“It’s like winning the lottery!”:

Using poetic inquiry to re/present parents’ experiences of the education, health and care needs assessment and planning process

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ABSTRACT

Education, health and care plans (EHCPs) were introduced following the enactment of the *Children and Families Act* (2014) and publication of the *SEND Code of Practice: 0-25 years* (Department for Education [DfE] & Department of Health [DoH], 2015). They are statutory documents which specify a child or young person's special educational needs (SEN) and the provision they require (DfE & DoH, 2015, p. 280).

Low parental confidence (Cullen & Lindsay, 2019) in a SEND system that does not appear to "prioritise, recognise or reward inclusion" (ISOS Partnership, 2024, p. 63) is contributing to increasing numbers of requests for education, health and care (EHC) needs assessments (Marsh & Howatson, 2020). The financial stability of the SEND system has been questioned (Sibieta & Snape, 2024) and is described to be in a state of "crisis" (ISOS Partnership, 2024, p. 6). Parents and carers share emotive stories of their battles to obtain EHCPs for their children (Keville et al., 2025; Sandiford, 2025) and report feeling ignored (Hughes, 2024) and dismissed (Hammond, 2024; Starkie, 2024) in the EHC process.

This research sought to capture parents' and carers' lived experiences of the EHC needs assessment and planning process through narrative interviews. Drawing on poetic transcription (Glesne, 1997) and Gee's (1991) linguistic approach to narrative, the narratives of two parents from the Yorkshire and Humberside region are re/presented in poetic form.

This research concludes that the process of obtaining an EHCP is often complex and difficult to navigate; can lack collaboration, transparency and coordination; does not necessarily achieve its aims of being person-centred; and does not always deliver quality EHCPs for children and young people. Parents' and carers' experiences are more positive when they feel supported, listened to and valued, and where there is clear communication throughout the EHC process.

Implications for practice for LAs, educational settings and wider services, including educational psychologists, are discussed.

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DECLARATION

I, Leanne Ghent-Clark, confirm that this thesis is my own work. I am aware of the University's Guidance on Academic Integrity (https://www.sheffield.ac.uk/study-skills/assessment/academic-integrity/academic-integrity). This work has not previously been presented for an award at this, or any other, university.

CHAPTER 1: Introduction

1.1 Explanation of key terms used in this thesis

In this section, I will outline the key terms I feel are significant to a reader's understanding of this thesis.

Throughout this thesis, I will refer to **Education, Health and Care Plans (EHCPs)**. An EHCP is a statutory document that specifies a child or young person's special educational needs (SEN) and the educational, health or social care provision required to meet their identified needs (Department for Education [DfE] & Department of Health [DoH], 2015).

As specified by the *Children and Families Act* (2014) and *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015), an **Education, Health and Care Needs Assessment (EHCNA)** should be carried out by the local authority (LA) when it considers that:

- The child or young person has or may have SEN.
- It may be necessary for special educational provision to be made for a child or young person in accordance with an EHCP.

According to the *SEND Code of Practice: 0-25 years* (DfE & DoH*,* 2015):

> A pupil has **SEN** where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age. (p. 94)

Throughout this thesis, I refer to the **special educational needs and disabilities (SEND) system** as being the "legislation, policies, services and settings that, directly or indirectly, play a role in supporting children and young people aged from birth to 25 with SEND" (ISOS Partnership, 2024, p. 21).

This research explores parents' experiences of the **education, health and care (EHC) needs assessment and planning process**, to which I will henceforth refer to as the **EHC process**. I consider this process to start from the initial request for an EHCNA (assessment phase) to the point at which the LA decides either to not issue an EHCP thus completing the process, or they draft and issue an EHCP (planning phase).

A Special Educational Needs Coordinator (SENCo) is a "qualified teacher in a school or maintained nursery school who has responsibility for co-ordinating SEN provision" (DfE & DoH, 2015, p. 285).

Adopting Adams et al.'s (2017) explanation, I consider the term **specialist educational setting** to refer to "a school which is specifically organised to make special educational provision for pupils with SEN" (p. 10).

1.2 Personal motivation and positionality

Prior to joining the educational and child psychology course at the University of Sheffield, I was a secondary school teacher and inclusion manager, working in the SEN department alongside the school's teaching assistants and SENCo. Amongst other responsibilities, I was a key point of contact for pupils identified as having SEN and my role also included facilitating SEN meetings, including annual reviews of EHCPs. As such, I was introduced to the EHC process from the perspective of a SENCo assistant and was afforded the opportunity to listen to the stories of families with whom I worked about their experiences of navigating the SEND system. These stories continue to influence my practice more than five years later.

Between teaching and commencing my doctoral studies, I worked as an assistant educational psychologist in a LA service. This role provided me with a different perspective towards the EHC process as I was now a practitioner being asked to contribute towards statutory needs assessments, or to be part of the decision-making process in representation of my service. Once again, I heard powerful stories of families who were trying to navigate complex processes they often found confusing (and that I was still trying to understand myself).

Upon joining the doctoral programme, I was able to share my reflections of SEND systems and processes with other trainees and programme tutors during my university seminars. These seminars and discussions have shaped my epistemology and ontology, introducing me to the possibilities of qualitative research and creative methods of inquiry.

My engagement with this research is informed not only by my professional experiences but also by a personal connection to this topic area. As a mother of a young person who currently has an EHCP, I have navigated the challenges of the EHC process and the SEND system, shaping my understanding of its complexities. My family has faced significant challenges in securing him appropriate support and placement to allow him the opportunity to be successful in his education. Advocating for him and researching SEND legislation in order to challenge policies and practices has been integral to my journey, resonating strongly with the experiences of both parents (Anna and Michael) in this research. I have connected deeply with Anna's and Michael's narratives and, during periods of emotional exhaustion and overwhelm, I have drawn strength from their determination and resilience to keep fighting for their children.

I feel it is important to acknowledge the influence of my personal and professional experiences on my research decisions. My family's journey, alongside the stories shared with me by parents and carers in my roles as inclusion manager, assistant educational psychologist and trainee educational psychologist, motivated me to search for a methodology that would privilege Anna's and Michael's voices, honouring their lived experiences and inviting others to connect with their stories. With these aims in mind, I turned to poetic inquiry as a method of conveying the emotional depth of their narratives.

CHAPTER 2: Critical literature review

2.1 Introduction

To contextualise previous research exploring parental experiences of the EHC process, I begin this literature review by summarising the key historical and legislative changes that have contributed towards, and informed, the development of the current SEND system. Focusing specifically on the reforms outlined in the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015), I then describe and critically examine the current SEND system before reviewing existing literature around parental perceptions and experiences of the EHC process. Finally, I identify gaps in the research and explain the rationale for my research questions.

2.2 Historical and political context of special educational needs (SEN)

The *Warnock Report* (Her Majesty's Stationery Office [HMSO], 1978) signified a paradigm shift away from the medicalised model which had previously shaped policy and practice, towards a social model of disability in which the influence of a child's environment on their barriers to learning was to be considered (Lindsay et al., 2020). Warnock abolished terms such as *handicapped and educationally sub-normal* which had previously been used to categorise children and young people's needs, arguing instead for a "detailed description of special educational needs" (HMSO, 1978, p. 43) and suggesting that *learning difficulties* be used as an alternative. Later, Warnock criticised her own choice of terminology, stating that it had led to children and young people being treated as a homogenous group (Warnock, 2010).

The report focused on the integration of pupils assessed as having SEN into mainstream schools, and Statements of SEN (HMSO, 1978, p. 28) were introduced to ensure that children and young people with greater levels of need received the support and resources they required in school, placing statutory duties on local education authorities (LEAs) to implement the specified provision. Warnock estimated that approximately 2% of pupils would require a Statement of SEN (Lamb, 2019).

The *Warnock Report* (HMSO, 1978) was published at a time when 90% of schools were maintained and financially managed by LEAs. The National Curriculum had not yet been introduced, nor were there accountability measures which sought to compare schools through national league tables (Lindsay et al., 2020). Established following the *Education Reform Act* (1988), league tables would later be criticised for deterring inclusivity (Daniels et al., 2019) and disincentivising mainstream schools from allocating places to children and young people with SEN (House of Commons Education and Skills Select Committee, 2006), in doing so creating barriers to the principles of integration proposed by the *Warnock Report*.

Adopting Warnock's use of terminology, The *Education Act* (1981) stated that a child or young person had a learning difficulty if they experienced "a significantly greater difficulty than the majority of children of his age, or… a disability which either prevent[ed] of hinder[ed] him from making use of educational facilities of a kind generally provided in schools" (c. 60). Special educational provision was defined as "educational provision which is additional to, or otherwise different from, provision made generally for children of his age in schools" (c. 60). The *Education Act* (1981) placed responsibilities on governors, LEAs, headteachers and teachers to identify, recognise and provide for SEN, in addition to ensuring the engagement of children and young people with SEN in activities alongside their peers.

The *Choice and Diversity* report (Her Majesty's Stationery Office, 1992) sought to extend the *Education Act* (1981) by implementing statutory time limits for assessments of SEN and establishing a route for parents and carers to appeal against LEA decisions through the introduction of a formal tribunal process. These changes were later enacted in the *Education Act* (1993) which was followed by a decline in the number of children and young people with SEN attending special schools and a simultaneous increase in the number of children receiving a Statement of SEN (House of Commons Education and Skills Select Committee, 2006).

The expectation outlined in the *Education Act* (1981) for all children to be afforded the right to education in mainstream schools within their local community was maintained, with continued emphasis on parental choice regarding their child's educational setting; however, the lack of clarity around the level of provision expected to be ordinarily available within mainstream schools contributed towards regional variations in Statements of SEN, and LEAs faced difficulties in their ability to budget their financial resources (Audit Commission, 1992).

Under the Labour Government (1997-2010), the political focus shifted towards improving inclusivity in mainstream schools, with the Green Paper *Excellence for all Children* (Department for Education & Employment, 1997) proposing that raising standards in schools and improving professional development in SEN for staff in mainstream settings would reduce the number of pupils being educated in specialist provisions. The *Special Educational Needs and Disabilities Act* (2001) sought to protect disabled pupils from discrimination in education and placed a legal obligation on schools to provide the necessary reasonable adjustments to remove disadvantage. Furthermore, the 2001 *SEN Code of Practice* (Department for Education & Skills, 2001) stipulated that educational settings should follow a graduated response for pupils with SEND and emphasised that the identification, assessment and implementation of provision was a whole-school responsibility. Despite these legislative changes, children and young people continued to face difficulties accessing SEN provision, with some schools refusing the allocation of places for those whose needs were perceived to be too complex (Audit Commission, 2002).

The Audit Commission's report *Statutory assessment and Statements of SEN: in need of review?* (2002) concluded that Statements of SEN were contributing towards inequitable distribution of resources, preventing early intervention and inclusive practice. Statutory assessments were described as "a costly and bureaucratic process" (Audit Commission, 2002, p. 14) and poor communication from LEAs was thought to be contributing towards stressful and alienating experiences for children and their families who were often not fully involved in the SEN planning process. Warnock herself would later criticise Statements of SEN as being "a not very bright idea" (Warnock, 2010, p. 25).

In response to the growing concerns around Warnock's SEN framework, the Labour Government commissioned an inquiry into parental confidence in the system: *The Lamb Inquiry* (2009a). The *Lamb Inquiry* interim report (Lamb, 2009c) concluded that the SEN system had created "warrior parents at odds with the school and feeling they [had] to fight for what should be their children's by right" (Lamb, 2009c, p. 2), proposing that a major review was necessary. The report highlighted the need to develop effective relationships with parents and carers, ensuring they felt listened to and were involved in discussions and decisions relating to their child's education. Lamb also raised concerns regarding the quality of Statements of SEN, identifying that the language was often inaccessible, outcomes and provision were substandard and the voices of children and their parents and carers were often absent (Lamb, 2009b).

In their Green Paper entitled *Support and aspiration: A new approach to special educational needs and disability* (Department for Education [DfE], 2011), the Coalition Government (2010-2015) described the SEND system as "bureaucratic, bewildering and adversarial" (p. 4) and, as with previous governments, vowed to increase parents' and carers' confidence by giving them more power and choice regarding their child's educational setting. The Green Paper also promised to reduce the time taken to carry out statutory assessments and to tackle issues surrounding the overidentification of SEN. These proposals were later criticised as not being "radically new" (Norwich, 2014, p. 415), but rather the "extending, integrating and tightening up [of] existing principles and practices" (p. 415).

2.3 The current SEND system

2.3.1 The SEND reforms of 2014

Building on the proposals outlined in the Green Paper (DfE, 2011), major reform of statutory processes was legislated in the *Children and Families Act* (2014), focusing on earlier identification of SEN and better coordination of health, social care and education services. It located the views, wishes and feelings of children and their families at the centre of the SEN assessment and planning process, allowing them to name their preference of educational setting and placing a legal obligation on schools to provide them with information and support to enable their full participation in decision-making. Amongst these changes, the age range of provision was extended to include children and young people from birth to twenty-five years old. Whilst some professionals viewed the increase as being generally positive, they have also raised concerns in relation to its financial impact (Palikara et al., 2018) and the extent to which post-16 settings were able to be inclusive in their practice (Sales & Vincent, 2018). The *Children and Families Act* (2014) introduced a single coordinated assessment system for children and young people, replacing previous Statements of SEN with Education, Health and Care Plans (EHCPs) (Marsh & Howatson, 2020). In the next section of this chapter, I will provide further detail regarding EHCPs and the process by which they can be obtained.

Following the introduction of the *Children and Families Act* (2014), the 2001 SEN Code of Practice was replaced with the current *SEND Code of Practice: 0 to 25 years. Statutory guidance for organisations which work with and support children and young people who have special educational needs or disabilities* (DfE & DoH, 2015). Within its guidance, the *SEND Code of Practice: 0-25 years* outlines the statutory duties on local authorities (LAs) to publish a Local Offer. A Local Offer details "how information, advice and support related to SEN and disabilities can be accessed and how it is resourced" across a local authority (LA) (DfE & DoH, 2015, p. 30). To ensure parents and carers are provided with information, advice and support around their child's SEND, the guidance states that LAs should provide "a dedicated and identifiable" (p. 30) service that is "impartial, confidential and accessible" (p. 31). In many LAs, such services are referred to by their abbreviated name SENDIASS, which stands for Special Educational Needs and Disabilities Information Advice and Support Service. A recent survey with over 250 parent and carer respondents found that 52.7% of participants had accessed their local information advice and support service during the process of obtaining an EHCP for their child (Newbery, 2024). Furthermore, just over a third of parents and carers had utilised the information on their LA's Local Offer page, with the researcher noting that this proportion could potentially be lower in the wider population of parents and carers beyond those captured by the survey (Newbery, 2024).

The *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015) also encourages LAs to work with Parent Carer Forums, stating that:

> Parent Carer Forums are representative local groups of parents and carers of children and young people with disabilities who work alongside local authorities, education, health and other service providers to ensure the services they plan, commission, deliver and monitor meet the needs of children and families. (p. 22)

Lehane (2017) notes that the *SEND Code of Practice: 0 to 25 years* (DfE & DoH, 2015) emphasises the statutory nature of the guidance within its title, highlighting legislative requirements and statutory duties explicitly through its use of the word “**must**” within each chapter. The foreword of the document sets out the then Coalition Government’s intentions to create a more “efficient” (DfE & DoH, 2015, p. 11) system in which young people and their parents and carers would be fully involved in decision-making, with their aspirations and contributions held central to the process. The guidance stipulates that, where a pupil has been identified to have SEN, schools should follow a four-part cycle of assess, plan, do, review in order to “match interventions to the SEN of children and young people” (p. 100), naming this the “graduated approach” (p. 100). However, some argue that it provides limited guidance about this process (Lehane, 2017) and suggest there is a lack of clarity around the forms of provision that should be available to children at SEN support level (House of Commons Education Committee, 2019). Norwich (2014) also highlights its generality and criticises the lack of specific recommendations relating to the identification of SEN. Examining changes across the three codes of practice, Lehane (2017) concluded that in “1994 those with SEN were to be identified, in 2001 they were to be included, in 2015 they [were] to be provided for” (p. 62). With language that is “relatively complex and tends to the technicist” (Lehane, 2017, p.8), Lehane argues that the *SEND Code of Practice: 0 to 25 years* (DfE & DoH, 2015) could be considered the least accessible to classroom practitioners or parents and carers compared with previous versions.

2.3.2 The introduction of EHCPs

In England, an EHCP is a statutory document that specifies a child or young person’s special educational needs (SEN) and outlines the educational, health or social care provision required to meet their identified needs and support them to achieve their desired outcomes (DfE & DoH, 2015). An outcome is defined as “the benefit or difference made to an individual as a result of intervention” (DfE & DoH, 2015, p. 163).

According to the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015):

> A pupil has SEN where their learning difficulty or disability calls for special educational provision, namely provision different from or additional to that normally available to pupils of the same age. (p. 94)

In order to establish whether the provision a child or young person requires is in accordance with the criteria for an EHCP, LAs must carry out an education, health and care needs assessment (EHCNA).

As specified in the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015), an EHCNA should be carried out by the LA when it considers that:

- The child or young person has or may have SEN.

- It may be necessary for special educational provision to be made for a child or young person in accordance with an EHCP.

During an EHCNA, the LA is required to gather views and information from the child and their parent(s) or carer(s). Where the young person is beyond compulsory school age (the end of the academic year in which they turn sixteen years old), the *Children and Families Act* (2014) applies to them directly, meaning they are able to make requests and decisions for themselves.

The LA must also seek advice from relevant professionals, including the manager, headteacher or principal of the child or young person's educational setting; an educational psychologist commissioned by the LA; and any medical professionals who have a role in providing health care for the child or young person. Social care information and assessments should also be gathered as appropriate. Advice from professionals must be provided within six weeks of the request being made by the LA.

LAs must consider all the information available prior to and during the EHCNA and decide:

- whether the special educational provision required to meet the child or young person's needs can reasonably be provided from within the resources normally available to mainstream early years providers, schools and post-16 institutions, or

- whether it may be necessary for the LA to make special educational provision in accordance with an EHC plan. (DfE & DoH, 2015, p. 158)

The LA's decision whether or not to issue an EHCP must be communicated to the child's parent(s) or carer(s) or the young person within sixteen weeks of the initial request for an EHCNA being submitted. When the decision has been made to issue an EHCP, a draft plan must be sent to the child's parent(s) or carer(s) or directly to the young person, providing them with a minimum of fifteen days to contribute their views and discuss the contents of the draft plan. At this point, they are also able to request their preference of educational setting be named in the plan with whom the LA must then consult. The LA are required to finalise the EHCP within twenty weeks of the initial EHNCA request being submitted. The *SEND Code of Practice: 0-25 years* (2015) stipulates that LAs "**must**" (p. 143) adhere to statutory processes and timescales throughout the EHC process, although in reality the twenty week deadline was met in only 46.4% of cases in 2024 (DfE, 2025).

Should a young person or a parent or carer wish to challenge the LA's decision-making relating to an EHC needs assessment or EHCP, they are able to do so by appealing to the First-tier SEND tribunal. Before making an appeal, they must first consider the appropriateness of mediation, although it is not compulsory to go to mediation before making an appeal to the tribunal (DfE & DoH, 2015).

2.3.3 Challenges faced by the current SEND system

Between 2002 and 2012, there was a 91% increase in the total number of Statements of SEN and EHCPs for 0-19 year olds (Marsh, 2023), with the national average rising from 2.1% to 3.9%. Rates continued to rise, increasing by 49% between 2014 and 2019 (Marsh & Howatson, 2020). Whilst Marsh and Howatson (2020) propose that the extension of the age range for provision of support to twenty-five years old will have likely contributed towards this increase, they note that this does not explain the 20% rise in EHCPs for children younger than fifteen years old in the same time period. Rather, Marsh and Howatson (2020) suggest that the increase may have been driven by factors such as the rising rates of permanent exclusion and a lack of parental confidence in SEN support in schools. By January 2024, 4.8% of all pupils had an EHCP, an 11.6% increase from 2023 (DfE, 2024). Marsh (2023) cautions that, if the percentage of EHCPs continues to follow its current twenty-five year trend, by 2042 10% of 0-19 year olds will have EHCPs.

The percentage of children and young people with EHCPs across localities in England has been identified to vary (Marsh, 2023; National Audit Office [NAO], 2024; Sibieta & Snape, 2024), suggesting inconsistencies in SEND processes. In 2022, there was a threefold difference in the percentage of 0-19 year olds with EHCPs between the LA which had the highest proportion in England (Torbay 6.2%) compared to the LA with the lowest (Nottingham 1.9%) (Marsh, 2023). Sibieta and Snape (2024) note the variations in funding across LAs, attributing these to be driven in part by historical measures of need and spending which form part of the National Funding Formula (NFF) used to calculate high needs allocations. Atkinson et al. (2024) note the variation in outcomes for children and young people with SEND across LAs in relation to the percentage of children and young people achieving Grade 4 or above in English and mathematics, describing a “postcode lottery” (p. 11) in the provision available to children and young people with SEND.

The Local Government and Social Care Ombudsman (2019) has described the current SEND system as being in a state of “crisis” (p. 2) driven by long delays in the EHCNA process, poor communication and ineffective partnerships between health, social care and education services. It is proposed that a lack of communication from LAs, for example, in providing explanations for delays, as well as a paucity of user-friendly information, advice and support has added to the complexities of the process, contributing towards dissatisfaction amongst parents, carers and young people (Adams et al., 2018). In 2019, 50% of LAs inspected by Ofsted and the Care Quality Commission (CQC) were judged to have significant areas of weakness in relation to collaboration between agencies and ineffective partnerships with children and parents and carers (NAO, 2019).

Growing dissatisfaction with the SEND system is evident from the increasing number of appeals to the First-tier SEND tribunal. Between 2015 and 2022, appeal rates increased by 251% (Ministry of Justice, 2022). The number of appeals has continued to rise, with 24,000 cases being accepted by the First-tier SEND tribunal in 2024/25

(Ministry of Justice, 2025). Cullen and Lindsay (2019) analysed qualitative interviews of seventy-eight parents who had experienced the SEN disagreement resolution system in England since the introduction of the *Children and Families Act* (2014). They identified that parents' appeals were driven by concerns that their child's needs were not being met within their educational setting and they feared that SEND provision or placements would be taken away by the LA. Such parents were often caring for children with significant SEN and, in some cases, were also facing additional pressures such as health concerns or financial difficulties. "Distressing" (p. 1) experiences had been exacerbated by the demands of navigating statutory processes such as appealing against LA decision making, and parents raised concerns around the "competence" (p. 9) of professionals working within SEN teams. Furthermore, they described having to "battle" (p. 9) to ensure their child's needs were met. Parents felt that disagreements could have been prevented or more easily resolved by professionals listening to them and showing more understanding of their lived experiences of having a child with SEN. They called for greater accountability for schools and LAs where concerns have been raised, and sought an improvement in training for staff within the SEND system to ensure they are capable of fulfilling their roles and responsibilities.

The *Special Educational Needs and Disabilities Report* (House of Commons Education Committee, 2019) reflected on the challenges faced by LAs and schools in implementing the statutory duties outlined in the *Children and Families Act* (2014), attributing their failure to deliver the SEND reforms to significant funding shortfalls, yet also warning that further funding would make little difference without a cultural shift within the system. All mainstream schools have an identified amount in their overall budget (a notional SEND budget) from which they are expected to provide special educational provision for pupils requiring additional support up to a nationally prescribed threshold (DfE & DoH, 2015). This threshold is currently set at £6000 per pupil per year and has remained the same since 2014 (Lamb, 2025). Beyond this amount, schools can apply to their LA for top-up funding from the high needs block of the Dedicated Schools Grant (DSG). Often, the only way of obtaining additional funds is through an EHCP (Sibieta & Snape, 2024); however, there are exceptions, for example, in Nottinghamshire LA, where at least 70% of high needs funding is devolved to families of schools who are then able to allocate funds to individual settings without the need for an EHCP (Nottinghamshire County Council, 2024).

