stories, communicative focus groups and communicative observations. Their communicative daily life stories have greatest echoes with what transpired in this project:

a reflective narration on the everyday experiences of people who are directly involved ... [not] a simple biography or an outline of daily activities but a dialogic reflection during which interviewer and interviewee work together to create an understanding of the world and to provide explanations ... (Puigvert *et al.* 2012, 518)

It is our contention, however, that this dialectic negotiation usefully extends beyond the interview into what follows, and can usefully extend beyond the research relationship into the support relationship.

Conclusion

The purpose of co-construction is to see how listening leads to combining knowledge that leads to appropriate action for the future (Silverman 2005). As two parties enter into a partnership in sharing stories they need to express themselves believably based upon their 'own parallel, similar and analogous situations' (Blumefeld-Jones 1995, 31). An iterative approach to co-construction invites reflection leading to the kind of desired outcome that Stake (1995, 44) describes - passing along 'an experiential, naturalistic account for readers to participate themselves in some similar reflection', because both positions are transparent and open to scrutiny. In the process of coconstruction each story becomes unique because, as Flanagan (1949) explains, it may be that recalling a single event sheds hugely important insights into understanding the issues that participants face and therefore becomes a critical incident. By considering the impact that each story has on the listener these critical incidents can be woven into an individual's story inviting reflection on how things could be different in the future. Thorne (2004) describes research experiences of picking up 'scattered leads and hunches ... instances that seemed to contradict an emergent pattern' (274) to help draw explanations. When research has a transformative focus, co-construction is congruent with Thorne's intention to find out, 'when and how, does a difference make a difference?' (275). The examples of interactions that arose from coconstructing stories discussed in this paper were instrumental in shaping the researcherprofessional Gina's future behaviour in providing support. Listening exposed feelings of insecurity in practice in supporting parents and as a researcher. The process of co-constructing stories of parents' experiences of support itself became a teacher in unexpected ways. It led to Gina realising that, by letting go of control and listening in ways that facilitated an honest review of past actions, unique, transformative insights could be gained.

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Table 1: Participant information

Parent (age in years)	child (age in years)	special need
Alfred: father (32)	Amber (3)	autism and chromosome
Andrea: mother (26)		disorder
unemployed living in local		
authority housing.		
Barbara: mother (33)	Bernard (2)	Down syndrome
part-time employed		
professional living in		
privately owned property		
Catherine: mother (22)	Courtney (4)	elective mute, behaviour
unemployed living in		difficulties
privately owned ex-local		
authority housing.		
Ruby: mother (33)	Reece (3)	speech and language delay
unemployed living in		
privately owned ex-local		
authority housing.		
Tasmin: mother (40)	Tony (2)	unspecified learning and
part-time employed		physical disability
professional living in		
privately owned property		