The financial sustainability of the current SEND system in the context of increasing pressures to meet growing demand for provision has been questioned (NAO, 2024; Sibieta & Snape, 2024), and despite the DfE continuing to increase high needs funding by 59% (£6.8 billion to £10.4 billion) between 2015 and 2024, spending by LAs has consistently outstripped the funding provided by central government (Sibieta & Snape, 2024). In 2020, the then government provided LAs with the option to separate DSG deficits from their other accounts. Whilst this "statutory override" has prevented some LAs from entering bankruptcy (Sibieta & Snape, 2024), the intention is for this to cease in March 2026. A recent report from the County Councils Network

(CCN) (2025) claims that fifty-five LAs of the ninety-six surveyed said they would likely go bankrupt if the statutory override was removed. They estimated that in 2024/25 LAs transferred approximately £150 million from other funding blocks to the high needs block, the majority of which was taken from the schools block. The CCN report notes the potential impact this would have on the funding available to mainstream schools to meet the needs of all their pupils.

2.3.4 The call for reform of the current SEND system

In response to mounting concerns regarding the current system, the Conservative Government (2015-2024) launched a SEND review in 2019. Delayed as a result of the COVID-19 pandemic, the Green Paper *SEND Review: Right support, right place, right time* (Her Majesty's [HM] Government, 2022b) was published in March 2022. Although the review acknowledges that it was carried out within the context of a national pandemic, it states that this particular context only "exposed and exacerbated pre-existing difficulties" (p. 20). Acknowledging the failure of the SEND system to achieve the intended outcomes of the 2014 reforms, the review outlined three challenges facing the SEND system:

1. Poorer outcomes for children and young people with SEN in relation to attendance and achievement in school as well as difficulties securing employment in later life.
2. Families' experiences of the SEND system as being adversarial, bureaucratic and difficult to navigate, with parents and carers reporting emotional and financial implications when challenging decisions at tribunal. The review also questioned whether the system is equitable and accessible for all parents and carers.
3. A continuing increase in high needs spending which outstrips the funding received by LAs and means the system is financially unsustainable.

The Green Paper (HM Government, 2022b) called for a consistent, fair and inclusive SEND system governed by national standards around the identification of SEN and the provision that should be available across different types of educational setting to meet different types of needs. It also proposed to increase accountability within the system to ensure children and young people access the "right support in the right place at the right time" (HM Government, 2022b, p. 25). Alongside the Green Paper, the then Government published the Schools White Paper *Opportunity for all: strong schools with great teachers for your child* (HM Government, 2022a), which outlined the vision to improve outcomes for all children and young people by ensuring they had "excellent teacher[s]" (p. 60) and benefitted from "targeted support and a stronger and fairer school system" (p. 60) to allow them to "realise their full potential" (p. 60). The following year, the *Special Educational Needs and Disabilities (SEND) and Alternative Provision (AP) Improvement Plan: Right Support, Right Place, Right Time* (HM Government, 2023) was released, outlining the Government's intended steps towards achieving "an inclusive system that enables children and young people to fulfil their potential, has parental trust and is financially sustainable" (p. 18). In this plan, the Government stated its intention to standardise EHCPs and introduce a digital system in order to improve consistency and reduce bureaucracy. It was also proposed that LAs should improve the information provided to parents and carers to support them to make informed decisions around their preference for placement, suggesting that a tailored list of locally available mainstream, alternative and specialist provisions should be published. Whilst Lamb (2025) acknowledges the benefits of children, young people and their families having access to locally available provision, he cautions that such lists could potentially "restrict" (p. 29) the choices available to parents and carers.

In 2024, ISOS Partnership published a report claiming that the challenges faced within the SEND system derive from an "incoherent system that inadvertently perpetuates tension, creates adversity, and sets everyone up to fail" (p. 8). Whilst emphasising that it is not possible to attribute blame for the "crisis" (p. 6) to any one particular group, the report describes a system in which parents and carers desperately fight for the best possible outcome for their child, whilst educational settings operate within a system that does little to support and encourage inclusive practice. In the context of increasing demand and reduced capacity, local governments, health and care services and struggle to respond to the increasing complexity of need and growing deficits in their budgets.

The ISOS Partnership report (2024) proposes four reasons for the increasing demands on SEND services which I will now summarise:

1. The "medical, deficit-based understanding of need" (p. 60) within national policy which focuses on assessment and planning for individual pupils who require additional support rather than considering their learning environment and wider systemic changes through a social model of need.
2. The 2014 reforms which changed the role of parental preference when naming a setting within an EHCP and also extended the age range for access to the statutory SEND system to twenty-five years old.
3. A SEND system that does not "prioritise, recognise or reward inclusion" (p. 63), referring to the lack of training available to support teachers' understanding of SEND, reduced funding for pastoral and wellbeing support in schools and the narrowing of the curriculum. The report also notes the absence of inclusion in government policy following the 2011 Green Paper.
4. Reduced capacity of universal and targeted support services to meet the needs of pupils due to budget cuts, leading to EHCPs being increasingly perceived as a direct route to accessing support. In particular, the report referred to the work of educational psychologists, with feedback from LA leaders highlighting the dominance of statutory work for EPs and the impact this then had on recruitment and retention.

Among their proposals for reform is the development of a National Framework to support inclusive practice and provide clarity around the additional support that should be expected within education settings. Rather than inclusion being seen as an “add-on to the core business of education” (Bryant & Parish, 2025, p. 15) and additional support being provided through individual funding, ISOS Partnership emphasise that education should meet the needs of all learners at every stage of their education. To strengthen inclusive practice and enable early intervention, they propose that settings should have access to a “core offer” of support from a multidisciplinary team of practitioners including educational psychologists, speech and language therapists and occupational therapists without the requirement for a child or young person to have an EHCP. Furthermore, the report recommends the development of a National Institute for Inclusive Education that would take responsibility for supporting the development of a “skilled and stable workforce” (ISOS Partnership, 2024, p. 150). It also acknowledges the challenges around recruitment and retention of SEND practitioners and the shift away from child-facing work towards assessments and paperwork for specialists such as educational psychologists and speech and language therapists.

Focusing on reforms to the statutory framework, the ISOS Partnership report (2024) recommends that the term “SEND” should be replaced with “additional needs” to encompass a broader range of needs, proposing the introduction of a “Learner Record” for all children and young people identified as requiring additional support. This record would detail the provision and adaptations learners require to be successful in education and would be regularly reviewed and updated over time. Statutory plans would then be reserved for children and young people who require targeted and personalised provision that is beyond what would be ordinarily available within mainstream education settings.

With the aim of creating a “less adversarial system for resolving disputes” (ISOS Partnership, 2024, p. 132) for all children and young people with additional needs, ISOS Partnership (2024) recommend the development of Local Inclusion Partnerships made up of key partners across education, health and social care as well as representation from local Parent Carer Forums and strategic groups for children and young people. The Local Inclusion Partnership would have statutory powers to hold education settings and LAs accountable where complaints are upheld, and new routes of redress would be established to manage cases where it is not possible to locally resolve complaints.

To provide space for discussion around the recommendations presented in their 2024 report, ISOS Partnership held regional and national workshops with parents and carers, young people with additional needs, education leaders, children’s health practitioners and LA leaders. For the purpose of the workshops, Bryant and Parish (2025) consolidated the eight recommendations proposed in their original report into two pillars of reform for the SEND system:

- Pillar 1 focuses on “a holistic and inclusive approach to child development, education and adult life” (p. 8), building capacity in the system to ensure that children and young people receive the right support at the right time.
- Pillar 2 concentrates on the statutory framework and seeks to develop a system that promotes “fair and equitable” (p. 8) decision-making and provides families with voice and choice, at the same time ensuring accountability is “proportionate and effective” (p. 8).

In their addendum report, Bryant and Parish (2025) emphasise that the two pillars are “inter-dependent, mutually supportive, and must be aligned” (p. 9) for the system to be effective, contrasting this with the current system in which there exists a lack of support available for children and young people (Pillar 1) causing families to rely on the statutory SEND system (Pillar 2). Whilst Bryant and Parish acknowledge that Pillar 2 is “one of the most sensitive and emotive aspects of the current SEND system” (p. 26) and recognise that some may feel that changes could threaten the support available to children and young people with additional needs, they argue that reform to the statutory framework is indeed necessary and must be carried out in tandem with reform of Pillar 1. They emphasise that the intention would not be to weaken additional support for children and young people, but to increase their accessibility to it regardless of whether they possess an EHCP.

Workshop participants agreed that it was important to develop an inclusive system in which children and young people are treated with dignity and respect and where they feel listened to, safe and secure (Bryant & Parish, 2025). Young people voiced that it was important to feel understood, accepted and valued in their educational settings and communities. The need to move away from deficit-based language was raised by some participants in the workshops who argued for a focus on “additional support” (Bryant & Parish, 2025, p. 32) rather than “additional needs”. Whilst some young people felt the term SEND had the potential to improve access to support in education, others thought it should be replaced due its potentially negative connotations, particularly concerning the word “special” (Bryant & Parish, 2025, p. 33), which for some had been associated with bullying. Young people recognised the value in education supporting them to prepare for adult life, but shared that systems beyond education, including the workplace, were not always inclusive or understanding of the support they required to thrive (Bryant & Parish, 2025). The young people attending the workshops expressed a desire for there to be groups of young people who would serve a similar function to Parent Carer Forums, supporting young people to share their voice and contribute towards the development of SEND systems.

The proposal of a core offer of support being provided by multidisciplinary teams was welcomed by participants in the workshops, who valued early identification and specialist support being available to children and young people without the need for a statutory plan (Bryant & Parish, 2025). They recognised the need to improve joint working across education, health and social care services, with increased access to provision as part of the core offer from schools. Under Bryant and Parish's (2025) proposals, partners across education, health and social care would have statutory duties to co-construct and co-deliver what they propose would be a Developmental Journal (previously referred to as a Learner Record).

Over 1.6 million pupils in England were identified as having SEN in January 2024, approximately one quarter of whom had an EHCP (DfE, 2024). The increase in pupils being identified as having SEN is disproportionate to the total growth in pupil numbers (ISOS Partnership, 2024). The ISOS Partnership report (2024) asserts that the "lack of clarity in the statutory framework creates confusion, inconsistency, and the potential for disputes between families and statutory bodies" (p. 11). It also refers to the lack of guidance for mainstream settings around the provision that should be provided as part of their general offer to all pupils and notes the challenges this presents for decision making around whether a child or young person has SEN. Between 2017 and 2024, the number of pupils with EHCPs being educated in mainstream schools increased from 126,000 to 252,000 (Sibieta & Snape, 2024), placing financial responsibilities on settings to fulfil the statutory obligations of specified provision. An increase has also been observed in the number of pupils attending special schools (109,481 pupils in 2014/15 compared to 193,880 in 2024/25) (CCN, 2025), with state-funded special schools exceeding their capacity by around 4% (CCN, 2025). Where there are insufficient places for pupils in state-funded special schools, LAs must consider places within independent special schools or out of LA provisions, significantly increasing their financial costs and, some claim, diverting SEND funding away from mainstream schools (HM Government, 2022b). The number of pupils attending independent or non-maintained settings increased significantly between 2015 and 2024, rising from 13,000 pupils to almost 30,000 (Sibieta & Snape, 2024) with a cost of £61,500 per-pupil compared to £23,900 per-pupil for state-funded special schools (Sibieta & Snape, 2024).

Despite growing investment in the SEND system, the educational outcomes for children and young people with SEND are not improving (ISOS Partnership, 2024; NAO, 2024). Atkinson et al. (2024) note the inequalities in outcomes for children and young people with SEND compared to their peers, including an achievement gap whereby only 30% of pupils with SEND achieved a Grade 4 or above in English and mathematics in comparison to 72% who were not identified as having SEND. They state that children and young people with SEND are more likely to be suspended from school, have low attendance (less than 90%) and, at 16-17 years old, be Not in Employment, Education or Training (NEET). In 2024, 11% of children and young people with EHCPs were electively home-educated, NEET or waiting for a placement (CCN, 2025).

The lack of accountability within the current SEND system has been criticised, with parents, carers and LA leaders feeling they have little power to challenge delivery of SEND provision within educational settings (ISOS Partnership, 2024). Bryant and Parish (2025) state that there should be a right to redress for children and young people with additional needs, with particular entitlements to support being protected by law regardless of whether a statutory plan is in place. Lamb (2025) argues that reform to the SEND framework should focus on a shift away from a needs-led model towards a rights-based approach, developing and extending upon the requirements of the *Equality Act* (2010). Rather than focusing on EHCPs being the only legal protection to additional support for disabled children and young people, Lamb suggests that the *Equality Act* (2010) should be used as a means to hold education settings to account on grounds of discrimination for any failure to provide reasonable adjustments. He points out that reasonable adjustments are a statutory right under the *Equality Act* (2010), meaning that such legal entitlements extend to all disabled children and young people, including those who do not have SEN, rather than being reserved for those who have EHCPs. Lamb recommends that clear guidance would need to be provided to settings around the provision that should be “ordinarily available” to pupils, accompanied by increased funding to support them in providing such reasonable adjustments without the need for statutory plans.

2.4 Critique of education, health and care plans

The quality of EHCPs has been questioned (Arnold, 2024; Cochrane & Soni, 2020; NAO, 2019). The *Children and Families Act* (2014) specifies that an EHCP should include individualised outcomes that are specific, measurable, achievable, realistic and time-bound (SMART) (DfE & DoH, 2015). Outcomes should consider “what is important *to* the child or young person…and what is important *for* them as judged by others with the child or young person’s best interest at heart” (DfE & DoH, 2015, p. 163). For some, EHCPs are viewed as person-centred and holistic (Palikara et al., 2018), providing a full account of a child or young person’s needs (Adams et al., 2018). In contrast, they have been criticised for failing to provide an accurate representation of a child or young person’s needs and for containing deficit language, errors and mistakes (Arnold, 2024). Some parents and carers report having to write sections of their child’s EHCP themselves and taking on active roles in the assessment and planning process, such as chasing reports from professionals (Arnold, 2024).

Research suggests that the quality of outcomes written into EHCPs are influenced by the LA in which a child resides, with higher quality outcomes and more detailed needs descriptions being more likely for those residing in more affluent LAs (Castro-Kemp et al., 2019). Although researchers for the aforementioned study acknowledge its limited sample size and focus upon LAs located only within the Greater London area, the findings suggest potential social inequalities within the EHC process.

During the EHCNA process, the LA must seek advice from a range of professionals, including educational psychologists (DfE & DoH, 2015). Whilst professionals working in the SEND system report feeling positive about the single assessment process, they also reflect on the difficulties of coordinating services across the sectors and question whether EHCPs are capable of achieving their intention of a holistic assessment of need, referring to the fact that the focus is often on education alone (Palikara et al., 2018).

Professionals report that factors such as a parent's ability to advocate for their child or how "high profile" a case is considered to be can sometimes determine whether a young person is issued an EHCP (Sales & Vincent, 2018, p. 75). It was also felt by these researchers that EHCPs are sometimes influenced by funding decisions rather than the young person's needs, suggesting inequitable practice in relation to the allocation of SEN provision. A lack of quantifiability in the provision specified on an EHCP has also been seen as a weakness of current EHCPs (Sales & Vincent, 2018) leading to ambiguity in how provision should be implemented.

Whilst the benefits of having an EHCP are expressed by some parents and carers to include additional support for their child in school (Malkin, 2023), a recent online survey of 770 parents and carers revealed that only 34% agreed or strongly agreed that their child's EHCP represented the provision their child received, and 40% agreed or strongly agreed that educational settings made reasonable adjustments for their child (Matthews et al., 2025). For some parents and carers, the EHCP brought little change to the support their child received and no additional funding for the school to implement such provision (Keville et al., 2025). EHCPs place statutory and legal duties on educational settings to implement the stated provision, which SENCos in Hammond's (2024) research stated increases a school's accountability and sense of duty to children and young people. For some children and young people, EHCPs appear to provide a form of protection against exclusion (Keville et al., 2025), whereas for others this support can come too late (Hammond, 2024). Sandiford speaks to a culture in which children and young people with SEND are perceived to be "a drain on current systems" (p. 302), asserting that "until there is a societal shift towards valuing children with SEND, we may all be fighting a losing battle" (p. 216).

2.5 Parents' and carers' experiences of the EHC process

In accordance with the principles of the *SEND Code of Practice* (DfE & DoH, 2015), there is some evidence to suggest that LAs are involving parents and carers in decisions relating to their child's support (Palikara et al., 2018; Sales & Vincent, 2018), for example, through representation of their views (Adams et al., 2018); however, parents and carers continue to feel they are not listened to and do not feel their contributions are truly valued in the EHC process (Adams et al., 2018; Cochrane & Soni, 2020; Cullen & Lindsay, 2019; Holland & Pell, 2017). Some parents report feeling subordinate to professionals, which Eccleston (2016) suggests is related to power imbalances in the system where panels of professionals control decision-making. She argues that it would be difficult to place parents and young people at the heart of decisions where there is such a lack of transparency and clarity within the process.

Skipp and Horwood (2016) found that parental satisfaction with the EHC process was determined by ten factors which I will now summarise:

1. Accessible referral routes for parents, carers and professionals where there was early identification of SEN and intervention in place to support their child's needs.
2. Holistic and person-centred EHC needs assessments that were underpinned by the child or young person's strengths, needs and aspirations.
3. Children and young people having access to high quality support and provision that was matched to their needs.
4. Consideration of their child's future ambitions within their EHCP and access to high quality post-16 provision, information and support.
5. High quality EHCPs that could be effectively actioned.
6. Structures were in place to regularly monitor and review the effectiveness of EHCPs.
7. Information and paperwork was user-friendly, with transparency in communication from professionals regarding delays or decisions relating to the EHC process.
8. Multi-agency teams worked together collaboratively and there was effective communication to support a shared understanding.
9. Parents, carers and their child were seen as equal partners and their voices were listened to and valued. They were supported to make informed choices and to contribute towards decision making.
10. Emotional, social and legal support was provided to families and there was access to independent advice when needed.

This was a small-scale qualitative study exploring the experiences of professionals, parents, carers and young people in only four LAs across England. The research was carried out from May to December 2015, therefore, it is unlikely that the processes outlined in the *SEND Code of Practice: 0 to 25 years* (DfE & DoH, 2015) would have been fully embedded across LAs at this point. The sample for this study was purposive, with LAs being asked to identify families who had reported both positive and negative experiences. Although some controls were put in place to minimise bias, there was still potential for the LA to influence the selection of potential participants. Negatively reported experiences would not only reflect upon the LA, but also the DfE commissioning the research; therefore, potential bias needs to be considered when interpreting these findings.

Adams et al. (2017) found that only two-thirds of parents, carers and young people felt they had been told about information and support services to help them through the EHC process, with only 43% having heard of the Local Offer and 55% having heard of SENDIASS. Participatory research carried out by disabled young people and researchers from Coventry University found that the Local Offer is often inaccessible or unknown to young people (RIP:STARS, 2018); therefore, it is suggested that LAs need to further consider the way in which information and support is made available to young people and their families.

Being able to access a dedicated support and advice service within the LA together with effective collaboration between professionals and the family are associated with higher levels of satisfaction with the EHC process (Adams et al., 2018). Parents and carers who feel unsupported during the EHC process share that having access to advice and information, as well as being listened to with empathy or being provided with emotional support, would have made their experience more positive (Holland & Pell, 2017). Adams et al. (2018) concluded that it is important for families to have access to a proactive individual who leads the process and provides information and support throughout. Furthermore, Eccleston (2016) recommends that LAs consider providing information and support to families before, during and after the process in order to improve transparency and understanding.

Common to positive experiences of the EHC process is the meaningful involvement of children and young people, with their contributions informing the content of the EHCP (Adams et al., 2018); however, research suggests that EHCPs do not always represent the voice of the child or young person effectively (Adams et al., 2018; RIP:STARS, 2018). Very few young people interviewed in the RIP:STARS research were aware they had an EHCP and, where they had knowledge of their EHCP, the content was not always accessible to them. This research called for a rights-based approach to EHC needs assessment and planning, emphasising that discriminatory policies and practices, such as schools failing to make reasonable adjustments for their pupils, deny disabled children their rights. The young researchers cautioned against professionals adopting the medical model of disability due to the fact that it narrowly focuses on diagnoses without consideration of a young person’s strengths. Likewise, Marsh and Howatson (2020) argue that the current system discourages professionals from focusing on strengths and emphasising progress.

A national survey commissioned by DfE of over 13,500 parents, carers and young people found that two-thirds were satisfied with the overall EHC assessment and planning process, with only two-fifths of parents and carers feeling that their child’s experience had been positive (Adams et al., 2017). However, this research found subgroup differences, with respondents reporting greater rates of satisfaction where their child was under five years old compared to those whose children were aged between sixteen and twenty-five. In this research, parents and carers often attributed their satisfaction of the EHC assessment and planning process to the fact that it enabled their child to access the funding or assistance required to meet their needs. They appreciated the positive support they had received from their child’s educational setting and valued being kept informed and given clear information.

Satisfaction was also related to their feelings of empowerment to contribute towards the process as well as them feeling that professionals had listened to their views.

Parental dissatisfaction in this research was more likely where the child or young person had not previously had a Statement of SEN (Adams et al., 2017). There were also variations in satisfaction levels according to SEND type, whereby higher levels of dissatisfaction were reported for children and young people with specific learning difficulties (21%) than for those identified as having speech, language and communication needs (11%). The most common reasons given for the EHC process not working well were related to the length of time taken to complete the process and the difficulties families faced in ensuring their child or young person's needs were met within their educational setting. Subsequent research has revealed that negative relationships with their child's school can increase the likelihood of parents and carers feeling dissatisfied with the EHC process, with them finding the process more challenging when the relationship was perceived to be "adversarial" or "uncooperative" (Adams et al., 2018, p.12).

Adams et al.'s (2017) research focused on young people who were issued with an EHCP in 2015, meaning those who had an EHC needs assessment but did not receive a plan were excluded from the survey. Considering that previous research has found that parents and carers were more likely to be dissatisfied with the EHC process when their child was not issued with an EHCP (Skipp & Hopwood, 2016), there are potential biases in the aforementioned research as a consequence of selecting participants whose experience is more likely to have been positive. Furthermore, for some parents and carers there may have been a twenty-two month gap between their child receiving an EHCP and them responding to the survey; therefore, the research relies on retrospective data where recall of the EHC process may have been affected by experiences following the completion of the statutory process.

2.6 Updated research exploring parents' and carers' experiences of the EHC process

The previous section (2.5) summarised the literature available at the time I conducted the interviews for this research (between February and March 2022). Since then, the research base has increased, with several recent contributions, including doctoral theses, offering deeper insights into parental experiences of the EHC process.

Atkinson et al. (2024) highlight the "traumatic" (p. 4) nature of parents' and carers' experiences when navigating the SEND system, noting the analogies to war and battles they often used to describe their journey towards securing appropriate support for their child. Such language reflects the adversarial context of the current SEND system and echoes metaphors found elsewhere in the literature (Arnold, 2024; Keville et al., 2025; Malkin, 2023; Richards, 2024; Sandiford, 2025), where the EHC process is portrayed as "intimidating" (Keville et al., 2025, p. 1067) and "arduous, laborious, daunting and draining" (Sandiford, 2025, p. 192). Hughes (2024) reports that some parents and carers experienced "gaslighting" (p. 103) and being ignored and threatened, leaving them feeling "devalued and dehumanised" (p. 218). "Gaslighting" is a term that has also been used by parents and carers in other research (Arnold, 2024, p. 151) to describe their experiences and is defined by the Oxford Learner's Dictionary as "the process of making somebody believe untrue things in order to control them, especially that they have imagined or been wrong about what has really happened". The fact that parents and carers use this term to capture their experiences of working with practitioners during the EHC process, to me, is suggestive of coercive and manipulative behaviour.

Parents and carers report the EHC process to be "time-consuming" (Keville et al., 2025, p. 1070), "deceptive and unpredictable" (Sandiford, p. 219), reinforcing perceptions of a system that works against parents and carers rather than with them (Keville et al., 2025). For some, the uncertainty of the EHC process can be unsettling (Hughes, 2024) and the demands placed upon parents and carers can have significant consequences for their emotional health and wellbeing (Arnold, 2024; Keville et al., 2025; Sandiford, 2025), employment (Arnold, 2024; Hughes, 2024) and financial status (Arnold, 2024; Hughes, 2024; Sandiford, 2025), with some parents and carers having to leave work completely (Arnold, 2024). Parents and carers describe the emotional demands of witnessing their child in extreme distress due to them not receiving appropriate support in school, as well as anxiety about what their future may hold (Keville et al., 2025). Furthermore, they express the emotional overwhelm of attending and contributing to meetings in which their child is portrayed in an overly negative light (Malkin, 2023).

Although the *Children and Families Act* (2014) places legal duties on LAs to ensure that parents and carers are supported to participate as fully as possible in the EHC process, research suggests that this principle is not always consistently realised in practice. Reduced funding, time pressures and high caseloads limit practitioners' capacity within LA, health and social care services to work collaboratively with families (Hammond, 2024; Sandiford, 2025), with experiences of tokenistic involvement being reported (Arnold, 2024). Similarly, Hughes (2024) found that time constraints, high workloads and administrative demands around EHCPs were among the factors preventing SENCos from adopting a person-centred approach when working with families. Sandiford (2024) argues that "systems are [being] prioritised over human connections" (p. 299) and advocates for lived experiences to be valued and co-production to be strengthened through enhanced training for professionals.

Consistent with previous research (Adams et al., 2018; Cochrane & Soni, 2020; Cullen & Lindsay, 2019), parents and carers continue to report feeling ignored and dismissed (Hammond, 2024) during the EHC process, with their views not being listened to or valued by professionals (Arnold, 2024; Sandiford, 2025). In contrast, Malkin (2023) found that parents gained a sense of empowerment when their feelings were validated in meetings. Educational psychologists who demonstrated that they were “genuine, conscientious, non-judgemental and trustworthy” (p. 97), helped to reduce parents’ anxieties in meetings, with their empathic approach providing emotional containment. Echoing Eccleston’s (2016) research in which parents perceived themselves as subordinate to professionals, Malkin (2023) found that they sometimes positioned educational psychologists as “experts” (p. 82) who possessed superior knowledge. Despite such power imbalance, the interpersonal skills of educational psychologists were noted to have supported parents to feel at ease to express their views within meetings. Where parents and carers feel listened to, their experience of interacting with practitioners such as educational psychologists has been found to be more positive (Andrew, 2025); however, experiencing a lack of transparency and preparation for meetings is more likely to lead to them feeling dissatisfied with the process (Andrew, 2025). Where collaboration is successful and supports development of shared understandings between practitioners and families, this appears to contribute towards a holistic and improved understanding of the child or young person (Malkin, 2023).

A lack of trust in LAs persists (Keville et al., 2025; Newbery, 2024; Sandiford, 2025), with parents and carers in Arnold’s (2024) research reporting that statutory deadlines and processes are not always adhered to. In some cases, the lack of communication from LAs has contributed towards parents and carers escalating their concerns to those in positions of authority, for example, Directors of Children’s Services or local MPs (Cullen & Lindsay, 2019; Sandiford, 2025). Where families lack access to an advocate who possesses knowledge of the SEND system and the EHC process, parents and carers are often forced to assume this role themselves (Sandiford, 2025). SENCos and parents in Hammond’s (2024) research emphasised the importance of children and young people having a proactive advocate to drive the EHC process forwards. To strengthen their advocacy skills, parents and carers report having to educate themselves about EHC processes and the law through self-led learning (Arnold, 2024), training (Sandiford, 2025) and support groups (Arnold, 2024; Keville et al., 2025). Where their knowledge of the SEND system is lacking, families can feel disempowered (Arnold, 2024). Parents and carers have reflected on their privileged positions in being able to advocate effectively for their child, expressing concern for those lacking similar skills, knowledge or resources (Arnold, 2024; Sandiford, 2025). The absence of such advocacy has been perceived as a significant disadvantage for families (Hammond, 2024), speaking to inequity within the SEND system.

Research suggests that parents and carers perceive the process of obtaining an EHCP to be easier when a child or young person has a clear medical diagnosis (Hammond, 2024; Keville et al., 2025; Sandiford, 2025). Such perceptions of the system combined with a lack of capacity within public services (Hammond, 2024), compels some parents and carers to obtain private assessments to support the EHC process (Arnold, 2024; Hammond, 2024; Hughes, 2024). A recent survey of over 770 parents and carers across all nine regions of England reported that 38% of parents and carers had paid for private assessments for their youngest child

(Matthews et al., 2025). However, Hammond (2024) emphasises that a medical diagnosis is not a statutory requirement for an EHC assessment under the *Children and Families Act* (2014), cautioning that this misconception can lead to a sense of disempowerment among both SENCos and parents.

2.7 Chapter summary

SEND policy in England has attempted to move towards a rights-based framework, focusing on protecting children and young people with SEN and/or disabilities from discriminatory practice within education and empowering them to be involved in decisions affecting their lives. Whilst the *Warnock Report* (HMSO, 1978) marked a paradigm shift in the conceptualisation of SEN towards a social model of disability, some argue that SEN policy and practice continues to be driven by a deficit-based model (Hammond, 2024; ISOS Partnership, 2024; Lamb, 2025), emphasising children or young people's diagnosis or needs at the expense of their strengths (Marsh & Howatson, 2020; RIP:STARS, 2018).

Government policy continues to reinforce the message that the majority of pupils should be taught within mainstream schools (DfE & DoH, 2015); however, funding shortfalls (House of Commons Education Committee, 2019) and "performativity and accountability measures" (Daniels et al., 2019, p. 5) are creating disincentives for mainstream schools to meet the needs of pupils with SEND and are barriers to inclusivity (House of Commons Education & Skills Select Committee, 2006; ISOS Partnership, 2024; Sibieta & Snape, 2024).

The financial stability of the SEND system has been questioned (NAO, 2024; Sibieta & Snape, 2024), with some LAs reporting being at risk of bankruptcy without ongoing financial support from the government to manage high needs spending (CCN, 2025). A reliance on EHCPs to fund SEND provision within educational settings is contributing towards the rise in EHCNA requests (Sibieta & Snape, 2024), yet EHCPs do not always bring additional funding for schools, and parents and carers report that additional provision is not always provided for their child (Keville et al., 2025). Despite increased investment in SEND, the outcomes for children and young people with EHCPs do not appear to be improving (Atkinson et al., 2024; ISOS Partnership, 2024; NAO, 2024) and research suggests there is variability in the quality of EHCPs (Castro-Kemp et al., 2019).

The declining confidence amongst parents and carers in the ability of mainstream schools to meet the needs of their children at SEN support level (Cullen & Lindsay, 2019) has further contributed to the increase in requests for EHCNAs as well as tribunal appeals (Marsh & Howatson, 2020; Ministry of Justice, 2022; NAO, 2024). The continued lack of clarity and transparency in SEND policies and legislation has created confusion within the system and variation between LAs (Castro-Kemp et al., 2019; ISOS Partnership, 2024; NAO, 2024; Sibieta & Snape, 2024), suggesting inequity and inconsistency in relation to statutory assessment processes (Sales & Vincent, 2018). Inconsistencies in the information and support available to parents, carers and young people within the system has also contributed towards levels of dissatisfaction (Adams et al., 2017; Adams et al., 2018; Ahad et al., 2022; Local Government and Social Care Ombudsman, 2019). Many parents and carers share emotive stories of their experiences of navigating the complexities of the EHC process, with metaphors of battles and fighting being frequently cited across the literature (Atkinson et al., 2024; Arnold, 2024; Cullen & Lindsay, 2019; Keville et al., 2025; Malkin, 2023; Sandiford, 2025).

The *Warnock Report* (HMSO, 1978) aimed to support children and young people to secure their right to education by introducing the statementing system and principles of integration. Within the statementing process, the formation of effective partnerships with parents and carers was seen as pivotal. The principles of working collaboratively with parents and carers and involving them in decision-making was again emphasised in the 2015 *SEND Code of Practice: 0-25 years*; however, existing research suggests that these aims are yet to be fully realised (Ahad et al., 2022; Eccleston, 2016; Hammond, 2024; NAO, 2019; Sandiford, 2025). Some parents and carers continue to feel they are positioned as subordinate to professionals (Eccleston, 2016; Malkin, 2023) and they do not always feel supported to contribute effectively to the process (Adams et al., 2018; Cullen & Lindsay, 2019; Hammond, 2024; Holland & Pell, 2017). Parents and carers report feeling they are not listened to or valued within the EHC process (Arnold, 2024; Cochrane & Soni, 2020; Hammond, 2024; Sandiford, 2025), and yet they are forced to take on proactive roles in order to drive EHC processes forward (Arnold, 2024), such as advocating for their child and challenging decision-making of practitioners and LAs. Consistent with the SEND review (HM Government, 2022b), research finds that parents and carers continue to face emotional and financial burdens when navigating the SEND system (Arnold, 2024; Hughes, 2024; Sandiford, 2025). The importance of parents and carers having an ally to guide and support them through the EHC process has been emphasised (Adams et al., 2017; Adams et al., 2018; Hammond, 2024; Holland & Pell, 2024).

2.8 Aims and research questions

My initial review of the literature exploring parents' and carers' experiences of the EHC process was conducted in 2021 prior to my research interviews. The research available at that time employed a combination of quantitative methods such as surveys (Adams et al., 2017; Holland & Pell, 2017) and qualitative methods such as Interpretative Phenomenological Analysis (IPA) (Eccleston, 2016) and thematic analysis (Cullen & Lindsay, 2019; Palikara et al., 2018; Sales & Vincent, 2018; Skipp & Horwood, 2016). Qualitative research tended to use semi-structured interviews to gather parents' and carers' narratives of their experiences where researchers had pre-considered topics for discussion often drawn from reviews of the existing literature. Much of the research at the time had been carried out within the first couple of years following the introduction of the *SEND Code of Practice: 0 to 25* *years* (DfE & DoH, 2015) and, therefore, does not necessarily account for changes to the system or parental experiences over time.

Given that parents and carers often report feeling that their voices are marginalised within the EHC process (Adams et al., 2018; Cullen & Lindsay, 2019; Hammond, 2024; Holland & Pell, 2017), I sought alternative methods that would support me to privilege voice and authentically capture lived experiences. Since my initial review of the literature, academic interest in parental experiences of the EHC process has grown (Andrew, 2025; Arnold, 2024; Hughes, 2024; Keville et al., 2025; Malkin, 2023; Sandiford, 2025; Starkie, 2024); however, to my knowledge, this thesis remains the only research to employ an arts-based methodology within its design. Consequently, I feel it offers a distinct contribution to the field and provides additional depth to current understandings.

This research aimed to:

- Capture the lived experiences of parents and carers in ways that would privilege their voices and restore their agency (Parker, 2004).
- Explore parents' and carers' sense-making of the EHC process.
- Invite others to emotionally connect with the narratives shared by parents and carers.
- Elicit empathy in practitioners who work with parents, carers and their families as they navigate the complexities of the EHC process.

With these aims in mind, I constructed my research questions as follows:

1) How do parents and carers experience the EHC process?
2) What can LA services, including educational psychologists, learn from the narratives parents and carers tell about their experiences, and how might this shape practice?

CHAPTER 3: Methodology

3.1 Methodology overview

In this chapter, I outline my ontological and epistemological position and explain how this influenced my decision to use qualitative methodologies. I justify the suitability of narrative research and poetic inquiry in supporting me to achieve the aims of this research and explain how these approaches were used to explore parents' and carers' experiences of the EHC process.

3.2 My ontological and epistemological position

As a researcher, and also in my role as a trainee educational psychologist, I acknowledge the existence of multiple realities and recognise that parents and carers have their own subjective experiences of the EHC process. I value the unique insights that can be gained from listening to individual stories of experience and seek to foreground the voices of those who feel they are not heard or are dismissed by others. This position aligns with social constructionism, which proposes that knowledge is constructed through our interactions with other people and is located within a particular historical and cultural context (Burr, 2015). This research acknowledges the impact of such contexts on the narratives shared by the participants, for example, the SEND reforms and challenges within the SEND system outlined in the literature review. It also recognises that participants may have narrated their experiences differently beyond the context of the research interview, for example, they may have been mindful of my role as a trainee educational psychologist and felt more or less able to speak freely about their experiences, or perhaps felt conscious about the possibilities of other people reading this research, influencing them to edit or elaborate aspects of their experience.

Social constructionism encourages us to “challenge the view that conventional knowledge is based on objective, unbiased observation of the world” (Burr, 2015, p. 2). In accordance with this assertion, I do not claim to have generated knowledge that is “impartial and unbiased” (Willig, 2013, p. 4); rather, in later sections, I reflect on the way in which my own subjectivity and positionality potentially influenced this research.

Social constructionism suggests that we should think critically about the way in which we, as human beings, categorise the world and what these divisions represent (Burr, 2015). The concept of an “existing, stable reality” (Burr, 2015, p. 14) is opposed. Contrary to positivist and empiricist approaches, social constructionism does not seek to uncover generalisable explanations for human behaviour. Aligned with this position, I did not intend for this research to generate theory that can be applied to the experiences of all parents and carers; although, there may be some parents and carers who feel connected to the participants’ narratives having shared similar experiences themselves.

3.3 Considering qualitative methodologies

3.3.1 Rejecting quantitative methodologies

In the early stages of planning this research, I had considered conducting a mixed methods study. This methodological choice was influenced by the approaches used in existing literature investigating parents’ and carers’ experiences of the EHC process, in addition to the knowledge I had acquired from a mixed methods seminar attended as part of my doctoral training. I planned to use a questionnaire to conduct large-scale research across a LA or region before selecting a small number of participants to interview using a narrative approach. The aim of using a mixed methods approach would have been to gather large amounts of data to support LAs and educational psychologists to reflect on parental experiences, with the assumption that these experiences would be representative of other parents or carers in that region. After reflecting on my epistemological and ontological position, I recognised that such positivist methodology did not align with my own position or with the original aims of the research, which involved listening to the individual stories of parents and carers in order to understand their subjective experiences and foreground their often unheard voices. My undergraduate research methods training had been predominantly focused on quantitative research so, until starting educational psychology doctoral training, my experience of qualitative methodologies had been limited. I realised there was a familiarity in utilising positivist research methods that considered generalisability and objectivity to be the benchmarks of quality research, and this was influencing my methodological choices.

3.3.2 Reflecting on existing literature

My initial review of the literature highlighted the sparsity of research exploring the lived experiences of parents and carers in relation to the EHC process. It revealed that a combination of quantitative and qualitative methods had been employed, including surveys (Adams et al., 2017; Holland & Pell, 2017), Interpretative Phenomenological Analysis (IPA) (Eccleston, 2016) and thematic analysis (Cullen & Lindsay, 2019; Palikara et al., 2018; Sales & Vincent, 2018; Skipp & Horwood, 2016). Qualitative research had tended to use semi-structured interviews (Cullen & Lindsay, 2019; Eccleston, 2016; Sales & Vincent, 2018; Starkie, 2024) to gather parents' and carers' narratives of their experiences where researchers had pre-considered topics for discussion often drawn from reviews of the existing literature. In doing so, interviewers may have controlled much of the direction of the conversation to meet the requirements of their research questions, potentially limiting the extent to which parents and carers were able to choose how to share their experiences.

3.3.3 Choosing qualitative methodologies

Adopting a different approach, my research intended to generate empathy for, and understanding of, parents' and carers' experiences of the EHC process; therefore, I sought a methodology that would not only align with a social constructionist position, but would also support me to privilege the voices of parents and carers. Qualitative research explores "the meanings attributed to events by the research participants themselves" (Willig, 2008, p. 8). As I intended to explore how parents and carers made sense of their experiences of the EHC process, I considered qualitative methodologies to be most appropriate in helping me to address my research questions.

3.3.4 Rejecting Interpretative Phenomenological Analysis (IPA)

During the process of selecting a qualitative methodology, I considered IPA and its suitability in supporting me to explore the unique perspectives and experiences of parents and carers; however, adopting an approach such as IPA would have required me to compile a “list of master themes that reflect[ed] the experiences of the group of participants as a whole” (Willig, 2008, p. 61). Although I planned to discuss similarities between the participants’ stories when analysing the data, I was not intending to collate their responses into shared themes. Doing so may have suggested that common events or feelings were experienced in the same way by each participant which would be inconsistent with the social constructionist perspective towards the existence of multiple realities. As I sought to privilege the individual experiences of parents and carers, I rejected IPA as a possible methodology, instead exploring the field of narrative research.

3.4. Narrative as a research method

3.4.1 Deciding on narrative research

As a trainee educational psychologist, I have been afforded the opportunity to listen to many stories of parents’ and carers’ experiences of the EHC process. These stories have often seemed powerful and evocative, inviting me to consider the process from the perspective of a parent or carer and forcing me to reflect on my own position and role as a practitioner working within the current system. Having witnessed parents and carers expressing their feelings of being unheard and dismissed, I sought an approach that would support my participants to share their voices and to feel they were being listened to and heard.

Narrative researchers tend to adopt a relativist position, acknowledging the existence of multiple truths and embracing subjectivity in the research process (Lieblich et al., 1998). Connelly and Clandinin (1990) state that “the study of narrative is the study of the ways humans experience the world” (p. 2). Within my research, I intended to listen to the stories parents and carers tell of their experiences of the EHC process in order to explore their subjective experiences. As narrative research positions participants as “expert[s]” (Carless & Douglas, 2017, p. 307) on their own lives and considers meaning to be co-constructed through “reciprocal, dialogical interaction” (Carless & Douglas, 2017, p. 307), I felt this approach aligned well with a social constructionist perspective which enables participants’ voice to be privileged.

3.4.2 Narrative as a relational method

Narrative researchers argue that humans share their lived experiences with others through the stories they tell (Clandinin, 2006) and, in doing so, they “attempt to order, organise, and express meaning” (Mishler, 1991, p. 106). In this respect, the storytelling process can provide a sense of “coherence” (Willig, 2008, p. 133). Even though we are not explicitly taught to do so, we begin to make sense of our experiences by telling narratives early in our childhood (Gee, 1985). When narratives are shared, experiences are reconstructed (Squire, 2008), and these stories are influenced by our experiences and interactions with others as well as the institutions, society or culture in which we are situated (Clandinin, 2016). Squire (2013) claims that sequencing experience into narratives "*make*[s] us human" (p. 50). Through storytelling, connections are formed (Riessman, 2008) and experiences are shared with others.

Riessman (2008) suggests that narratives can be used for a variety of purposes including persuading audiences of claims to truth or mobilising others to take action. When telling a story, a narrator engages the audience and offers them the opportunity to experience events from their perspective (Riessman, 2008). Through the relational activity of storytelling, other people are encouraged "to listen, to share, and to empathize" (Riessman, 2001, p. 697). My hope for this research is that it offers space for empathy and understanding of parents' and carers' experiences of the EHC process. Additionally, by reflecting on such experiences, I hope that practitioners such as educational psychologists are supported to consider the implications for their own practice and how they work with parents and carers in their role.

3.4.3 Narrative in my research

For the purposes of this research, I adopted Riessman's (2008) understanding of personal narratives as representing "long sections of talk – extended accounts of lives in context that develop over the course of single or multiple research interviews" (p. 6). Personal narratives were, therefore, considered to be the entire narrative shared by the participants across their interview (Riessman, 2001).

I consider my research to fit within Squire's (2008) description of experience-centred work whereby narratives are "sequential and meaningful stories of personal experience" (p. 42). By this definition, experience-centred narratives do not necessarily focus specifically on individual events, although they may do so, and they may include stories about present, future or hypothetical events. I understand experience-centred narratives to be re-presentations of experience (Squire, 2008) that are context-bound and fluid over time (Squire, 2008). Murray (2003) proposes that "a narrative can be defined as an organized interpretation of a sequence of events" (p. 113). As this research adopts a social constructionist position, the focus is not to represent the "truth"; rather, the intention is to try to understand the meaning of narratives to individuals (Riessman, 2008). As previously suggested, telling stories of past experiences is a meaning-making process and narrators will reproduce the past through their own interpretive lens; therefore, the parents' narratives are not considered to be exact representations of events. From this perspective, a narrative is considered to be "one articulation told from a point of view that seeks to persuade others to see the events in a similar way" (Riessman, 2008, p. 187).

Once I had selected narrative research as a means by which to gather and explore parents' and carers' experiences, I sought an accessible method of sharing the narratives that would support me to foreground the voices and emotional experiences of parents and carers. In this endeavour, I turned to arts-based research (ABR).

3.5. Turning to arts-based research

3.5.1 The possibilities of arts-based research (ABR)

Barone and Eisner (2012) define ABR as an approach that “exploits the capacities of expressive form to capture qualities of life that impact what we know and how we live” (p. 5). Broadly, it encompasses, “methodological tools used by researchers across the disciplines during any or all phases of research” (Leavy, 2018, p. 4) including, but not limited to, poetry, digital storytelling, theatre and photography. ABR has grown in popularity within the qualitative community and it is claimed to go beyond other research paradigms in revealing new insights and learning (Leavy, 2015). The fact that ABR “requires a novel worldview and covers such expansive terrain” (Chilton & Leavy, 2014, p. 403) has led to proposals that it is a paradigm in its own right rather than a methodological tool belonging to qualitative inquiry (Leavy, 2018).

ABR is often seen to be of benefit where research questions seek to describe, explore or discover (Leavy, 2015) and is suggested to be accessible to a broader range of audiences (Chilton & Leavy, 2014). It has the potential to be evocative and provocative (Leavy, 2015) and to elicit empathy for other people’s experiences (Barone & Eisner, 2012), all of which aligned with my hopes for this research.

Having read several theses from previous students on my doctoral course, I had experienced first-hand the powerful impact of poetry as a method of representation (for examples see Munroe Burrows, 2020; Potts, 2020; and Poyser, 2020) and this led me to further explore its suitability for my own research. By using poetry, I hoped to encourage readers to connect with parents’ and carers’ stories and reflect more deeply on their experiences of the EHC process in order to cultivate empathy.

3.5.2 Exploring poetic inquiry

3.5.2.1 Re/presenting narrative through poetry

Poetic inquiry is “a form of qualitative research in the social sciences that incorporates poetry in some way as a component of an investigation” (Prendergast, 2009, p. 560). In this research, I have employed poetry as a means of re/presentation and analysis, turning transcripts from my interviews with two parents into poetic form and then analysing the poems to deepen my understanding of their experiences of the EHC process. Poetic re/presentations of research data are found across a wide range of fields, including psychology, sociology, social work and education (Prendergast, 2009). Such poetic methods allow for “evocative” and “engaging” texts to be produced (Chilton & Leavy, 2014, p. 408), “transforming qualitative interview data into meaningful expressions of lived experiences" (Carr, 2003, p. 1330). As my aim was to invite others to emotionally connect with parents' and carers' narratives, thereby eliciting empathy and a deeper understanding of their experiences of the EHC process, I considered poetic inquiry to be an appropriate method for my research.

3.5.2.2 Authorship and subjectivity

Stenhouse (2014) turned to poetic inquiry as a way to "shift the balance of power related to the authorship of research products" (p. 430), encouraging other researchers to "disrupt the usual power dynamics of research production" (p.435) by exploring different writing practices and modes of presentation, such as poetry. Richardson (1990) proposes that qualitative researchers have more freedom to relinquish their authority over those being studied but makes it clear that the authorship of the text continues to remain the responsibility of the writer. Richardson, therefore, suggests that researchers adopt the position of "a narrator, a person with a point of view; an embodied person responsible for his or her words" (p. 27). Whilst I acknowledge my own presence at every stage of the research process, be it the transcription of the interviews, construction of the poems or analysis of the narratives, I feel that poetry has supported me to privilege the voices of parents in this research and re/present them authentically.

"Creating poetic inquiry is a performative act, revealing researcher/ participants as both masked and unmasked, costumed and bared, liars and truth-tellers, actors and audience, offstage and onstage in the creation of research" (Prendergast, 2009, p. 547). I consider the knowledge I have acquired through the interviewer/ interviewee relationship to be "partial, situated, and subjective" (Richardson, 1990, p. 28). In using poetry to re/present the narratives, I am not claiming to have held "a mirror to reality" (Stenhouse, 2014, p.430); rather, I intended to present my interpretations of the narratives shared. Such interpretations were inevitably underpinned by my own values, beliefs and experiences. Language constructs a "particular view of reality" (Richardson, 1990, p. 12) and, as a researcher, I made decisions about how to transcribe the interviews, the phrases I chose to include in the poems and the way in which the poems were presented on the page. At each stage, I made interpretations of the narrative; therefore, along with Stenhouse (2014), I have opted to use the word *re/presentation* throughout this research to recognise my own interactions with the narratives during the construction of the poems.

The process of constructing poems can lead to unique insights into stories of experience (Kendall & Murray, 2005). Serpa (2022) claims that the process of crafting poetry allowed them to form a "new relationship" (p. 10) with their data, "heightening sensitivity to tacit meaning" (p. 6) and "providing a direct route to the meaning of experience" (p. 6) by focusing on emotional cues. I anticipated that the process of constructing the poems would, therefore, require me to form an intimate connection with the participants' stories through my need to repeatedly read the interview transcripts and closely listen to the interview recordings. The level of analysis required when using a narrative approach alongside poetic inquiry was one factor that influenced my decision to employ a small sample size for this research.

3.5.2.3 Privileging the voices of parents and carers

From the stories parents and carers have shared with me in my role as a trainee educational psychologist, I have surmised that they often feel their voices are ignored or dismissed when navigating the EHC process. This has also been reported in the literature I reviewed whilst carrying out this research (Adams et al., 2018; Cullen & Lindsay, 2019; Hammond, 2024; Holland & Pell, 2017). Consequently, it was important to me that I utilised a method of re/presenting narratives that would honour parents' and carers' individual lived experiences and encourage readers to listen to *and* hear their voices. For me, poetry provided an ethical way of achieving this.

"Poetry is about showing, not telling" (Faulkner, 2007, p. 222). By using poetry to re/present the participants' stories, I intended to show, not simply tell, the reader how the EHC process felt for the parents who participated in my research. Poetry has the potential to communicate a "powerful message that may equally intrigue and incite" (Lahman et al., 2011, p. 895) and does so in a way that reveals new understandings about lived experiences (Poindexter, 2002). Stenhouse (2014) claims that poetry allows audiences to engage emotionally and cognitively with other people's stories, connecting the reader to human experience and eliciting an empathic response (Faulkner, 2020). It is suggested by some that this is more likely through the use of poetry than prose (Kendall & Murray, 2005). Richardson (2003) proposes that the poetic form also encourages readers to engage in their own interpretations and to recognise the text as being jointly constructed (Richardson, 2003). The organisation of poems into stanzas forces readers to "slow down, as if in a conversation with the participant" (Koelsch, 2015, p. 99). In the context of my research, I felt that poetry would re/present the parents' narratives in a more accessible form that would allow readers to engage with their emotional experiences on a meaningful level, eliciting empathy and a deeper understanding.

3.5.2.4 Seeking to capture the essence of the narratives

When selecting a form of poetic inquiry to re/present the parents' stories in this research, I was initially drawn to the process of constructing I-poems using the Listening Guide (Gilligan et al., 2011). Whilst the analytical process I have followed may bear some resemblance to the stages outlined in the Listening Guide, I chose to deviate from the use of I-poems. The I-poems take "I" phrases and isolate them away from the rest of the narrative in order to explore representations of self; rather, I wanted to capture the "essence" (Glesne, 1997, p.206) of the narratives shared by the participants, allowing readers the opportunity to understand the parents' journeys through the EHC process. I did not feel I-poems would be effective in supporting me to fully achieve this particular aim.

3.5.2.5 Selecting poetic transcription

Existing literature describes a wide range of approaches which fall under the umbrella of poetic inquiry (Prendergast, 2009), poetic transcription being one such approach. In this research, I have opted to employ Glesne's (1997) description of poetic transcription as "the creation of poem-like compositions from the words of interviewees" (p. 202). Glesne (1997) claims that "poetic transcription creates a third voice that is neither the interviewee's nor the researcher's but is a combination of both" (p. 215). I felt that poetic transcription would allow me to retain the authenticity of parents' and carers' voices whilst also acknowledging my role in the co-construction of their poems.

The processes I followed when transcribing the interview recordings and constructing the poems will be detailed further in later sections of this chapter.

3.6 Design and procedure

3.6.1 Recruiting parents and carers

3.6.1.1 Advertising the research

The first stage in seeking participants involved sending an email providing information about my research project to the Yorkshire and Humberside regional coordinator for parent carer forums. The email requested that the recruitment poster (Appendix A) be forwarded onto parent carer forums in each LA in Yorkshire and Humberside so they could advertise the research with their members. As such organisations support parents and carers who have children with SEND, I considered it likely that some of their members would have experienced the EHC process and, as a result, I felt this to be an effective way to recruit participants. In order to protect the anonymity of parents and carers who elected to participate in the research, they were asked to make direct contact with me by email to the address provided on the research poster.

3.6.1.2 Eligibility for the research

To participate in the research, parents and carers were required to be over eighteen years old and have parental responsibility for a child who had received an EHC needs assessment between July 2019 and July 2021, regardless of whether an EHC plan was issued upon completion of the needs assessment. One of the reasons this two-year period was selected was the hope that recency would support the participants to share extended narratives of their experience. I also felt the gap between the EHC needs assessment ending and the interviews taking place would afford the participants space to reflect on their experience in order to consider their thoughts and feelings in relation to the process. I hoped that having time to process their experience would support the parents' and carers' decision making in relation to what they felt comfortable to then share in the research interview.

Another reason for recruiting participants who had experienced the EHC process within the specified period was to ensure the research would not fall within any statutory timescales as, based on the date I started the recruitment process, any LA decisions related to key points of the EHC process would have already been made. In doing so, I wanted to avoid any potential impact the research could have on statutory processes, for example, influencing how the parents and carers themselves responded to the process, or other people’s responses towards the parents and carers should they discover they were participating in the research. For the same reason, I also wanted to make sure there were no ongoing mediation or tribunal appeals.

3.6.1.3 Recruiting Anna and Michael

After emailing to express their interest in the research, prospective participants were sent the participant information sheet (Appendix B) and participant consent form (Appendix C) and were asked to return these once signed. Two parents expressed their interest in the research and subsequently participated in the research project. Henceforth, I will refer to my participants by their assigned pseudonyms, Anna and Michael. Anna has a daughter who was issued with an EHC plan when she was in secondary school. Michael has a son who was issued with an EHC plan whilst attending an early years setting. In this research, I refer to Anna’s daughter as Kaylee and Michael’s son as Thomas. These names are also pseudonyms. In order to protect the anonymity of Anna and Michael, their exact geographic location within the Yorkshire and Humberside region will not be identified.

3.6.2 Ethical considerations

3.6.2.1 Gaining ethical approval

Before recruitment commenced, ethical approval for this research was obtained from the University of Sheffield (Appendix D). In addition to following the university’s policies, this research was guided by the *BPS Code of Human Research Ethics* (British Psychological Society, 2021a) and the *BPS Code of Ethics and Conduct* (British Psychological Society, 2021b).

3.6.2.2 Protecting anonymity

As previously mentioned, Anna and Michael are pseudonyms that are used throughout this research to protect their identity. I was also aware that Anna and Michael may include characters within their stories who had not given their consent to be part of the research, for example, their own child and other family members, education staff or practitioners working within their LA. Depending on their experiences and what they chose to share, there was potential for Anna's and Michael's narratives to negatively impact on these individuals or organisations by damaging relationships or status (Traianou, 2014). To protect their anonymity, the names of any individuals or places mentioned in the stories were replaced with pseudonyms during the transcription phase, and any words, phrases or sections that provided potentially identifiable details were removed or edited. I hoped that recruiting participants across the Yorkshire and Humberside region would further protect Anna's and Michael's anonymity and any other characters mentioned in their stories, in addition to the LA in which they resided.

3.6.2.3 Considering power

I was aware of the potential power imbalance that could be created by my role as a trainee educational psychologist working within a LA; therefore, I made my position as a trainee at The University of Sheffield explicit in the recruitment poster. In the participant information sheet (Appendix B), I identified that I was on placement in a LA within the Yorkshire and Humberside region; however, I made it clear that the research had not been commissioned by a LA. I felt it was important to make the boundaries between my research and trainee role clear so as not to create expectations that any findings would directly influence LA policy or practice.

An element of my role as a trainee educational psychologist working in a LA involves contributing towards EHC needs assessments for children and young people by providing psychological advice. To ensure the participants felt comfortable sharing their experiences of the EHC process, it felt important to avoid recruiting parents or carers with whom I had pre-existing personal or professional connections. Having previously worked within a number of LAs in the Yorkshire and Humberside region, either as a trainee educational psychologist, in my previous role as an assistant educational psychologist, or before that as a teacher, I knew that having connections to prospective participants was possible. My concern was that personal or professional connections would have the potential to contribute towards the power imbalance that already existed in the interviewer-interviewee relationship, which may have impacted on what Anna and Michael felt comfortable sharing with me during their interview. I was conscious that, if this were the case, they may have felt encouraged to share more than they would have under different circumstances or, conversely, felt uncomfortable divulging information during their interviews because they were conscious of my role in their experience. I was also wary that the participants may have found it difficult to differentiate between my role as a researcher and my previous role working with them as a trainee educational psychologist.

3.6.2.4 Supporting Anna and Michael to prepare

Prior to their research interview, Anna and Michael were offered a video call which intended to provide them with an opportunity to ask questions or discuss any concerns they had around the research process. I had hoped this would support them to feel more informed about the research process and more prepared for their interview. During their pre-interview meeting, the information sheet and consent form was explained to them. In particular, their rights within the research process were reiterated and they were made aware of how their data would be used as well as their right to withdraw.

Riessman (2008) points out that individuals may find it difficult or uncomfortable to share extended accounts of their experiences. Due to the potential sensitivity of this research area, emphasis was placed on Anna's and Michael's ability to choose what they wanted to share about their experience, and we explored possible ways in which they could prepare for the interview. As part of this discussion, timeline drawings (Guenette & Marshall, 2009) were offered as a potential option. Prior to Anna’s interview, she informed me that she had worked with family members to create a timeline of events that had occurred prior to and during the EHC process. Anna shared that this process had provided her with an opportunity for reflection and allowed her to gain new understandings of her own and her daughter’s experiences. Michael had also prepared for the interview by summarising in writing what he described to be his “journey”.

3.6.3 Narrative interviewing

3.6.3.1 Choosing narrative interviews

Narrative interviews were chosen as a method to gather Anna's and Michael's experiences of the EHC process by offering space for them to share their individual stories and unique perspectives. As this research was exploratory, I elected to use an unstructured interview style that would allow me to be responsive to what Anna and Michael chose to share about their experience through their stories. This appeared to contrast with the semi-structured or structured interviews often used elsewhere, in which researchers tended to have a desired focus for their interviews and specific aspects of experience they wished to explore through their questioning. Instead, I chose narrative interviews as they aim to privilege an individual’s perspective towards their own experiences (Oluoch et al., 2023).

During the narrative interviews, I followed the stages proposed by Anderson and Kirkpatrick (2016):

1. Introducing and explaining the research process.
2. Providing space for interviewees to share their narrative.
3. Questioning and reflecting back to gain further information or clarity.
4. Concluding the interview by explaining the next steps in the research process.

I will now outline how I adopted these stages when carrying out the narrative interviews with Anna and Michael.

3.6.3.2. Introducing and explaining the research process

Before each interview commenced, the purpose and aims of the research were reiterated, drawing upon the participant information sheet (Appendix B) previously shared with Anna and Michael and providing space for them to ask further questions regarding the research. Their rights throughout the research process were emphasised with reference to the participant consent form (Appendix C) they had already signed.

It was explained to Anna and Michael that the purpose of this research was to listen to their subjective experiences, and it was emphasised that their stories may differ to other people who had shared their experience. In line with a social constructionist position, I sought to acknowledge the existence of multiple realities and emphasise to Anna and Michael that I was interested in their individual stories told in their own words.

3.6.3.3 Providing space for Anna and Michael to share their narrative

At the beginning of their interviews, Anna and Michael were invited to share their stories in relation to the following opening question:

> “Please can you tell me about your experiences of the education, health and care needs assessment and planning process. Include as much or as little detail as you feel comfortable sharing.”

Influenced by my reading of Emerson and Frosh (2009), this broad opening question was intended to invite Anna and Michael to choose the direction of their narrative and provide them with the space and autonomy to talk about the aspects of their experience they perceived to be meaningful (Carless & Douglas, 2017). The aim was to “narrativise topics” (Hollway & Jefferson, 2013, p. 33) and elicit stories by asking an open question that encouraged them to follow their own agenda. This was important in supporting me to foreground their voices within this research and to understand their unique perspectives and sense making of their experience. By allowing Anna and Michael to control the flow of the interview and not imposing my own structure or judgements (Hollway & Jefferson, 2013), I attempted to shift control over to them and diminish the power disparity in the interviewer-interviewee relationship (Riessman, 2008). From an ethical perspective, giving over control to Anna and Michael was intended to provide them with greater autonomy and choice over the parts of their experience they decided to share.

During the interview, I saw myself as a facilitator whose role was to create a safe and supportive environment in which Anna and Michael felt comfortable sharing their stories. Throughout the interview, verbal and non-verbal responses, for example, head nods and vocalisations such as, “Yeah,” were used to demonstrate that I was actively listening. Any interruption to the flow of storytelling was avoided; however, prompt questions were used during gaps in the storytelling to encourage Anna and Michael to expand on their narratives.

3.6.3.4 Questioning and reflecting back to gain further information or clarity

Throughout Anna’s and Michael’s interviews, I noted key phrases and aspects of their narratives that appeared to be particularly meaningful to them, and this supported me to reflect their language use when seeking further clarification, reflection or explanation through questioning. I felt it was important so that I could remain as close to their words as possible to ensure the narratives reflected their voices and individual experiences.

3.6.3.5 Concluding the interview and explaining the next steps in the research process

Following their research interviews, I reiterated the details of the information sheet and consent form to Anna and Michael. Space was provided so they could reflect on their interview and ask questions about the next steps in the research process. They were again reminded about their right to withdraw their data should they wish to do so, and they were informed that they would receive a copy of their interview transcript once these had been produced. Anna and Michael were advised they would have the opportunity to edit details within their interview transcript in order to further protect their anonymity, for example, removing words, phrases or sections they did not wish to be included in the final thesis. They were also made aware of support services they could access should they require advice and support around their experiences of the EHC process. Both Anna and Michael had previously accessed local and national support services and I sensed they were well-informed about who they could contact should they need support in the future.

3.6.3.6 Pilot study

The first interview with Anna was intended to be a pilot, the purpose of which was to evaluate my use of narrative interviewing and gain feedback around how the process felt for her. In the pilot interview, the broad opening question as well as the non-verbal and verbal prompts encouraged the elicitation of an extended narrative. For this reason, the same narrative style was adopted in the second interview with Michael and, as no significant changes were made to the interviewing technique, I considered it appropriate to include Anna's narrative in the main study. In order to grant permission for her interview to be analysed and included in the final research report, Anna signed a second consent form (Appendix E) in addition to the one she had signed to participate in the pilot study (Appendix F).

3.6.3.7 Adapting to the COVID-19 pandemic

As the interviews were carried out during the COVID-19 pandemic, additional research guidelines from the University of Sheffield were followed. These guidelines required that research interviews be conducted by video call rather than in person. Hanna and Mwale (2017) propose that one of the benefits of using video technology is the flexibility it provides with respect to the scheduling of interviews. This was of particular relevance to Anna's interview which, without access to video technology, would have been cancelled because I tested positive for COVID-19 on the scheduled date.

Carrying out the research online also meant that Anna and Michael were able to choose where they wanted to be when they joined the video call. They were both at home when the interview took place and it is possible this may have provided space for them to feel more relaxed and comfortable to share their experiences. As Hanna and Mwale (2017) note, video technology ”offers participants a space that is both (more or less) private and familiar *and* accessible to the researcher, who nonetheless remains removed from that space” (p. 260). Furthermore, the flexibility of using video technology allowed Anna and Michael to more easily plan their interview around other commitments, such as their work schedule, without having to spend time travelling to an alternative and potentially unfamiliar venue.

The use of video technology had a particular advantage for myself as a researcher as I was able to widen the geographic location of my sample to include parents and carers across the Yorkshire and Humberside region without travelling long distances to carry out the interviews. I was, however, mindful that not all parents and carers had access to video technology; therefore, in order to reduce any potential disadvantage or exclusion from the research, I had sought ethical approval to offer the alternative of a face-to-face interview in exceptional circumstances.

Anna and Michael were given the option of turning off their camera during the interview; however, they both chose to keep their cameras on. This provided visual interaction which allowed me to observe their non-verbal forms of communication and respond to these accordingly. I believe that being able to respond to visual cues contributed towards the development of rapport with both participants.

3.6.4 Transcription process

3.6.4.1 My approach to transcription

Audio recordings of the interviews were made using dictation software to allow for accurate and detailed transcription. Anna’s interview lasted one hour and twenty-five minutes and the duration of Michael’s interview was fifty-four minutes.

Following the interviews, I transcribed the audio recordings using speech-to-text software. In order to improve the accuracy of the transcripts, I repeatedly listened to the audio recordings and edited each line of speech accordingly. I feel that, whilst this process was time consuming, the effort I dedicated to this stage of the transcription process increased my familiarity with Anna's and Michael's narratives and afforded me the opportunity for deeper reflection. As I listened to the audio recordings and read the transcripts, I highlighted key phrases or words that, to me, appeared significant to their narratives, including emotive language, idioms and metaphors.

Riessman (2008) states that researchers transcribe narratives in ways that reflect their theoretical aims and views about “the self” (p. 29). In line with a social constructionist perspective, this research acknowledges the interactional context in which “the self” is co-constructed. De Fina and Georgakopoulou (2008) propose that narratives are “*emergent*, a joint venture and the outcome of negotiation by interlocutors” (p. 381) suggesting that narratives be considered as “talk-in-interaction” (De Fina & Georgakopoulou, 2008, p. 382). Furthermore, Mishler argues that meaning is created through the dialogue between interviewer and interviewee and the circular process through which each interlocutor (participant in the interaction) attempts to interpret what the other person is trying to communicate (Mishler, 1991). Recognising myself as an active participant within the construction of the narrative (Riessman, 2012), I acknowledge that the implicit or explicit cues I provided (Mishler, 1991), for example, the words I chose to use or how they were emphasised when asking questions, may have influenced the way in which Anna and Michael chose to respond within the context of the interview. I, therefore, consider the interview transcripts to be a “co-production” (Burr, 2015, p.172) between myself and my participants.

Standing (1998) reports that when editing her participants’ style of speech to reflect standard English she “homogenized” (p. 191) their voices to sound the same. When transcribing Anna’s and Michael’s interviews, I chose to include their use of discourse markers (for example, right, okay and so) and fillers (for example, err and erm) to reflect the way in which they narrated their experiences. At times within the transcript, I have intentionally misspelt words in an attempt to represent their dialect. This was intended to support the interpretative process by providing readers with a sense of Anna’s and Michael’s individuality as expressed through the language resources they used to narrate their stories (Stenhouse, 2014). Furthermore, my aim was to re/present Anna’s and Michael’s unique narratives in their own words and speech style in order to preserve the authenticity of their voices.

3.6.4.2 Adopting Gee’s approach

When transcribing Anna’s and Michael’s interviews, I was influenced by Gee’s linguistic approach to narrative (1991; 2014), which focuses on the way in which narratives are spoken and organised. Gee pays close attention to the prosodic features of speech, such as stress and intonation, to support the organisation of the narrative into poetic structures: lines, stanzas, strophes and parts. I anticipated that this would support me to consider Anna’s and Michael’s structure of their narrative and patterning of their speech when later constructing their poems.

Applying Gee’s approach, lines within the transcripts are subdivided into micro-lines and macro-lines (Gee, 2014). Micro-lines represent an idea unit, which is a section of speech containing at least one pitch glide (the rise and fall in speech) and one new salient piece of information the speaker has shared with the audience. Idea units are often initiated and separated from others by a pause or hesitation in the speech (Gee, 1991). Tending to the breathing patterns and pauses in Anna's and Michael's speech supported me to think about the organisation of micro-lines in the transcript (Kendall & Murray, 2005).

Micro-lines that are syntactically connected are grouped into macro-lines (Gee, 2014). Gee (2014) asserts that the macro-lines produced in speech are much like the sentences that feature in written discourse; however, they may not be as tightly “constructed” or “integrated” (p. 162). Within the transcripts, I used a numbering system, which reflects that of Gee’s method (2014), to show the organisation of micro-lines and macro-lines across the narrative. Alongside the numbers, which represent the organisation of macro-lines, lower-case letters signify the subdivision of micro-lines (idea units).

Gee (1991) suggests that stanzas are often made up of four macro-lines that relate to a single topic, noting the similarity of this four-line pattern to the structure of English formal poetry. Stanzas mark perspective (Gee, 1989) and are described as individual scenes that share a particular focus, for example, an event, character, action, time or place. They are often signalled by disfluencies in speech and linguistic devices such as pauses. Connected stanzas then form strophes, which subsequently group together to form parts. As can be seen from the transcripts (Appendix G & H), each stanza, strophe and part has been assigned a title that has been constructed from the language used by participants to describe their experiences.

It is noted that Gee’s method of transcription excludes the researcher’s voice and does not consider the interviewer’s influence on the construction of the narrative. As I intended to examine the interactional context as part of the narrative analysis, I deviated from Gee’s approach to include my voice within the transcripts.

3.6.4.3 Gaining consent from Anna and Michael

Once finalised, I offered Anna and Michael the option of reviewing their anonymised transcripts so they could reflect on what they had shared during their interview. Despite having provided their consent for me to use their narratives prior to taking part in the research, I did not think Anna and Michael would have been able to predict exactly what they were going to share with me during their interviews. As a result, I felt it was important to provide them with the opportunity to withdraw any details they did not feel comfortable being included in the final transcript. I was aware that both parents had other commitments and I was conscious of placing additional pressures on them; therefore, participation in each stage of the research process was presented as an invitation. The anonymised transcripts were sent to Anna and Michael by email together with my suggestions for any sections or words I felt should be redacted. Anna and Michael agreed to review their transcript and highlight words, phrases or sections they felt could increase the likelihood of them being identified within the research. Michael replied, stating that he agreed with the edits I had suggested to anonymise his transcript and any sections I had already redacted to reduce his identifiability or that of other characters. Anna also responded and did not feel any additional details needed removing from those I had proposed. This member checking process provided an additional opportunity for participants to withdraw themselves or aspects of their data should they wish that to happen.

My intention had been to invite Anna and Michael to a follow-up meeting so that I could further explain my rationale for the words, phrases or sections I had selected for editing. In doing so, I hoped that Anna and Michael would feel the process was more collaborative and that their feelings and voices were being heard and represented within the research. Unfortunately, due to time limitations experienced whilst completing this thesis, these meetings did not take place. Any communication regarding the transcripts was, therefore, by email.

3.6.5 Re/presenting the narratives in poetic form

The poems I have created are, as Prendergast (2009) categorises them, "*Vox Participare*" (p. 543), participant-voiced poems constructed from interview transcripts. These poems are designed to re/present participants' unique sense-making of their experiences of the EHC process.

Glesne (1997) outlines one method for transforming interviews into poetic narratives. Using only words and phrases spoken by interviewees, Glesne employed literary devices such as juxtaposition to create poems, selecting sections of speech to represent the "essence" (p. 206) of the narratives whilst also attempting to reflect the natural rhythm of the speaker. At times, Glesne took licence with the interviewee's words, for example, using repetition, modifying the endings of words and changing verb tenses to create an emotional experience for the reader.

When constructing the poems for this research, I chose to stay loyal to Anna's and Michael's use of language in the hope that I could re/present their stories with authenticity. The first stage in constructing the poems involved repeatedly listening to the audio recordings and reviewing the interview transcripts, highlighting key words and phrases I felt were significant. This process sensitised me to the presence of poetic features in Anna's and Michael's narratives, including idioms and metaphors, emotive language and repeated phrases. I extracted these words and phrases and placed them into a separate document, arranging them in chronological order and according to the line structure of the transcript. Through the use of line breaks, poetry is able to represent the pauses and natural breathing patterns observed in speech, eliciting a greater emotional experience for the reader (Richardson, 2003). In the poems I created, line breaks were used to mark a change in micro-line (idea unit), reflecting the way in which Anna and Michael had structured their narratives. This process allowed me to create a poem for both Anna's and Michael's narratives as a whole which, henceforth, I will refer to as *narrative poems* (Appendix I & M).

Once the narrative poems were finalised, I analysed each one thematically, using a colour coding process to group lines according to their shared meanings. Collating the lines for each theme, I constructed a series of *mini-narrative* poems (Richardson, 2003) for both Anna's and Michael's narratives. Richardson (2003) proposes that short poems can help to "focus and concretize emotions, feelings and moods…in order to recreate moments of experience" (p. 190).

Through several cycles of revision, I engaged in what Poindexter (2002) described as a "diamond cutting exercise" (p. 709), reducing each mini-narrative poem down to words and phrases that were the most "evocative in emotion and clarity" (Poindexter, 2002, p. 709), whilst also ensuring context was retained. I took some licence with my use of punctuation, which was intentionally selected to emphasise significant or emotive aspects of the narratives and to create rhythm in the poems. Each mini-narrative poem was assigned a title based on the meaning I felt was being conveyed. I also chose to select titles that reflected Anna's or Michael's use of language, drawing on repeated words or phrases of significance.

"Poetic representation offers social researchers an opportunity to write about, or with, people in ways that honour their speech styles, words, rhythms, and syntax" (Richardson, 2003, p. 190). Ward (2011) posits that poetic re/presentation foregrounds the stories of participants and creates verisimilitude by constructing the poems using solely the participants' words. She states that the poetry in her research focused on the essence of the stories, creating evocative texts that encouraged readers to connect with the experiences of others. Along with Ward (2011), I chose to re/present Anna's and Michael's dialects in the poems I created to respect their individuality and support readers to get closer to the narrative as it was shared.

3.6.6 Further analysis of the narrative

3.6.6.1 Introducing my analytical approach

Prior to the construction of the poems, I spent time immersing myself in Anna's and Michael's narratives. Drawing on aspects of Gee's literary approach to narrative (Gee, 1991), I examined the way in which the units of speech (stanzas, strophes and parts) were structured in the transcripts, exploring relationships within and between these units in order to further understand the progression of the narratives. My interpretation of the structure of the narratives is summarised in the narrative maps provided in Appendix J and N. This process was helpful in supporting me to capture the essence of Anna's and Michael's narratives within the poems I constructed.

Once the poems were finalised, I turned my attention towards Anna's and Michael's use of language and the poetic features I had highlighted during repeated readings of the transcript, considering their role within the narratives as well as their impact on me as a listener. During this process, I frequently returned to the audio recordings to remind me of the emotion conveyed by Anna and Michael during the telling of their narratives.

3.6.6.2 Psychological subject

Guided by Gee's (1991) analytical approach, I examined the narratives for shifts and changes in the main psychological subjects across each stanza. Gee states that a psychological subject is marked by the grammatical subject of a main clause and represents point of view. To be identified as a psychological subject, it must be "germane" (p. 30) to the stanza and not the narrative as a whole. Gee suggests that the patterning of psychological subjects reflects the "narrator's stance" (p. 31) across the narrative, and encourages researchers to ask, “Why does the narrator shift point of view this way?” (p. 32).

Analysis at this level involved highlighting the pronouns used by Anna or Michael across each stanza of their interview transcript and then summarising their patterning across the narrative in a psychological subject map (Appendix K & O). In my analysis section, I describe the significant patterns and changes in psychological subjects that I observed within Anna’s and Michael’s narratives.

3.6.6.3 Presentation of identity

It is proposed that, through the narrativisation of past events, individuals “claim identities and construct lives” (Riessman, 1993, p. 2). From a social constructionist perspective, identities are “never unitary or stable” (Burr, 2015, p. 126), rather they are constructed during the social interactions that occur between individuals and are, in part, shaped by culturally available discourses (Burr, 2015) and political, social and personal contexts (Murray, 2003). Murray (2003) states that our narrative identities are connected to our social relationships. What individuals choose to include or exclude in their narrative is influenced by how they wish to portray their identity to others (Riessman, 1993).

In this research, I considered narratives to be a representation of how Anna and Michael wished to be known in the context of their research interview (Riessman, 2008). By analysing the patterning of psychological subjects across their narratives, I was able to identify occasions where they spoke in first-person. When doing so, I considered them to be presenting aspects of their identity. For both participants, this analytical process led to the construction of an identity poem. A detailed explanation of how these were constructed for each participant is provided in the analysis section of this thesis.

3.6.6.4 Interactional context

As indicated, narratives are situated in a particular interactional, cultural and historical context (Riessman, 2001). Through “reciprocal, dialogical interaction” (Carless & Douglas, 2017, p. 307), meaning is constructed. Participants in this research were aware of my experience of writing psychological reports for EHC needs assessments as a trainee educational psychologist. They were also aware of my plans to disseminate the research to parents and carers, practitioners within LAs and other trainee educational psychologists following its completion. Although it is not possible to state exactly how these factors, or indeed other factors beyond those identified, shaped participants’ narratives, there is potential for the interactional context of the research interview to have influenced how participants chose to construct their identity.

Analysing the interactional context was the final level of my analysis, my reflections on which are included in the reflexivity section of this thesis.

3.6.7 Assessing the quality of narrative research

3.6.7.1 Selecting an appropriate criteria

Willig (2008) asserts that the criteria used to evaluate qualitative research should be informed by the epistemological and ontological framework adopted by the researcher as well as the underpinning assumptions of the chosen methodology. Due to the diverse range of epistemological frameworks within the field of qualitative research, Madill et al. (2000) state that “researchers have a responsibility to make their epistemological position clear, conduct their research in a manner consistent with that position, and present their findings in a way that allows them to be evaluated appropriately” (p. 17).

Reflecting on the article by Madill et al. (2000), I feel this research fits within the contextualist form of social constructionism whereby it is recognised that “all knowledge is local, provisional, and situation dependent” (Jaeger & Rosnow, 1988 as cited in Madill et al., 2000). As stated in previous chapters, I am not claiming that Anna's and Michael's narratives would remain stable over time or across different contexts, nor am I suggesting that the same accounts would be given by other people who were present during their journeys through the EHC process. I consider Anna's and Michael's narratives to be interpretations of their experiences (Riessman, 2008) that are shared at a particular point in time and with a particular audience in mind; therefore, it is recognised that they could have been told differently in other contexts.

The contextualist position acknowledges the existence of multiple realities and alternative perspectives (Madill et al., 2000) and, therefore, accepts subjectivity within the research process. As such, the criteria of objectivity and reliability are not considered to be appropriate evaluative criteria for qualitative research conducted within this epistemological framework. Rather, Madill et al. (2000) propose that the focus is on “completeness not convergence” (p. 10).

In discussing the validation of narrative analysis, Riessman (1993: 2008) suggests that researchers consider the trustworthiness of their work. She distinguishes “trustworthiness” from “truth” (Riessman, 1993, p. 65) which she states “assumes an objective reality” (Riessman, 1993, p. 65). Riessman proposes that researchers should consider the following when assessing the validity of their narrative analysis: persuasiveness, correspondence and pragmatic use. I will now discuss each of these approaches in the context of my research, the evaluation of which will be included in my discussion.

3.6.7.2 Persuasiveness

Firstly, in order to achieve persuasiveness, Riessman (2008) urges researchers to “present their narrative data in ways that demonstrate the data are genuine, and analytic interpretations of them are plausible, reasonable, and convincing” (p.191).

Riessman recommends being transparent in the analysis of narratives whilst also acknowledging the possibilities of alternative interpretations.

Butler-Kisber (2018) notes how the annotated transcripts presented in Glesne’s (1997) work enhanced the transparency and credibility of her research. Similarly, I have included excerpts of the annotated interview transcripts in the appendix of this research as well as explanations of any decisions I made during the transcription and analysis of the narratives. In doing so, I have attempted to strengthen the persuasiveness of this research by allowing readers to consider my interpretations and analytical decisions.

3.6.7.3 Correspondence

Riessman (1993) emphasises the importance of member checking whereby participants are provided with opportunity to comment on their interview transcripts and the analytical interpretations made by researchers. Within this research, Anna and Michael were able to review their interview transcripts and request that potentially identifiable details were edited or removed. I had initially hoped to create further opportunities for collaboration with Anna and Michael by providing them with opportunities to review and comment on the poems I constructed and to share their perspectives towards my analysis of their narratives; however, time constraints prevented these intentions from being realised.

3.6.7.4 Pragmatic use

Riessman (2008) proposes that the validity of research can be assessed by considering its pragmatic use for other people’s work. In this chapter, I have explained, and justified, the way in which I transcribed and analysed Anna's and Michael's narratives. Furthermore, I have provided a detailed outline of the steps I followed when constructing their poems. Such transparency is intended to support other researchers to evaluate the trustworthiness of my methodological and analytical decisions whilst also allowing opportunity for them to follow the same processes should they wish to do so in their own research (Riessman, 2008).

3.6.8 Quality in poetic inquiry

Prendergast and Belliveau (2013) outline the qualitative touchstones they suggest should be considered when evaluating poetic-based research. In the following section, I will consider each touchstone in relation to my own research.

3.6.8.1 Effective contextualisation and application of poetic forms

Firstly, Prendergast and Belliveau (2013) propose that researchers should explain their interest in poetic inquiry and justify their decision to use it as a methodology in the context of their own research. I chose poetry to re/present Anna's and Michael's narratives as I felt this method would deepen my own and other people’s understanding of their experiences by privileging their voices and accentuating their emotions. Ultimately, my hopes were that Anna and Michael would feel listened to and heard within this research and that the poems would elicit an empathic response from those who choose to read this thesis.

Prendergast and Belliveau (2013) also state that researchers should be open and honest about their background and experience of employing poetry in their research, and I admit that this is my first experience of writing poetry for research purposes. Whilst Piirto (2002) asserts that researchers who write poetry should hold qualifications in the particular field of arts-based research they have chosen to employ, Byrne (2017) points out that such strict criteria closes down the possibility of exploring alternative forms of representation for those, such as myself, who sit outside the stipulated boundaries of experience. Lahman et al. (2011) seek to encourage the growth of poetic inquiry and argue for "*good enough research poetry*" (p. 894). In line with this position, it has not been my intention within this research to create great works of art or poetry of a literary standard; rather, my aim has been to provide an alternative method of re/presentation to continuous prose, in the hope this will offer a more accessible way for readers to engage with Anna's and Michael's narratives.

3.6.8.2 Affective and or imagistic elements present in the work

Prendergast and Belliveau (2013) observe the presence of metaphor, imagery and rhythm in poetry, noting their contribution to its aesthetic appeal and emotional impact on the reader. Byrne (2017) draws distinctions between the poetic process followed by poets and that of researchers who work within the constraints of their data, noting the potential for the "poet's tools of the trade" (p. 42) to be missing. As I chose not to deviate away from Anna's and Michael's words when constructing their poems, the poetic features available to me such as metaphors, repeated refrains and emotive language were reliant on the way in which they narrated their experiences. It could also be said that the use of such poetic features was dependent upon my ability as an interviewer to draw these out by creating space for them to share their narrative and my use of questioning. Repeatedly listening to the audio recordings and reviewing the interview transcripts supported my identification of such poetic features in their narratives.

3.6.8.3 Reflexivity and presence of researcher and/or participants

In relation to reflexivity, Prendergast and Belliveau (2013) emphasise the importance of a researcher's transparency and visibility in relation to their work and the need to consider how ethically the participants have been represented. In this research, I intended to honour Anna's and Michael's voices by preserving their words and speaking style in the re/presentation of their narratives. By immersing myself in the audio recordings and interview transcripts as well as analysing the narratives across multiple levels, including the use of Gee's approach and the process of constructing the poems, I hoped I would be able to re/present Anna's and Michael's experiences of the EHC process with compassion and empathy.

Whilst my intentions were for the construction of Anna's and Michael's poems and the analysis of their narrative to be a much more collaborative process, I hope they will recognise themselves in the poems I have created and feel that my interpretations of their narratives reflect their experiences.

Reflexivity will be addressed to a greater extent in the following section of this chapter.

3.6.8.4 Overall impact in aesthetic and disciplinary terms

Prendergast and Belliveau (2013) propose that two questions should be asked when assessing the quality of poetic inquiry research:

1. How well do the poetic elements work within the study as poetry?
2. How well does the study overall work as a scholarly contribution? (p. 203)

In the discussion section of this thesis, I will reflect on my perspective towards the effectiveness of the poems I have constructed and will discuss the potential significance of this research to the understanding of parents' or carers' experiences of the EHC process.

3.6.9 Reflexivity

3.6.9.1 Willig's (2008) approach

Willig (2008) emphasises the importance of reflexivity in acknowledging the researcher's contextual position. In this section, I reflect on how I, as a researcher, may have influenced the "construction of meanings" (Willig, 2008) and acknowledge my "intrinsic involvement in the research process" (Burr, 2015, p. 172). I engage in what Willig (2008) refers to as "personal reflexivity" (p. 10) in discussing how my own experiences, identity, values and beliefs shaped my interpretations of Anna's and Michael's narratives and the way in which I may have influenced what they chose to share in their interviews. I move on to consider "epistemological reflexivity" (Willig, 2008, p. 10) by reflecting on my methodological decisions and how these choices influenced my understanding of Anna's and Michael's experiences of the EHC process.

3.6.9.2 Personal reflexivity

Social constructionism proposes that our interpretations are partial and driven by a particular "vested interest" (Burr, 2015, p. 9). During periods of individual reflection and also through supervision, I have contemplated my own connection to this area of research in respect to being a mother of a child who has SEN and having personal experience of the EHC process. Like Anna and Michael, I have advocated for my own child when navigating the systems and processes around their SEN, and there are aspects of Anna's and Michael's narratives to which I feel strongly connected. I am aware that my "vested interest" in creating empathy and understanding for parents' and carers' experiences of the EHC process is, in part, driven by these personal experiences; however, it is also influenced by my experiences as a trainee educational psychologist and the emotive stories shared with me by the parents and carers with whom I have worked in this role.

Andrews (2008) proposes that a researcher’s interpretations of a narrative represent the “self” (p. 89) they hold at the time of the analysis. Andrews (2008) posits that interpretations of qualitative data are not constant and data that is revisited at a later point in time may be approached and viewed from a different perspective. During the writing of this thesis, I have experienced personal events and challenges that have sometimes impacted on my ability to engage with the research. At times, the connection I have felt to Anna's and Michael's stories has been overwhelming and, on these occasions, it was necessary for me to step away from the research to provide space for reflection. When I have questioned my ability to foreground Anna's and Michael's voices over my own, I have felt reassured by having chosen a form of poetic inquiry that relies on using only the words of my participants when constructing their poems.

3.6.9.3 Epistemological reflexivity

My methodological decisions were influenced by the literature I reviewed throughout the research. As previously stated, I had originally intended to adopt a mixed methods approach; however, in reflecting on my own values and motivations for carrying out this research, I realised that qualitative methodologies were most appropriate in supporting me to address my research questions. The decisions I made were also influenced by my experiences of training to be an educational psychologist at the University of Sheffield and the seminars I attended, particularly those that focused on arts-based approaches and narrative psychology.

I chose narrative interviewing with the hope this would provide Anna and Michael some autonomy over their storytelling; however, I recognise that narratives are influenced by the interactional context in which they are constructed. Clandinin (2016) describes narrative inquiry as a relational methodology, urging researchers to recognise that they are not objective in the research process but rather they influence the “storied landscapes” (p. 24) they study. During my analysis of the interview transcripts, I noted occasions where my direction of questioning potentially influenced Anna’s and Michael’s narratives. By way of an example, during Anna’s interview I questioned her on her use of the term *gaslighting*. At the time of the interview, I was aware of other parents and carers in the media and in research (Douglas et al., 2022) using this term to describe their experiences of advocating for their child within the SEND system. During Anna’s interview, I thought I had heard her use the term *gaslighting* to describe her own experiences and this prompted me to ask:

> “You used the word gaslighting there in terms of your experiences. Could you tell me a little more about what you mean by that?”

During the transcription of her interview, I realised that Anna had actually said, “I’m not saying it was gaslighting, but”, and yet my question prompted her to extend her narrative by explaining her conceptualisation of this term in the context of her experience. To me, this example highlights the co-construction of the narratives in this research.

3.7 Chapter summary

In this chapter, I have outlined my methodological choices in the design of this research, explaining my decisions to use qualitative methodologies to explore parents’ and carers’ experiences of the EHC process. I have situated my research within a social constructionist perspective, acknowledging the existence of multiple realities and recognising subjectivity in Anna’s and Michael’s experiences of the EHC process. Furthermore, I have justified the idiographic nature of this research, which is underpinned by my aims to capture the lived experiences of parents and carers to understand their individual sensemaking.

Narrative interviews were chosen as a method of allowing Anna and Michael space and autonomy over the direction of their narrative. Detailed transcription of my interviews with Anna and Michael was guided by Gee’s (1991; 2014) linguistic approach, separating the narrative into lines, stanzas, strophes and parts. Incorporating these poetic structures into the transcription led to more meaningful appreciation of the structure of their narratives and an enhanced understanding of their journeys through the EHC process. The structure of the transcripts influenced the way in which I organised the poems, using line breaks to highlight significant words or phrases, and stanzas to reflect changes in perspective across the narrative (Gee, 1991). In doing so, the intention was to encourage readers to “slow down” (Koelsch, 2015, p. 99) and engage more deeply with each line and stanza, offering space for them to emotionally connect with the narratives.

Whilst other parents and carers may recognise themselves in Anna’s and Michael’s narratives, the intentions of this research was not to achieve generalisability; rather, my aims were to foreground Anna’s and Michael’s voices and to invite others to empathise with their narratives by re/presenting them in poetic form. Poetic transcription (Glesne, 1997) was used as a method of constructing the poems, which were then subjected to further analysis. Whilst the poems reflect my interpretations of the narratives, they are “*Vox Participare*” (Prendergast, 2009, p. 543), meaning I have stayed loyal to the words used by Anna and Michael to describe their experiences. In doing so, my intentions were to provide a more authentic re/presentation of their voice.

In this chapter, I have explained how my analysis of psychological subject (Gee, 1991) allowed me to create identity poems for both Anna and Michael, capturing their presentations of self within their narratives and highlighting the multiplicity of roles they felt compelled to adopt during their journeys through the EHC process. I have discussed the criteria I use within my discussion section to assess the quality of my research, adopting Riessman's (1993) criteria for narrative analysis and Prendergast and Belliveau's (2012) proposals of qualitative touchstones for poetic-based research.

In the following chapter, I present the poems I constructed from Anna's and Michael's narratives, along with my analysis of their experiences of the EHC process.

CHAPTER 4: Analysis of Anna's and Michael's narratives

4.1 Introduction

In this chapter, I offer my analysis of Anna's and Michael's narratives. Following the process outlined in my methodology chapter, I have re/presented their narratives through a selection of mini-narrative poems.

To introduce Anna and Michael to the reader, I briefly summarise their journeys through the EHC process with their child. I then share the poems I constructed from Michael's narrative, accompanying each one with an analysis of what I understand to be his experience of the EHC process.

Following this, I present my interpretations of what I felt were key shifts in psychological subject based on my interpretation of Gee's (1991) linguistic approach to narrative analysis as introduced in Chapter 3. From my reading of Gee's work, I interpret the psychological subject to be the grammatical subject of a main clause within the narrative. Gee suggests that interpretations can be made about point of view when considering the psychological subject.

Finally, I will synthesise my analysis, summarising my interpretations of what I consider to be Michael's experience of the EHC process as conveyed across his narrative as a whole. This analytical process is then repeated for Anna's narrative.

4.1.1 Introducing Michael

Michael and his wife first applied for an EHC needs assessment after their son, Thomas, received a diagnosis of autism and learning disability. In an effort to ensure adequate support would be in place once Thomas transitioned from nursery to school, Michael and his wife submitted a request to their LA for an EHC needs assessment. When their request was not agreed, they appealed the LA's decision, attending mediation with the support of SENDIASS and a representative from

Thomas' nursery. Michael describes the mediation session to have been a "horrendous" experience which almost resulted in them pursuing a formal complaint against the LA.

In the hope of demonstrating Thomas' eligibility for an EHC plan, Michael and his wife gathered further evidence towards their second application for an EHC needs assessment. The process of obtaining reports was complicated by the fact that Thomas' nursery was located in a different LA to that in which he lived, which Michael implies led to an abdication of responsibility by LA practitioners. As a result of what Michael identifies as "boundary politics", he describes being forced to adopt the role of driver in coordinating meetings and gathering evidence and assessments from services including speech and language therapy, occupational therapy and educational psychology. Following their second request, the LA agreed to carry out an EHC needs assessment for Thomas. The final EHC plan was issued shortly after Thomas started school.

4.1.2 Introducing Anna

Anna's narrative focuses on her experiences of navigating the EHC process for her daughter, Kaylee, who started to experience anxiety attacks when she was in Year Four. Anna identifies the trigger for Kaylee's anxiety to have been a practice SATs paper she was given to complete. Perceiving Kaylee as a "high flyer", Anna and her husband struggled to explain the cause of her anxieties at that time, which appeared to have developed "overnight". They became increasingly concerned about the compulsive behaviours that began to have a significant impact on her wellbeing, social life and attendance in school. In search of an explanation, Anna and her husband paid for a private assessment of autism, following which Kaylee received a diagnosis of pathological demand avoidance.

Anna describes Kaylee's transition to Year Five as being positive, and states that she was observed to be more settled in school with the help of an "amazing" teacher; however, as Kaylee joined the Year Six class, her anxieties once again increased and her attendance fell significantly. As Kaylee's school did not feel an EHC plan was necessary at the time, Anna submitted her own request for an EHC needs assessment. Although the LA had initially decided not to carry out an assessment, Anna appealed and the decision was subsequently overturned at mediation. At the end of the assessment period, however, the LA decided not to issue Kaylee with an EHC plan.

By this time, Kaylee had transitioned to Year Seven and was continuing to experience emotional barriers to her attendance. Anna describes the battle she faced in Kaylee's non-attendance being recognised as authorised by her secondary school, coordinating meetings with practitioners and advocating for her daughter to receive additional support. She attended training courses with her husband to develop their knowledge and understanding of how to best support Kaylee, sharing her learning with teachers in school. Anna empowered herself to advocate for her daughter, researching the law and accessing advice and information from various support groups and advisory services. It was only when a new SENCo joined Kaylee's secondary school that she felt school staff were working with her to put support in place for Kaylee.

Once again, Anna decided to make a parental request for an EHC needs assessment, enlisting the support of an organisation which could guide her through the application process. On this occasion, Anna was successful in obtaining the EHC needs assessment and, subsequently, Kaylee was issued with an EHC plan. The COVID-19 pandemic had positive consequences for Kaylee in that the pressure to attend school was removed, but then she did not feel able to return once her school re-opened. Anna describes the hope and possibilities the EHC plan brought to her family, including the option for Kaylee to attend a specialist educational setting. Although the process of securing a suitable placement for Kaylee was arduous, Anna reflects on the fact that she has been able to grow and develop in her new setting.

4.2 Poetic re/presentation of Michael's narrative

In this section of my analysis, I will present the ten mini-narrative poems I constructed from Michael's overall narrative poem (Appendix I). Following each poem, I will provide my analysis and interpretations of his experiences of the EHC process.

4.2.1 Poem 1. Continuous learning journey

So…
…researched EHCP
what it meant
not much more,
fairly blind
at that point in time.

Understood more about
graduated response
and evidence base,
learning on our feet
and finding out as we go,
the hard way I would say!

Heard
about SENDIASS
and…
What does that word Local Offer mean?
You're talking gibberish,

right?
I just want support for my child.

So the journey,
end to end:
A – journey,
B – learning,
continuous learning.

Many hours reading stuff

it's complex
really hard –
really hard to navigate,
right?

You get used to the hurdles
know how to deal with them,
better equipped
got the experience.
They become less traumatic,
shall we say.

Local Offer –
nobody understands that at the beginning,
I don't want a Local Offer
I just want support,
you know?

For me, this poem captures the continuous learning journey Michael and his wife embarked upon whilst navigating the EHC process for Thomas. Speaking retrospectively about the beginning of their journey, Michael reflects on their lack of understanding about EHCPs and the SEND system; yet as the poem progresses, Michael is presented as being better informed and "equipped" (line 32), which appears to have made it easier to manage the challenges he faced. I feel Michael's position as being more knowledgeable is exemplified by his own use of technical terminology and acronyms specific to the SEND system.

Still, Michael speaks about his learning as being continuous, which suggests to me that he perceives this to be a lifelong and enduring need. His language here indicates that the learning process was difficult for him and his wife, giving little time for planning ahead and presenting them with many "hurdles" (line 30), the plural form of this noun reinforcing their multiplicity. I sense Michael's frustration in the sixth stanza (lines 26-29) as he questions the complexity of obtaining support for Thomas, the phrase "really hard" (lines 27-28) being repeated to emphasise the challenges they faced.

Michael is critical of the internal language used by practitioners working within the SEND system, and I sense that his lack of familiarity with such jargon positioned him as an outsider in the EHC process. Michael asks, “What does that word Local Offer mean?/ You’re talking gibberish,/ right?” (lines 16-18). His use of the word “gibberish” (line 17) suggests to me that such technical terminology continued to be confusing and meaningless despite the many hours he spent carrying out his own research and upskilling himself to operate within the system. His use of rhetorical questions in this poem indicates that he was seeking confirmation that I shared his perspective, and I wonder if this was influenced by his awareness of my position as a trainee educational psychologist and my role in contributing psychological advice towards EHC needs assessments.

The phrase “I just want support for my child” (line 19) serves as a repeated refrain in this poem and to me emphasises Michael’s desperation and frustration. His use of a rhetorical question in the final line of this poem (“you know?” [line 40]) implores me to empathise with his position and to understand the physical and emotional exhaustion he experienced.

4.2.2 Poem 2. Silence.

Over to them.
Heard nothing
until they sat down.
And you don’t really know when
is the whole thing,
right?
Left to your own devices.

Somebody rang
says,
“Oh! It’s been approved
an assessment!”
Then,
passed from person to person
immediately.
Least through the portal
you could track movements,
see tasks and names,
a coordinator I could call upon.
Extremely difficult to get hold of,
did not contact us,
we had to engage with them
which was poor.

Everything in,
but no updates.
Randomly a phone call –

they agree
for an EHCP,
but again
very little contact.

“What’s going on?”
A sea of silence.

Can’t remember how many emails I sent
for an update,
not getting anything back
like a wall of silence.

The first line of this poem (“over to them” [line 1]) implies to me that Michael experienced a sense of powerlessness as a parent navigating the EHC process. I feel this poem presents him as having little influence or ownership over decision making processes, and I infer there was a lack of communication and transparency around decisions made by practitioners within the LA. This is also highlighted in the fourth stanza where Michael uses the metaphor “sea of silence” (line 31) to describe the lack of information he and his wife received during the EHC process. To me, his reference to the sea implies that he felt the silence was vast, expansive and endless. My perception is that, as a parent, Michael felt alienated and insignificant.

Similarly, in stanza five (lines 32-35) the metaphorical “wall of silence” (line 35) captures the paucity of updates they received from the LA and suggests to me that Michael perceived there to have been an intentional withholding of information. Michael references the absence of partnership with practitioners from the LA, further reinforcing my interpretation that Michael felt the process was neither collaborative nor supportive for him as a parent.

Michael states that, following the positive news of Thomas’ EHC needs assessment being agreed, he and his wife were “**p**assed from **p**erson to **p**erson” (line 13), and I sense that disorganisation within the EHC system created a stop-start momentum in the process. The plosive alliteration created by the repetition of the “p” sound in this line conveys an abruptness that I feel reflects the anger and frustration Michael experienced. The notion of the process being stop-start is once again conveyed in the third stanza (“Everything in,/ but no updates” [lines 23-24]) as Michael describes yet another period of silence with regards to communication from practitioners in the LA.

The LA’s online portal appears to have offered Michael some transparency within the process; however, it seems that communication with practitioners continued to be one-sided, with the onus being on Michael to initiate contact.

4.2.3 Poem 3. Stuck!

Local boundary issues,
who was responsible –
really frustrating!
"**I** can’t go and see him!"
Seriously?
You, you have a duty!
Boundary politics come into play,
completely unnecessary,
caught in the middle there.

Stuck in the middle,
a bit of a triangle
between
the different authorities,
the nursery
and us.

New documentation,
different forms,
this local authority want this
and that local authority want that.
“Look!
Do we not just have a national way
for God’s sake?”
Frustrating
and eye-opening.

Getting evidence
was extremely difficult.
People citing processes and GDPR,
it’s nonsense!
“We don’t write reports,
only if the local authority asks.”
“Well nobody else is going to provide it!”

Exacerbated with cross boundaries,
an additional complexity
that caused frustration.

This poem describes the difficulties Michael and his wife encountered as a result of his family living in a different LA to where Thomas attended nursery. Michael refers to these issues as “Boundary politics” (line 7) which I believe reflects an abdication of responsibility by the two LAs in their refusal to carry out an EHC needs assessment for Thomas. I feel Michael’s frustration and disappointment in not being able to easily obtain the necessary assessments is emphasised by his use of the rhetorical question “Seriously?” (line 5) in addition to his hesitation on the phrase “You, you have a duty!” (line 6). His powerlessness as a parent to overcome such boundary politics is emphasised when he describes feeling “caught in the middle” (line 9).

Michael and his wife’s application for an EHCP appears to have been further complicated by the lack of consistency in the documentation required between the two LAs. Michael questions why there is no “national way” (line 21) of providing evidence towards an EHC needs assessment application and, through his use of another rhetorical question, he conveys his disbelief and dissatisfaction towards the current system. Michael speaks about the difficulties he experienced in obtaining reports from various services, which once again slowed any progress in the process. Despite taking an active role in requesting such reports, any attempt to take power and control himself appears to have been stripped away by practitioners advising Michael that it was not within his duty to do so. I sense that Michael felt undermined and undervalued as a result, yet from the line “Well nobody else is going to provide it!” (line 31) it is evident to me that Michael felt he had no choice but to take a proactive role himself. Furthermore, I consider this to reflect his distrust in practitioners and doubt in their ability to fulfil their professional duties.

4.2.4 Poem 4. Taking control

Call upon my professional experience
to drive something,
push meetings
and bring everybody together
during my working day
(lucky my employer was so sympathetic).
Having to drive
a monthly meeting –
I was having to drive that,
right?
Nobody
one person
one entity
was willing to take control.

So, we
pushed ahead,

got updated SALT,
again we had to push
had to push.

And OT,
trying to push,
flailing –
second stage
and into the mist.

Got our evidence together,
I catalogued everything.

Then with the nurse,
nothing.
Took it upon myself
and she updated it
straight away.
If I had not,
what?
No input?

What stands out to me from this poem is the fact that, once again, Michael felt it was essential for him to take action in order for Thomas' EHC needs assessment to maintain forward momentum. In particular, I feel this is exemplified by his use of a rhetorical question which asks, "If I had not/ what?/ No input?" (lines 32-34). Again, Michael speaks about going beyond his role as a parent to organise and coordinate meetings, and I feel he voices the absurdity of this through emphasis on the first-person pronoun "I" in the following line: "**I** was having to drive that/ right?" (lines 9-10). His use of a driving metaphor here conveys a sense of movement towards the end destination of obtaining an EHCP for Thomas. In the first stanza (lines 1-14), I sense Michael's gratitude to his employer for allowing him the flexibility to manage the competing demands of work and the EHC process, something he seems to identify as being a privilege not all parents and carers are afforded.

The word "push" serves as a repeated refrain in this poem which to me highlights the persistence and forcefulness required to allow Michael to obtain the necessary reports for Thomas' EHC needs assessment. The use of the word "flailing" (line 22) and the phrase "into the mist" (line 24) in stanza four (lines 21-24) implies that assessments were sometimes started but not necessarily finished, indicating there was a lack of continuity in the process.

4.2.5 Poem 5. You versus the state

Asking them to assess his needs
turned down straight away,

decided to appeal
and
went through the legal hoops.

Mediation
exploded!
I had to step in and
take control –
disappointing,

you know?

Decided not to go back,
gonna be
put through the wringer again,
not a significant bank of evidence
to change the state of play,
an' didn't wanna play ball
anymore –
that relationship was broken.

Went wholesale approach
to bring evidence
for an assessment,
put together a bank of evidence
so compelling…

"If you don't accept us
we'll see you at tribunal!
Body of evidence is overwhelming –
don't try to play games
we're playing hard ball!"

"I'm gonna ring this person up,
we're not playing games!"

Set expectations,
this is not gonna be a rollover
you need to work with us.

Many hours reading stuff,
talking to people
trying to get perspectives and understandings of the law
to challenge them back.
Quoted legislation
(a very good trick),

but it's like
seriously,
you have to become your own lawyer,
right?
Become solicitor-like,

my own lawyer –
really shocking!
It's you versus the state.

The title of this poem echoes its final line ("It's you versus the state" [line 48]) and I chose it to reflect the battle I feel Michael and his wife faced in trying to convince the LA of Thomas' eligibility for an EHCP. Having appealed against the LA's decision not to carry out an EHC needs assessment for Thomas, I sense that the mediation process was fraught with intense emotions and that the experience of being questioned and interrogated felt like torture. Once again, Michael was forced to transcend his role as a parent in taking control of the mediation session and, as a result, he appears to have lost trust and faith in practitioners from the LA. To me, this poem captures Michael's frustration and disgust towards the legal processes he faced, and he conveys a sense of powerlessness to influence decision making processes: "not a significant bank of evidence/ to change the state of play" (lines 15-16).

I feel this poem presents Michael as being willing to do anything necessary to obtain an EHCP for Thomas. I sense his confidence in the sixth and seventh stanza (lines 25-32) as he describes how he asserted his expectations of the process to the LA. Here, he makes reference to practitioners playing games and, to me, this suggests that at times he perceived their actions to be manipulative. He appears to regain a sense of power through his refusal to be rejected or dismissed any longer by practitioners: "don't try to play games this time/ we're playing hard ball!" (lines 28-29).

From this poem, it seems to me that Michael felt compelled to assume the role of a solicitor when advocating for Thomas, and he was forced to upskill himself so that he was able to challenge the LA's decision making: "Many hours reading stuff" (line 35). Despite his efforts to be an equal adversary, the final line of this poem suggests that Michael felt outnumbered and alone in his battle against the "state" (line 48).

4.2.6 Poem 6. Different ball game

Thinking,
he's been diagnosed,
right?
Surely they will do an assessment,
right?
Simple as that!

Turned down straight away,
"But he, he, he's got additional needs,
right?
You've already diagnosed the child,
right?"

Local authority batting us back.
SENDIASS
and Parent and Carers Forum
said,
"Not surprised.
Default behaviour!"

Ah, right, okay,
so this is going to be a different ball game!

Obstacle after obstacle

horrendous,
absolutely horrendous!
Minefield,
absolute minefield!

It’s complex
multi-agency
really hard –
really hard to navigate,
right?

In the first and second stanza of this poem (lines 1-11), Michael reflects on his misperception that Thomas would automatically be issued with an EHCP on the basis that he had already received a diagnosis of autism and learning disability. Here, Michael refers to Thomas as “the child” (line 10) and I wonder if this connects to an emotional detachment on his part, or whether it represents the lack of compassion Michael felt he experienced from practitioners during the EHC process.

Michael appears to identify himself as being naive in the early stages of the EHC process, initially believing that it would be simple and straightforward to obtain the EHCP. His rhetorical questions in the first and second stanzas (lines 1-11) of this poem suggest to me that he was appalled by the process being much more complex than he had expected. He describes the SEND system as being an “absolute minefield” (line 24), reinforcing how overwhelming and challenging it was for him to navigate. From his rhetorical question in the final line of this poem (“really hard to navigate,/ right?” [lines 28-29]), I infer that Michael was seeking confirmation that I shared his viewpoint.

The phrase “Default behaviour!” (line 17) in the third stanza (lines 12-19) suggests to me that SENDIASS and the local parent carer forum perceived it to be common practice for the LA to turn down EHC needs assessment requests, and it is at this point that I feel Michael realised that the process was going to be more complicated than he had initially anticipated.

4.2.7 Poem 7. No partner in this relationship

Local authority batting us back.

Legal arguments
borderline illegal
and twistin’ the rules,

a policy of:
see how they survive
we'll intervene if necessary.
"You want them to drown and then learn to swim!"
Adamant –
we're not buying that!

Never take on face value
anything the local authority tell you –
do your homework.
A sad state of affairs,
right?

The state wasn't there
when you needed it.

There every step of the way
to trip you up
or close the door
or put barriers so high it's unachievable!

Need
a chaperone
end to end,
guide you on that journey,
be neutral
with no unconscious bias,
'cause the feedback
from the local authority
is conscious bias.

Do your homework
do not take it at face value,
there is no partner for you in this relationship.

I feel this poem portrays the LA as being obstructive and captures Michael's perceptions of the organisation to be working against him and his wife rather than in partnership: "There every step of the way/ to trip you up/ or close the door" (lines 18-20). Michael expresses his vehement opposition to what he perceives is the LA's policy of waiting for children to struggle and fail before providing them with support: "You want them to drown and then learn to swim!" (line 8). He rejects their attempts to validate their arguments as being "legal" (line 2), instead proposing they were illegitimate and unjust: "borderline illegal/ and twistin' the rules!" (lines 3-4). To me, this poem presents Michael as having lost faith in the SEND system which he perceived would be there to support him, and he voices his lack of trust in practitioners' ability to provide impartial advice to him as a parent: "'cause the feedback/ from the local authority/ is conscious bias" (line 28-30).

Michael uses the metaphor “journey” (line 25) in this poem and on various other occasions in his narrative, and I feel this relates to the obstacles, challenges and uncertainty he encountered as he progressed through the EHC process. Michael calls for parents and carers to have access to unbiased advice and guidance from a “chaperone” (line 23) and implies they need protection from possible manipulation by LAs.

4.2.8 Poem 8. It’s not humanistic!

Parental evidence discarded
completely.
Discriminatory!
Practically
discarded,
they basically disregard anything parents say –
hurtful,
it’s not helping.

No compassion.
It’s like,
we’re talking about people,
not some taxation event,
right?

So cold –
where, as a parent,
the polar opposite.

Children dropping through
not getting support,

this is not a dispute over land or tax –
it’s about a child’s health and education
for God’s sake!
Let’s get some perspective,
right?

“Let’s focus for a minute,
who is this about?”
Play the guilt trip –
it’s about a child,
you know?
Emotional blackmail
to bring back humanity.
‘Cause I understand process,
but you can have process
and execute it,
process it
in a humane way,

right?

It’s not humanistic!

For me, this poem conveys Michael’s anger and frustration towards the lack of compassion he believes he received from practitioners during the EHC process. Michael expected Thomas to be placed at the heart of decision making, yet what he experienced was the opposite of child-centred. Echoing his feelings in *No partner in this relationship*, Michael alludes to a fragmented system in which relationships are fractured and humanity is compromised by processes that fail to consider the individual child and their families.

In the first stanza, Michael describes feeling “discarded” (line 1) and “disregarded” (line 6) by practitioners who he feels discriminated against him as a parent, perhaps assuming that he lacked the necessary expertise or knowledge to make significant or worthy contributions to the process. My perception is that Michael felt disempowered by the system and marginalised by practitioners who not only dismissed his views but also failed to recognise and empathise with his emotional experience as a parent. I feel this poem draws parallels with the emotions I identified in *Stuck!*, as Michael once again describes being positioned as inferior to practitioners, thus alienating him as a parent.

Michael asks several rhetorical questions in this poem which I feel reflect an escalation of his frustrations and contempt towards an EHC system he portrays as being broken and inhumane.

4.2.9 Poem 9. Pretty meek, pretty lame

Little work on the plan.
Ed psych’s report
copied in,
copying and pasting
no trying to summarise
or put things in a clearer form,
a more actionable sense.
At this point completely exhausted
– physically and emotionally –
just relieved he’d got a plan.

Asked to review the plan
collaboratively through the portal,
really good,
however,
my comments
just added in
hadn’t actioned it at all,

thinking,
“Does anybody actually read these plans
before they approve them?”

So,
having an EHCP is great,
but the plan was
pretty meek
pretty lame,
not to the standard I would be proud of
if it was me –
damn lazy
to be honest with you!

Despite Michael’s apparent disappointment and dissatisfaction with the quality of the EHCP Thomas received, I sense that by this point in the process he had no energy to contest or challenge its contents. I feel that Michael’s relief as expressed in line 10 reflects how arduous the process was and captures the importance he and his wife placed on having an EHCP for Thomas.

In lines 11 to 13, Michael speaks positively about the potential for the EHC online portal to support collaboration between parents and practitioners; however, he expresses frustration and disappointment with the fact that the comments he provided on the draft plan were not used in a constructive or meaningful way, suggesting there was a lack of attention to detail and thoughtfulness in how the plan was written.

4.2.10 Poem 10. Not the golden ticket, but a comfort

EHCP –
the ticket
to support.
We got the ticket
but disappointed
because
then the next hurdle
an’ the next hurdle
an’ the next hurdle –
the hurdles will never go away.
A significant hurdle.

But in the beginning
thinking
it goes back to a steady state of living,
reality is no –
that journey will continue
forever more.

Golden ticket
turned out not to be.

What does it mean now to have the EHCP?

We feel more secure,
there’s recognition he needs additional support
and we have a vehicle to get that:
the EHCP.
Not in freefall
as before –
a comfort.

Michael’s use of the phrase “the ticket/ to support” (lines 2-3) suggests to me that he had initially considered the EHCP to be a necessary means of obtaining educational support for Thomas. Similarly, the phrase “Golden ticket” (line 18) implies that Michael viewed the plan as a valuable asset that would place him and his wife in the privileged position of being able to obtain such support by evidencing Thomas’ eligibility. I sense a realisation from Michael that perhaps he was initially naive in thinking that their journey would become easier once they obtained the EHCP, and he now reflects on the fact that the hurdles will continue as he advocates for his son throughout his life (“that journey will continue/ forever more” [lines 16-17]),

4.3 Analysis of the psychological subject in Michael’s narrative

4.3.1 Reflecting on psychological subject in Michael’s narrative

A detailed overview of the patterning of main psychological subjects across Michael’s narrative is provided in Appendix K. In this section, I will consider the key shifts in psychological subject I feel were most significant to his narrative.

At the beginning of his interview, Michael presented me with a photograph of Thomas. He later explained that he sometimes shared Thomas’ photograph with practitioners during the EHC process in order to “bring [them] back to some humanity” and encourage them to focus on the fact that the process was “about a child”. As Michael spoke, I reflected on the fact that in my role as a trainee educational psychologist I had sometimes written reports about children and young people I had not met in person. This had especially been the case during the COVID-19 pandemic where opportunities to work directly with individual children and young people had significantly reduced and my reports had relied on information shared by family members or those working with the young person. I contemplated how useful I had found it to, at the very least, put a face to the name and the humanity it brought back to my own work.

Even though my broad opening question asked Michael to “tell me about [his] experiences of the EHC needs assessment and planning process”, he began his narrative with the introductory line: “so this is a story about [Thomas]”. Although I had expected Thomas to be a central character in Michael’s story, I wondered if their experiences were so inextricably connected that he found it difficult to separate his own story from Thomas’.

Despite Michael’s introduction to his story focusing on Thomas, across the majority of his narrative he tended to use the pronouns “we” and “us”, positioning he and his wife as the main psychological subjects. In doing so, I feel Michael presented his experiences of the EHC process as being shared with his wife. Interestingly, in stanza 27 of his narrative, he alternated between using the first-person pronoun “I”, where he described his own actions during the EHC process, and the first-person plural pronoun “we”, where he spoke on behalf of him and his wife. In particular, a false start in his speech and a shift in his use of pronoun in of the transcript (“I also pre’/ we prepared”) suggests to me that Michael’s experiences of the EHC process were so intertwined with his wife’s that he found it difficult at times to separate them.

In stanza 54 of the interview transcript, I questioned Michael on the reality of Thomas having an EHCP and how this compared to his initial hopes for the EHC process. Analysing Michael’s response, there is an interesting shift in his use of pronouns. Towards the end of the stanza, Michael used the third-person pronoun “he” to refer to Thomas having ownership of his EHCP (“he has one now”); however, he then switched to using the first-person pronoun “me”, asserting in that the EHCP could not be taken away from him (“nobody can take that away from me”). Here, I wonder whether the use of a first-person pronoun reflects the effort Michael invested in obtaining the EHCP for Thomas. I am also curious as to whether Michael’s perception of ownership over the EHCP gave him a sense of confidence and power to advocate for Thomas.

During my analysis of the interview transcript, I noted that when Michael used a first-person pronoun he was often describing his own role in the EHC process. In doing so, I felt he was presenting aspects of his identity. Analysing the interview transcript more thoroughly, I extracted lines that appeared to relate to aspects of his identity and grouped them together where I felt they appeared to share a common theme, naming each one according to Michael’s use of language (Appendix L). Following this, I highlighted the key words and phrases I felt were most significant to each line, arranging them in order to construct an identity poem for Michael.

When constructing Michael’s identity poem, I chose to take licence with his words, at times emphasising the first-person narrative by converting highlighted phrases into “I” statements. On occasion, I also changed the verb ending of words so that the poem reflected the tense in which Michael spoke when narrating his story. My intention here was to differentiate between the identities he described in the past tense which were associated with his experiences of the EHC process, and those he described in present tense which appeared to represent a continuing sense of self. Michael’s identity poem is presented below.

4.3.2 Michael’s identity poem

I’m extremely calm in a crisis.
I box my emotions
store it away.

Called upon my professional experience
to drive
and push meetings.
I do negotiation,
had to step in
take control.

I read
I prepared
I provided
evidence,
quoted legislation
to become lawyer -
solicitor like.

I set expectations,
I complained
I challenged
and played the guilt trip.

I give advice
I reply -
“Sorry,
that’s wrong!
Do your own homework.”

I just
want
support

for my child.

What strikes me about this poem is the sense of energy I feel is captured by Michael’s proactive approach to fighting for support for Thomas. Although Michael expressed how exhausting the process was for him, I sense there was no time for weakness.

In his wider narrative, Michael describes feeling disempowered, but I feel this poem captures his determination, persistence and resolve to obtain support for Thomas.

4.4 My summary of Michael's narrative

For Michael, his journey to obtaining an EHCP for his son, Thomas, started after he had received his diagnosis of autism and learning disability. Considering Thomas' future transition to school and anticipating that he would require additional educational support, Michael and his wife entered into the EHC process. Initially believing it would be simple to navigate, I sense that in reality it was a battle filled with frustration and disappointment that was both mentally and physically exhausting for them as parents.

In the pursuit of securing support for his son, Michael's narrative illustrates how he faced a complex system that lacked transparency and communication and appears to have left him feeling disempowered and alienated. He describes a process that lacked humanity and compassion and did not achieve its ambitions of being child-centred.

Michael and his wife faced barriers to acquiring the necessary assessments and reports from practitioners to evidence their son's eligibility for an EHCP, and this was further complicated by the "boundary politics" they faced. Frustrated by lack of accountability, organisation and consistency within the EHC process, Michael appears to have felt he had no choice but to adopt a driving role in proactively collating evidence and coordinating meetings between practitioners.

I sense that Michael experienced powerlessness to influence decision making and felt that his voice was neither valued nor heard. That said, he seems to have confronted such marginalisation with resistance and action, regaining power and confidence by refusing to blindly accept what he was told by practitioners and challenging a system which he experienced as discriminatory towards parents. I feel that he was forced to embark on a journey of self-empowerment, learning how to best advocate for his son through extensive reading and research. In doing so, he transcended his role as Thomas' father to become his own lawyer.

Michael identifies positives with the EHC online portal and its potential to support greater transparency for parents, and he describes the electronic submission of the EHC needs assessment request to be a "godsend"; however, it does not appear to have delivered the collaboration he had hoped for and, once again, he was left feeling disappointed.

Despite any comfort or security the EHCP brought to Michael, he questions the quality and value of the document. Michael asserts that the EHCP has not brought an end to his family's journey; rather, he anticipates that they will continue to face lifelong obstacles and challenges in their fight for support for Thomas.

Michael spoke of fractured relationships and a loss of trust and faith in practitioners due to the absence of impartial advice and guidance. Frustrated and disappointed by the lack of collaboration and partnership during the EHC process, I sense that Michael experienced loneliness and isolation, and he calls for greater support and guidance for parents when navigating the SEND system.

Despite these difficult experiences, Michael expressed gratitude towards some practitioners for their professional approach and support, including members of staff at Thomas' school, the educational psychologist who contributed towards Thomas' EHC needs assessment and a specialist teacher who visited Thomas in school. Michael shared that such positive experiences helped to restore some of his faith and confidence in the SEND system. He also expressed appreciation towards the valuable charities and advocacy services that provided him with advice.

4.5 Poetic re/presentation of Anna's narrative

From Anna's overall narrative poem (Appendix M), I have constructed eleven mini-narrative poems which I will now present. Following each poem, I will provide my analysis and interpretations of Anna's experiences of the EHC process as captured in her narrative.

4.5.1 Poem 11. Panic attack mode

Year Four,
given a SATs paper
and suffered an anxiety attack,
just froze –
so surprising.

Not able to go to school.

Invited to parties,
she couldn't get out of the house.
Really wanted to
really upset
crying,
"I just can't!"

Wanted to but couldn't,
her brain would split in two.

In panic attack mode
not able to speak,
just froze.

Really low
definitely depressed.

Not going out with friends –
burnt out.
In foetal position,
hair up and down
forty times,
on an’ off
on an’ off
on an’ off,
then foetal position
in panic attack mode,
constant.

“You don’t have to do your SATs.”
“I don’t want to stand out.”
A high flyer,
bright
competitive
and determined,
“I want to do it!”
But then
major meltdowns,
panic attacks.

“Don’t want anybody knowing
I’m struggling.”

Detentions for homework
because when home
she’d be in a trance
trying to process that day.
It’s secondary school,
she was struggling,
never gonna be positive.

Used to
bolt,
freeze
flight or fight
attack
mode,
just run!
Didn’t want to see anybody.
Hiding under tables
hood over her face,
coat over her head
like Harry Potter –
just run!

Get told off that as well.

In this poem, I hoped to capture Anna’s descriptions of Kaylee’s overwhelming feelings of anxiety. I feel Anna’s use of emotive language emphasises the pain and suffering Kaylee experienced and, from the phrase “so surprising” (line 5), I sense that Anna was shocked and bewildered by the unexpected change in her daughter’s presentation. For me, this poem sets the context for Anna’s application for an EHC needs assessment for Kaylee.

From Anna’s descriptions of Kaylee being in “panic attack mode” (line 15), I wonder if she felt her daughter’s emotional responses served a particular function for her at that point, perhaps as a means of protection from the difficult experiences she faced. Anna’s description of Kaylee being in the “foetal position” (line 22) suggests to me that she was attempting to manage intense emotions, and I wonder if Kaylee was seeking to escape or hide away from the world around her.

I sense that Kaylee feared other people knowing she was struggling, and she appears to have been determined not to be seen as different to her peers. To me, this suggests that it was important to Kaylee that her identity was preserved and that she retained her sense of self. I feel the phrase “her brain would split in two” (line 14) conveys the conflict Kaylee experienced between her desire to access social and educational opportunities and her need to escape the anxiety that such experiences would evoke. I imagine that Kaylee was exhausted by the obsessive compulsive disorder (OCD) rituals of which Anna speaks, and I feel their debilitating effects are emphasised in Anna’s repetition of the phrase “on an’ off” (lines 25-27) and her use of hyperbole in the line “hair up and down/ forty times” (line 23-24).

4.5.2 Poem 12. What is this?

Didn’t know what the problem was.

Sometimes a bit spirited
over excited
really loud,
thought that was normal,
didn’t think.

Well,
possibly dyslexia?
Had her assessed,
not dyslexia
something with her processing.

Meltdowns
panic attacks,
overnight

so extreme
so regular and common.
From high flyer
to this overnight –
wow!
What is this?
Extreme behaviour!

Worried.
Going to the GP
saying,
“It’s mental health,
can you help us?”

To CAMHS,
I said,
“Could it be ADHD?”
“Definitely not,
she wouldn’t sit
and have a conversation.”
Questioned that
and thought,
girls mask,
could you mask ADHD?

Put ‘er on the ASD pathway
said, “It’s gonna take a year.”
“I can’t wait a year!”

Diagnosis privately
I think it’s PDA,
wanted a specialist.

Amazing!

Got the diagnosis,
she’s clearly
autistic,
came out relieved.
I’m not making it up
one of those mums
really sensitive –
there is some truth.
Validation for me,
validation for Kaylee,
validation for ‘er big sister,
validation for mi husband.

To me, Anna’s repetition of the word “overnight” (line 14) in this poem emphasises the sudden onset of Kaylee’s anxiety, and I feel her use of the phrase “wow” in line 19 captures her, and her husband’s, surprise to what appears to have been a complete change in her daughter’s emotional wellbeing. The fact that the anxiety attacks were happening “so regular and common” (line 16) suggests to me that they were consuming their lives and there was no opportunity for respite or relief from their effects.

I consider Anna’s use of questions in this poem to reflect the couple’s determination to make sense of Kaylee’s panic attacks which she describes as being “so extreme” (line 15). Anna’s urgency to understand the cause of Kaylee’s anxiety is emphasised when, in response to being told the waiting time for an autism assessment, Anna exclaims, “I can’t wait a year!” (line 39). Here, I feel Anna’s desperation to take away Kaylee’s suffering and I sense that, as her mother, she was also in great pain.

Kaylee’s diagnosis of pathological demand avoidance (PDA) appears to have provided Anna with confirmation that she was not exaggerating or overreacting in her concerns about her daughter’s increasing anxiety, and I feel the importance of this is emphasised in her repetition of the word “validation” (lines 52-55). From her use of the phrase “one of those mums/ really sensitive” (line 49-50), I sense that Anna perceives society to be dismissive of mothers who voice their concerns when advocating for their child.

4.5.3 Poem 13. I want her in school!

Meltdowns,
couldn’t get into school,
the cycle…
late
then stared at,
it perpetuated itself
this lateness.
And the anxiety would give her more anxiety.
Late
and didn’t understand the work,
knock-on effect
a downward spiral.

More and more
panic attacks
more severe.
Attendance started droppin’,
issuing me a letter saying
attendance ‘as fallen.
I don’t need reminding
I’m living it,

an I want her in school!

Down to
eighty percent attendance –
measures could have been in place.

She couldn’t get into school,
embarrassed and distraught.

Late –
she was punished.
Told ‘em,
she’s obviously struggling with anxiety
it’s in your plan.

And messages…
she’s unauthorised attendance,
another reminder –
I know she is!
Constant battling,
it should be authorised
it’s mental health.

In this poem, Anna describes Kaylee’s lateness to school as a perpetuating “cycle” (line 3) which was not only driven by her anxieties but also exacerbated them. To me, the term “cycle” refers to the recurring and enduring effects of the lateness, which resulted in an escalation of Kaylee’s anxieties, emphasised by the repetition of the word “more” in lines 13 and 15.

I perceive that Anna was frustrated by the school issuing her with letters as notifications of Kaylee’s non-attendance, and I interpret that she viewed this approach as accusatory and felt blamed as a result. I feel Anna rejects any insinuation that Kaylee’s non-attendance was by choice, and this is emphasised in line 21 when she states, “an’ I want her in school!” (line 21).

I sense Anna’s anger towards what she implies was the school’s blanket approach to non-attendance which does not appear to have taken into account the emotional barriers Kaylee was facing: “she’s obviously struggling with anxiety/ it’s in your plan” (lines 30-31). To me, Anna interprets the school’s actions as a dismissal of her family’s lived experiences and failure to acknowledge Kaylee’s distress. Anna’s anger and frustration is tangible around the fact that she had to battle for Kaylee’s non-attendance to be recognised as mental health and coded as authorised absence.

4.5.4 Poem 14. Not saying it was gaslighting, but…

So,
skipped into school
an’ said,
“She is autistic,
we need measures in place” –
severe anxiety!
They said,
“She doesn’t look autistic,
she’s fine in school
(when she’s here).”

More and more
panic attacks
more severe.

I said, “She needs an EHC.”
“No she doesn’t,
she’s coping well.
See how she gets on.”

So then,
loads of meetings
with secondary school.
They kinda said,
“We’ve got loads of autistic children,
we can do this,
this is nothing.”

Loads of meetings,
“Yeah we’ll deal with
transition.”

I specifically said,
“She needs a buddy system,
one or two friends.”
An’ then
transition day
in groups,
she didn’t know anybody,
highly unusual,
I’d given the information.

Then
Year Seven
with no-one she knew,
bizarre,
really frustrated!

All the meetings
my main point,
my specific thing:
“She’ll be alright if she’s got support.”

So downhill from there!

And they were saying,
“You know, Kaylee is accessing school.”
“I know,
an hour a day
not quality education.”
Trying to look at positives,
unrealistic positives
I couldn’t relate to,
the positive slant.

Loads of times
teachers telling me
she doesn’t need
to be ont’ special needs register.

I knew I should ask
but no confidence,
drained looking after an additional needs kid
on the floor every morning.
Didn’t have
that fight in me.

But knew
things
were wrong
that teachers were telling me.

Not saying it was gas lighting,
but your perception is changed,
sometimes right
sometimes wrong,
sometimes need that
other point of view,
sharing knowledge.
But sometimes it was to
change your point of view
so you didn’t harass them,
or hassle them,
not a burden anymore.

Sometimes
you’re in a meeting,
it’s three against one,

and
in a very nice way
they say,
“We don’t see that.”
And that’s it,
not validated.
Never said
you’re lying
or Kaylee’s lying
but,
“We don’t see that.”
You know?
“Let’s move on.”

In mediation
it was
all practitioners on one side
saying,
“You won’t get this EHC.”
In front of an audience
having to
justify why you need this.
You’ve got the facts,
it’s lived experience.
“No,
she’s on eighty percent,
she’s doing well!”

From Anna’s use of the word “skipped” in line 2, I interpret that she and her husband felt confident and hopeful that Kaylee’s diagnosis would result in her needs being recognised and additional support provided for her in school. There is an assertiveness in how Anna speaks in the line “we need measures in place” (line 5), but it seems the staff in Kaylee’s school did not share their concerns and I sense this made her feel dismissed and disregarded.

Despite having “loads” (line 19) of meetings with the secondary school regarding Kaylee’s transition, Anna appears to feel she was once again ignored, the consequence of which was Kaylee not having social support and things going “downhill from there!” (line 46). The feeling that she was not being listened to or heard appears to be repeated throughout this poem, and I sense that Anna felt physically and emotionally exhausted from what seems to have been a continuous battle for her concerns to be acknowledged.

Anna seems to have experienced a lack of validation and empathy from practitioners who attempted to emphasise the “unrealistic positives” (line 53) of Kaylee’s attendance in school, and this may have resulted in her perceiving that the family’s lived experiences were being minimised. Anna appears to have felt powerless in her ability to challenge the manipulation she suggests was employed by practitioners, and I imagine this was exacerbated by feeling outnumbered in meetings: “it’s three against one” (line 84).

4.5.5 Poem 15. Rejected

Applied myself –
I can’t wait for her to fail
I’m gonna have to do something.
Assessment rejected
so I appealed,
then she was assessed.

Rejected.
She was a high flyer,
and
eighty percent isn’t that bad
attendance,
attainment and attendance isn’t suffering that much –
school
were backin’ that up.

Rejected,
then mediation.
“Look, she’s on ninety percent,
academically
she’s achieving.
Not going to benefit from an EHC.”

I intended for this poem to capture the rejection Anna described having experienced when she attempted to secure an EHCP for Kaylee. When Kaylee was in primary school, Anna submitted her first application for an EHC needs assessment. From the line “I can’t wait for her to fail” (line 2), I sense that Anna was frustrated that other people did not recognise Kaylee’s need for additional support, and this appears to have motivated her to take action herself.

Despite her initial request being rejected, Anna’s appeal was successful and an EHC needs assessment was carried out; however, at the final stage, the LA decided not to issue Kaylee an EHCP which, from Anna’s perspective, seems to have been based on her attendance and attainment data. Anna appears to feel that the school and the LA minimised the impact of Kaylee’s low attendance and declining attainment, and I sense that Anna felt that by focusing solely on this data they were disregarding other aspects of Kaylee’s school experiences, including the significance of her anxiety. To me, the repetition of the word “rejected” (line 4) in this poem reinforces her previous descriptions of feeling dismissed and disregarded.

4.5.6 Poem 16. Constant battle!

Year Seven
thought,
she needs specialised school.

Decision –
apply for an EHC
on my own again.

First time I was clueless.
They sent a draft plan,
just
copied and pasted
the EP report.
SALT assessment
was amazing,
they didn't put it in.
Under the illusion
the myths, it's private
I bought it
it's biased
so they won't put it in,
not independent.
Seeing the EHC plan now
I know what good looks like.

Knew it was wrong,
but you haven't got the strength
the energy to battle through that.

So,
in a better place,
quality application!

Sent it off,
time's ticking.

Pulling my hair out
because
I had to put it onto the [online portal].
Were gonna take days,
a different format!
Go along with the local authority,
they're in a powerful position
in control,
don't want to stop
the process –
nail biting.

Do everything right
make sure it goes through.

And then,
the EHC went through,
but problems
you know?
“She can have an EHC
she needs one,
needs a different setting
it’s not working.”
They’d awarded the EHC plan
but they were saying,
“We haven’t got any places.”
I used to phone
weekly
saying,
“What’s happening?
There’s a deadline
we’re over that –
need to know where she’s going.”

Visiting
loads of schools,
“We’re oversubscribed.”
“Would be detrimental to other children
if your child comes to this school.”
Hard hitting
you know?
No-one ever wants to be told
that!
The only excuse they can use by law.
I wasn’t prepared –
really hard hitting!

It’s a battle
and you run out of steam.
I wanted to work with these people
wanted a team effort,
but definitely
a constant battle.

There’s no route around it
if you want a specialised school,
this was the only way.
Not another EHC team
if not happy,
this is what you’ve got!

For me, this poem captures the battle Anna and her husband faced as she fought to obtain an EHCP and specialised setting for Kaylee. Anna seems to have felt there was no choice but to find a new school for Kaylee, and she identifies the EHCP as being the only way in which this could be achieved.

In the third stanza of this poem (lines 7-22), Anna reflects on her first application for an EHCP and her disappointment around the fact that the “amazing” (line 13) speech and language therapy (SALT) assessment was not included in the draft plan issued by the LA. Anna’s perspective appears to be that the draft EHCP was not a holistic representation of Kaylee’s needs. Despite her feeling the SALT assessment was of importance, Anna explains that she did not challenge the LA regarding its absence. In part this was because she had commissioned the assessment herself and was concerned it would not be viewed as “independent” (line 20); however, I also sense that she felt exhausted and helpless at that point, leaving her with no energy to argue against the LA’s decisions.

At the beginning of this poem, I feel Anna presents as being confident in her decision to submit her second request for an EHC needs assessment. In the fifth stanza (lines 26-28), she seems energised and was hopeful that the “quality” (line 28) application she had compiled would ensure she was successful. Despite her optimism, Anna encountered further obstacles and challenges along the way, including bureaucratic processes and a lack of specialised school places for Kaylee. I feel her powerlessness in not being able to push back against what were experienced as unnecessary processes, and Anna’s response to the power she perceived the LA held appears to have been one of compliance: “Do everything right/ make sure it goes through” (line 42-43). I sense her desperation in doing everything possible to obtain the EHCP for Kaylee, and in her description of the process as “nail biting” (line 41), suggesting to me that waiting for the LA to make their decision evoked anxiety and suspense.

When reading this poem, I was particularly struck by Anna's response to being told by oversubscribed educational settings that it “would be detrimental to other children” (line 65) if Kaylee was to be offered a place at their school. Her use of the phrase “hard hitting” (line 67) suggests to me that she was both shocked and hurt by this, and I am left wondering whether the schools had considered the connotations of such language choice and its potential impact on Anna. Rather than focusing on the school system and its inability to provide Kaylee with the appropriate level of support, this type of response could be interpreted as suggesting that Kaylee herself was the reason she was not offered a place.

4.5.7 Poem 17. Project managing

Pulling everyone together:
pastoral

SENCo
CAMHS
SENDIASS.
No-one else doin’ it for me,
I need to project manage this.

And pastoral
didn’t speak
didn’t say anything,
really bizarre
looked shocked.
I was explaining you know,
she’s having panic attacks
OCD traits,
they were staring blankly at me.
No,
“I’ve heard that before”
or, “That sounds really extreme”,
just no response.
Don’t think they know what they’re doing,
gonna have to project manage this myself,
they’re not gonna do it for me.

You’re stressed
looking after an additional needs child,
expect
they’re gonna project manage it,
they didn’t.

Get in
and start understanding it
to do it myself,
no-one else was gonna do it.
Roll up your sleeves and crack on!
What’s the alternative?

No alternative for me,
I’m a mum.

In this poem, Anna speaks of having to “project manage” (line 7) the process of obtaining support for Kaylee, and I sense that this realisation resulted in her feeling let down and disappointed. It seems to me that, once again, Anna did not feel validated by practitioners when she raised concerns about Kaylee’s emotional wellbeing, and I feel that she had also lost faith and confidence in their ability to provide her with any guidance or support.

In the final lines in this poem, Anna states: “No alternative for me,/ I’m a mum” (line 35-36). Here, I gained a sense that Anna was no longer willing or emotionally able to see Kaylee suffer and this meant that any alternative to her taking action was inconceivable. To me, Anna’s love for her daughter and inextricable connection to her distress meant that she had no choice but to “roll up [her] sleeves and crack on!” (line 33).

4.5.8 Poem 18. Steep learning curve

Doing lots of research
and looking at PDA.

Me and my husband doing courses,
learning
training
to get an idea of what
we needed to know.

Clueless,
not anybody guiding me
just training courses.

I was naive and impressionable.
Thought what they were saying was wrong,
the school and the local authority,
but didn’t have the evidence
didn’t know law,
what I was entitled to.
Wasn’t feeling frustrated
being guided by them,
easier
not hitting a brick wall,
smoother.
Ignorance is bliss,
calmer in a way
because I didn’t know the truth.

Started gaining knowledge
very frustrating,
because I knew what the law was
what she was entitled to –
drained.
Easier to nod your head
and listen to the professionals,
but
picking up knowledge
it got extremely frustrating.

Having to teach the teachers!

Practitioners

didn’t know
what they were doing,
it’s blind leading the blind!

Huge learning curve!
I was blessed
I had time off,
there’s single parents
that have to work,
I was fortunate.

A crash course for me
steep learning curve,
so many courses!

Information gathering,
and the right information,
people
unable to give answers
because they didn’t know.

In this poem, I feel Anna and her husband are presented as being proactive in her attempts to become upskilled to learn more about Kaylee’s diagnosis and the SEND system. By describing their experience as a “steep learning curve” (line 47), I believe that Anna is alluding to the complexities of the system and how difficult it was for them to navigate as parents. She appears to have felt disappointed by the fact that practitioners did not know how to support Kaylee in school, and I interpret that this made her feel alone and unsupported.

It seems the emotional battle started for Anna when she became more informed about the law and Kaylee’s entitlement to additional support, as then she was able to recognise that what she was being told by practitioners was not her understanding of the EHC system. I sense that the learning journey was arduous and challenging, yet being more aware of policies and processes empowered Anna to resist the manipulation she felt vulnerable to at the beginning of the EHC process. Anna expresses gratitude to having been able to dedicate time to the learning process because she was not working, and she identifies this as being a privilege not everyone is afforded.

4.5.9 Poem 19. Amazing support!

Educational psychologist
was lovely,
asked probing questions
what she enjoyed.
She thought he were a magician,

he pulled out a pack of cards,
normally not able to speak.

Got SALT involved,
hired her in –
we need help.
Was amazing!
Found out what she enjoyed
an’ strategies
to calm her,
boosting ‘er confidence,
was really good at that.

New SENCo,
amazing,
just listened to me.

She didn’t know about PDA
so I was sending her information,
she was grateful
we worked together.
She says,
“I will do everything possible”.

And SENDIASS
was the child’s voice
in meetings.
Spoke out for me,
a big movement in my mindset.

Speaking out for me
and for Kaylee,
gave me confidence,
validation.

There’s lots of groups
just fabulous
just fabulous,
or just parents or advocates sharing their knowledge

This poem captures the occasions where Anna felt supported by others during the EHC process. From this poem, I infer that it was important to Anna that she felt listened to and validated, and she appears to have appreciated the opportunity to work collaboratively with practitioners. I sense that Anna was grateful when other people advocated for her or Kaylee, and she appears to have valued the social support she received from other parents and carers.

Practitioners who Anna perceived to work well with Kaylee seem to have developed in her the confidence to share her voice by finding out about her interests and taking the time to build rapport. I wonder if such positive experiences provided Anna with a sense of hope and relief so that she was no longer feeling alone in the process.

4.5.10 Poem 20. Over the moon!

So they finalised the plan
said, “She starts Friday.”
No transition,
just so desperate to get ‘er in.
“Yes!
I’ll have the place.”
Over the moon
you know?
Wasn’t gonna
argue about transitions.

It’s not ideal,
but Kaylee said,
“I’m happy.
Got lovely teachers,
my teachers understand me.

She’s grown up,
she’s developed,
really good to
help heal.
Finding ‘er own identity,
autistic identity.
She can relate to the kids
in specialised school.

Needed a specialised teacher
what she’s got now,
what’s working –
I knew that.

Compromising on transition
because you were
desperate.

Definitely.
Over the moon,
so excited!
Just go for it!
“I will try anything mum!
Please try and get me to this new school.”

For me, this poem captures the happiness and joy Anna felt as a result of Kaylee being allocated a placement in a specialist setting. The rhetorical question “you know?” in line 8 suggests that Anna was seeking confirmation that I recognised the significance of this to her and Kaylee, and I feel her elation is emphasised by her repetition of the metaphor, “Over the moon!” (line 7). Anna appears to have been so desperate to accept the school place that she was willing to compromise on there being no transition support for Kaylee, something I feel was emphasised as being important for her in the poem, *Not saying it was gaslighting, but…* In the final two lines of this poem (lines 35-36), Kaylee is described as having pleaded with Anna to get her into the new school, and I feel this implies that she was also desperate to move forward.

The line “I knew that” (line 27) captures Anna’s certainty that she understood what Kaylee needed in school, yet this appears to be in contrast with previous poems in which I feel she is sometimes presented as lacking the confidence to challenge practitioners and assert her views. I wonder if this speaks to what Anna has described as being a disregard or dismissal of her views, causing her to doubt her own perceptions when advocating for Kaylee, whereas now she was feeling more confident.

Kaylee’s happiness in the specialist setting appears to have been supported by her having teachers who understood her needs, and I sense that feeling accepted in school and experiencing a sense of belonging allowed her to strengthen and develop her identity.

4.5.11 Poem 21. It’s like winning the lottery!

To have an EHC
what does that mean to you?

It’s like winning the lottery!
She’s talking to family
about school,
never used to –
it’s just immense!
To somebody else so minor,
But
how she’s grown
as a person,
it’s huge!
Making positives of everything.

A huge weight off our shoulders.

I’m looking at working again,

I’ve got options.
Before,
so severe her anxiety
didn’t know
where that path was gonna end.
Now
it’s exciting what’s gonna happen in the future!
Looking forward
not firefighting and contingency planning –
so positive now.

Here, Anna uses a simile to capture her feelings towards Kaylee having an EHCP, stating that “it’s like winning the lottery” (line 3). This conveys to me that she felt fortunate as a result and considered the EHCP to be life-changing. She describes the positive impact of the EHCP on Kaylee’s personal development, its significance being that it opened up options for her to attend a specialised school.

Before the EHCP, there seems to have been an uncertainty and unpredictability about the future for Anna and her family, and I sense they felt they were reacting to challenges and difficulties rather than having the time and space to think about the future: “not firefighting and contingency planning” (line 24). Anna states that she now has “options” (line 16) and this suggests again to me that she has been able to regain some of her own sense of self. She describes feeling “so positive now” (line 25) and this indicates to me that she is energised and hopeful for the future.

4.6 Analysis of the psychological subject in Anna’s narrative

4.6.1 Reflecting on psychological subject in Anna’s narrative

I will now consider the shifts in psychological subject I found to be of interest in Anna’s narrative. In Appendix O, I have provided an overview of what I interpret to be the main psychological subjects across each part of her narrative.

When analysing Anna’s transcript, I observed frequent shifts between Anna featuring as the main psychological subject either with or without her husband, and Kaylee being the focus of her narrative. After further analysis, I noted that Anna tended to speak in what appeared to be the following pattern across the majority of her narrative:

- Setting the scene: Who? Where? When?
- What happened and why?
- Then what happened?
- Action: Who did what?
- Conclusion/ result: responses from Anna or other characters/ the outcome of the action

Table 1 provides an example of how this pattern can be observed in strophes 4 and 5 (part 1) of Anna's narrative.

Table 1. *Structure of Anna's narrative*

Part 1: Towards a diagnosis **Strophe 4:** Impact of demand avoidance		
Stanza 8	Setting the scene	Anna was doing lots of research into PDA.
Stanza 9	What happened?	Kaylee was having meltdowns before school and this caused a cycle of lateness which led to a downward spiral in her emotional wellbeing.
Stanza 10	Then what happened?	Kaylee could not get out of the house/ could not go to parties with her friends.
Strophe 5: PDA assessment and diagnosis		
Stanza 11 & 12	Action	Anna looked into a private assessment for PDA/ Kaylee had the assessment.
Stanza 14	Conclusion/ result	Kaylee received a diagnosis of PDA. The family felt validated.

Analysing Anna's narrative within the context of this structure, I identified that Kaylee was often the focus of "What happened?" I feel that Anna's extended descriptions of Kaylee's behaviours and emotions served the purpose of eliciting empathy towards their lived experiences as well as providing an explanation for Anna's actions and decisions as she progressed through the EHC process.

Across the majority of her narrative, Anna features as the one taking action, be it alone or with her husband. I feel this reflects Anna's portrayal of herself as a project manager who was ultimately responsible for the continued progress towards obtaining an EHCP and specialist school placement for Kaylee.

Following the same process I used to construct Michael's identity poem, I examined Anna's interview transcript to identify the occasions where she spoke in first-person. I then collated the quotes from the transcript and grouped them thematically (see Appendix P), analysing each line and selecting key words and phrases I felt were significant to the presentation of her identity. I arranged these words and phrases to form the following identity poem for Anna.

4.6.2 Anna’s identity poem

Lots of research,
I looked at PDA
EHCs
SALT.

I gave them information
said,
“Have you heard of PDA?”
I sent lots of information,
I taught the teachers.

I advocated,
mentioned EHCs
went in all the time
‘ad loads of meetings.
I told them,
explained what she was going through.

I’m an advocate,
I advocate for other parents now.

I pulled everyone together
project managed it myself,
assessments and reports lined up.

I wanted to work with these people,
a team effort.

Applied for one myself,
I had to apply!
Applied for one again.
I had to get this!

I chased,
chased again,
phoned weekly.

Appealed,
argued,
complained.
I’m fightin’
I’m fightin’
I’m fightin’

because I’m a mum.

I was clueless

clueless,
naive and impressionable,
no research
I didn’t know law.
Guided by them
I didn’t know the truth,
no confidence.

I gained knowledge
knew the law
what she was entitled to,
I picked up knowledge.
My confidence ‘ad grown,
more information and knowledge
so many courses.
I knew what she needed.

I always cried at meetings,

I trained myself
not to get attached,
it’s mi job
I’m paid to do it,
I trained it out of me.
Not as attached as before.

I had time off with Kaylee,
packed in work,
I worked before.

I have options now,
I’m looking at work again.

I believe this poem captures Anna’s self-motivation and determination to gain the knowledge and skills she needed to advocate for Kaylee throughout the EHC process. Not only was Anna empowered to fight for her own daughter but, having grown in confidence, she was also able to use her voice to advocate for other parents facing similar battles. To me, such assertiveness contrasts with her self-identification of being “naive” and “clueless” at the beginning of the EHC process, when she appears to have felt vulnerable to manipulation from those working within the EHC system.

Anna describes having to detach herself from being Kaylee’s mum and I wonder if this gave her more strength and power in her advocacy role. Such detachment appears to have allowed her to present facts rather than lived experiences, and to be objective rather than emotional in her meetings with practitioners. I sense she felt this was important to ensuring her voice was not dismissed.

Although she was seeking collaboration, this poem portrays Anna as being alone in her project management of the EHC process. I sense Anna's desperation and persistence through repetition of the phrase "I'm fightin'", but also her exhaustion in having to constantly battle to achieve the support she needed for Kaylee.

4.7 My summary of Anna's narrative

For Anna, her journey through the EHC process started following a sudden deterioration in Kaylee's emotional wellbeing. In their bewilderment, Anna and her husband were prompted to make sense of what was happening for Kaylee and, concerned about the impact of anxiety on her education, they applied for an EHCP in order to secure additional support for her in school.

Sensing that nobody else was willing to take control over the EHC process, it seems that Anna felt she had no choice but to take charge herself in order to maintain forward momentum. Desperate to take away her daughter's suffering, Anna is presented as being determined to gain the knowledge and skills needed to advocate for Kaylee; however, despite her growing strength and confidence, she appears to have felt that her concerns were often dismissed and her perceptions manipulated by practitioners. Anna described the EHC process as being a constant battle during which she had to convince other people that her concerns were valid and her pursuit for an EHCP was justified. For Anna, the EHC process appears to have been exhausting, taking up so much time and energy that she did not always feel able to challenge other people's decisions, even when she perceived them to be unlawful.

Despite the challenges and obstacles she faced, there were some practitioners whose support appears to have been considered invaluable to Anna, including the EP, SALT practitioner, SENDIASS worker and the parent and carer support groups she accessed. She appears to have appreciated opportunities to work collaboratively with other people and she gained validation from being listened to and heard. Having support from someone who was neutral and could advocate for her and her daughter increased her confidence to contribute her views and opinions during the EHC process.

Anna shared that it was a huge relief when Kaylee was issued an EHCP and stated that it was like, "winning the lottery!" It appears to have provided Kaylee with a fresh start in a new setting in which her needs were recognised and understood, allowing her opportunity for healing and personal growth. For Anna and her family, the EHCP appears to have offered hope and positivity for the future.

CHAPTER 5: Discussion

5.1 Introduction

In this chapter, I discuss my interpretations of the narratives shared by Anna and Michael in the context of my research questions and existing literature around parental experiences of the EHC process. I then explore the implications for practice for practitioners in health, social care and education services who work with parents and carers as part of the EHC process, including educational psychologists, SENCos and EHC teams, as well as proposing recommendations for policy makers. I evaluate the quality of my research against the criteria outlined in Chapter 3, identifying its limitations and potential contributions to the academic field. Finally, I offer recommendations for further research and reflect on my next steps as a researcher and practitioner working with parents and carers in my future role as an educational psychologist.

5.2 Considering Anna's and Michael's narratives in the context of existing literature

In Chapter 4, I re/presented the narratives shared by Anna and Michael as mini-narrative poems, offering my analysis of their experiences of the EHC process for each poem. This research aims to privilege Anna's and Michael's unique experiences and capture their individual narratives; however, during my analysis, I noted similarities between their descriptions of the EHC process and elements of their journey to obtaining an EHCP for their child. Returning to the mini-narrative poems and my analysis, I created a visual diagram of the key messages I felt were expressed within Anna's and Michael's narratives, grouping them together thematically where I perceived there to be connections. I assigned each group a descriptive title based on the essence of the message I felt was being conveyed. This provided seven areas for discussion regarding the EHC process:

- A complex process that is difficult to navigate
- A lack of collaboration and communication
- A lack of coordination in the process
- A dehumanised system that is not person-centred
- A process that does not support parents and carers to feel listened to or heard
- The quality and significance of EHCPs
- The importance of support from "amazing" practitioners and services.

In the following sections (5.2.1 - 5.2.7), I will reflect on the seven areas identified within the context of existing literature and government policy. Without suggesting that Anna's and Michael's experiences of the EHC process were homogenous, I feel it is necessary to highlight the similarities in their narratives as this may be helpful in supporting practitioners across health, social care and education services, including educational psychologists, SENCos and EHC teams, to consider the implications for their practice.

As the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015) outlines the statutory duties, policies and procedures for LAs, schools and early years educational providers, I will introduce each key message with a quote taken from this guidance document.

5.2.1 A complex process that is difficult to navigate

> Local authorities **must** ensure that children, young people and their parents are provided with the information, advice and support necessary to enable them to participate in discussions and decisions about their support. (DfE & DoH, 2015)

Both Anna and Michael described their advocacy role in fighting for support for their children; however, before they could confidently do so, they had to embark on learning journeys to further understand the EHC process and SEND law. Anna states that she was “clueless” to begin with, and Michael describes the process as being a “minefield”. Their learning journeys involved researching their own and their child’s entitlements to support and, for Anna and her husband, attending training courses, which appear to have provided them both with greater confidence to challenge LA decision making and to question the information they received from practitioners. From my understanding of Anna’s and Michael’s narratives, they felt powerless and, at times, manipulated as a consequence of their unfamiliarity with policies and processes.

Michael reflects on having to become his own lawyer, distancing himself away from his own emotions in order to be successful in his advocacy role. Similarly, for Anna it was necessary to emotionally detach from her role as a mother and to view her advocacy role as a job where she was being paid to fight for her child. Anna speaks of there being no alternative as a mother but to “roll up [her] sleeves and crack on!” The necessity for parents and carers to gain knowledge of law and the SEND system to support them to navigate the complexities of the EHC process has been cited elsewhere in the literature (Arnold, 2024; Keville et al., 2025), with some describing the system as “intimidating” and “impenetrable” (Keville et al., 2025, p. 1067). Empowered with knowledge, parents and carers report feeling more able to drive the EHC process forwards (Hughes, 2024), experiencing greater success in advocating for their children (Hammond, 2024).

With the exception of the support they received from SENDIASS, Anna and Michael do not appear to have felt they were being guided by the LA and provided with the resources they needed to navigate the complexities of the SEND system. This resonates with previous research carried out by Adams et al. (2018) in which parents and carers reported not having received sufficient information to support them to navigate the EHC process. Inconsistencies in the information available to families (Newbery, 2024) continues to disempower (Arnold, 2024) and disadvantage those who do not possess understanding of the SEND system (Hammond, 2024) or knowledge of how they can access external support (Atkinson et al., 2024). Online resources are reported as being confusing and overly generic for those who require a more personalised approach (Hammond, 2024). I agree with Adams et al. (2018), who suggest that user-friendly guidance is needed to clarify the EHC process for families.

Anna and Michael shared the difficulties they had experienced in obtaining an EHCNA for their child. Michael had initially expected that Thomas' medical diagnosis would automatically evidence his eligibility for an assessment, and he was confused and surprised when this was not the case. Michael is not alone in his belief that a medical diagnosis would be necessary or helpful in gaining access to an EHCP (Hammond, 2024; Keville et al., 2025), with Sandiford (2025) concluding that this did in fact appear to support the EHC process for some parents and carers in her research. However, Hammond (2024) highlights that a medical diagnosis does not form part of the criteria for an EHCNA as outlined in the *Children and Families Act* (2014), noting the potential for SENCos, parents and carers to be disempowered by a medicalised approach to assessment. Such value held towards medical diagnosis in the EHC process (Arnold, 2024; Hammond, 2024; Starkie, 2024) along with a lack of capacity within public services and parental dissatisfaction (Matthews et al., 2025; Sibieta & Snape, 2025) appears to be influencing some to seek private assessments. Indeed, Anna expressed that her pursuit of a private assessment of PDA for Kaylee was due to the long waiting lists in the public sector.

Previous research finds that information about the EHC process is not always available to parents and carers (Adams et al., 2017; Newbery, 2024) nor is it accessible to young people and their families (RIP:STARS, 2018). Michael challenges the jargonistic language used within the SEND system, including *graduated response* and *Local Offer*, calling for a "campaign in plain English". He refers to the phrase Local Offer as being ambiguous and his confusion around the term suggests that he was not aware of its function as a source of information and support prior to his engagement with the EHC process. This conflicts with the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015) which states that the Local Offer should be "well signposted and well publicised" (p. 61). This suggests that, in some LAs at least, there needs to be better promotion and accessibility of resources such as the Local Offer to ensure that parents, carers and their children are informed about the provision available in their local area.

Michael's experience of the EHC process was particularly complicated by "local boundary issues". He referred to what he considered to be a dispute over who should take responsibility for Thomas' EHC needs assessment between practitioners within the LA in which he resided, and those within the LA in which Thomas attended nursery. He also found an inconsistency and lack of clarity in the paperwork between the two LAs and this created challenges for him within the process. Since my interview with Michael, the proposal of a national template for a "standardised and digitised EHCP process and template" (HM Government, 2022b, p. 13) has been suggested in the most recent SEND review. With its introduction, I hope that such digitisation of the process will support increased consistency and clarity for families and practitioners; however, policy makers and LAs will need to try to consider the implementation of any new systems and how they are communicated to families and practitioners, with training being available to ensure accessibility for all users (Hammond, 2024).

5.2.2 A lack of collaboration and communication

> Local authorities **must** ensure the child's parents or the young person are fully included in the EHC needs assessment process from the start, are fully aware of their opportunities to offer views and information, and are consulted about the content of the plan. (DfE & DoH, 2015, p. 18)

Echoing previous research (Andrew, 2025; Arnold, 2024; Sandiford, 2025), Anna and Michael both stated that they experienced a lack of communication and transparency within the EHC process. Michael spoke about having to constantly chase the EHC team for updates and, when doing so, he was confronted with a "wall of silence". Similarly, Anna reflected on the weekly phone calls she made to the EHC team enquiring about school placements for Kaylee. Such paucity in updates and the onus being on the parent to chase practitioners in the LA reflects Adams et al.'s (2018) research in which parents and carers reported that their attempts at communication with the LA were often ignored, leading to frustration. It is possible that the silence some parents and carers experience is contributing towards their loss of faith and trust in their LAs (Keville et al., 2025; Newbery, 2024), with some feeling they must escalate their concerns to those in higher power, for example, by contacting their local MP or the Director of Children's Services within their LA (Cullen & Lindsay, 2019; Sandiford, 2025), or appealing to the First-tier tribunal (Arnold, 2024) in order to gain power and control to drive the EHC process forwards (Hughes, 2025).

The SEND system has been described as "bureaucratic and adversarial, rather than collaborative" (HM Government, 2022b, p. 10). Anna and Michael both considered the EHC process to be a battle in which they were fighting against the LA for their child's needs to be recognised and an EHCP awarded. In this battle, Anna did not always have the emotional energy to challenge practitioners, and there were times when she felt she had to be compliant so as not to jeopardise Kaylee being awarded an EHCP. Describing the SEND system as being "in crisis" (p. 2), the Local Government and Social Care Ombudsman (2019) asserts that it is "not uncommon to hear the SEND process being described as a battleground" (p. 2). Certainly, recent research has noted combative metaphors (Atkinson et al., 2024) being used by parents and carers to convey the "arduous" (Malkin, 2023, p. 108), "intimidating" (Keville et al., 2025, p. 1067) and "laborious" (Sandiford, 2025, p. 192) process of obtaining an EHCP.

Despite the difficulties Anna and Michael faced, there were some aspects of the process that had the potential to support collaboration. To a certain extent, Michael speaks favourably about the LA's online portal for EHC needs assessments with regard to its potential to support transparency. He reflects on the fact that he was able to view the progression of his request through the various stages of the process and to see the contact details for his caseworker within the EHC team. He also referred to his ability to provide feedback on draft EHCPs through the portal, although he did not feel his comments were necessarily actioned effectively. The tokenistic nature of parental involvement in the EHC process was also reported in Arnold's (2024) research, suggesting there is a need for LAs and practitioners to consider ways in which they can strengthen collaboration with parents and carers.

Consistent with parental narratives shared elsewhere (Cullen & Lindsay, 2019; Keville et al., 2025), Anna and Michael depict a system that was working against them rather than with them. There is a reported lack of capacity in the current system to support effective collaboration with parents and carers (Hammond, 2024; Sandiford, 2025), with some advocating for a cultural shift towards "genuine partnerships" (Arnold, 2024, p. 214) where lived experiences of families are valued (Sandiford, 2025) and parents and carers have increased autonomy and choice within the EHC process (Hughes, 2024). Where collaboration is effective, it has the potential to support a more holistic and improved understanding of the child or young person (Malkin, 2023).

5.2.3 A lack of coordination in the process

> Local authorities are responsible for ensuring that there is effective co-ordination of the assessment and development process for an EHC plan. (DfE & DoH, 2015, p. 19)

Anna and Michael made reference to a lack of coordination in the system which forced them to take active roles in pulling services together for meetings and chasing up assessment reports. Michael felt that he was "driving" the process, whereas Anna was "project managing". Their actions appear to have supported forward momentum without which they felt the EHC process would have stagnated. Such proactivity in inviting practitioners to meetings and requesting assessments from services supports what is reported elsewhere in the research (Ahad et al., 2022; Arnold, 2024; Sales & Vincent, 2018).

Anna and Michael both stated that their personal circumstances allowed them time to play such pivotal roles in coordinating the EHC process. They expressed gratitude to their privileged positions, reflecting on the fact that not every parent or carer is able to take time away from work as they did. Such sentiments are also shared elsewhere in the research (Arnold, 2024; Sandiford, 2025), with parents and carers recognising the advantages of having the skills, knowledge and resources to advocate for their child and the importance of this in helping to drive the EHC process forwards (Hammond, 2024). *SEND Review: Right support, right place, right* *time* (HM Government, 2022b) challenged the equity of the current SEND system, proposing that “parents and carers with access to financial and social resources are often better placed to navigate the system and secure support for their child” (p. 10). I feel this speaks to an inequity within the EHC process that does not align with the *SEND Code of Practice: 0-25 years* (DfE & DoH, 2015) which states:

> Local authorities **must** work with parents and children and young people to understand how best to minimise disruption for them and their family life. (p. 149)

During my analysis of Anna’s and Michael’s narratives, I noted that they sometimes appeared to be presenting aspects of their identity within the EHC process. I felt Anna conveyed identities such as researcher, teacher, project manager, challenger, fighter and advocate, and I interpreted Michael’s identities to include driver, challenger, negotiator, lawyer, advisor and advocate. To me, these identities represent the extent to which they both transcended their role as parents whilst navigating the process, performing tasks beyond their understanding of typical parental duties to ensure the best possible outcome for their child. Anna and Michael described feeling drained and exhausted by the process, which echoes previous research in which the emotional impact on parents and carers has been noted (Arnold, 2024; Atkinson et al., 2024; Cullen & Lindsay, 2019; Sandiford, 2025; Starkie, 2024). Parents and carers report experiencing stress and anxiety (Hughes, 2024; Keville et al., 2025; Malkin, 2023; Sandiford, 2024) and, in some cases, having to leave work to manage the demands of the process (Arnold, 2024; Cullen & Lindsay, 2019). Whilst the majority of parents and carers in Adams et al.’s (2017) research reported that their family’s personal needs and circumstances were taken into account, their findings suggest there is still some space for further thought around how practitioners and LAs can reduce the impact on families who may be experiencing challenges beyond the EHC process. In their follow-up research, Adams et al. (2018) reported that carrying out the administrative tasks associated with the EHC process was stressful and time consuming for parents and carers. In light of the current and previous research, I feel there needs to be greater consideration of the impact of the process on parents and carers and their families and the support available to reduce such demands.

5.2.4 A dehumanised system that is not person-centred

> The needs of the individual child and young person should sit at the heart of the assessment and planning process. (DfE & DoH, 2015, p.147)

Existing research indicates that a person-centred approach within the EHC process is not always possible due to limited capacity and time for practitioners to adopt a more individualised approach to assessments (Hammond, 2024; Hughes, 2024; Sandiford, 2025). Parents and carers report feeling “devalued and dehumanised” (Hughes, 2024, p. 218), with a lack of autonomy and control over decisions that impact on their child. This is exemplified, for example, through their absence at

SEND panels where decision-makers are reliant on paperwork to decide whether or not to carry out an EHCNA or issue a child or young person an EHCP (Hughes, 2024). Similarly, parents and carers in Sandiford's (2025) research reported a lack of individualisation in the EHC process, valuing the occasions where practitioners spent time gaining a deeper understanding of their child and their family's lived experiences. Sandiford (2025) writes that within the EHC process "systems are prioritised over human connection" (p. 299) with statutory deadlines and limited capacity within services leaving little time and space for collaboration with parents and carers.

In his narrative, Michael depicts a system in which humanity is becoming lost and the child or young person is no longer held central to the process. He states that he experienced a lack of "compassion" in the process and described it as being "so cold". I feel a striking example of this in Anna's narrative is where she described being told by oversubscribed specialist settings that, "It would be detrimental to other children…if your child comes to this school". To me, this evidences the need for practitioners within education settings and LAs to rethink the language they use when communicating with parents and carers, and the importance of always keeping in mind the child or young person at the centre of the process. As Michael states, "We're talking about people here…this is not just some taxation event, right?"

The *SEND Review* (HM Government, 2022b) highlights the importance of early identification of needs, proposing that support should be implemented at the "earliest opportunity" (p. 13) and, for the majority of children and young people, without the need for an EHCP. Anna spoke about not being able to wait for her child to fail before taking action, driving her proactivity in making several applications for EHC needs assessments without support from Kaylee's school. It seems that Michael was in vehement opposition to what he saw as the LA's policy of wanting children and young people to "drown and then learn to swim". Here, I believe they are both advocating for early intervention for children and young people with SEND, and for the implementation of preventative rather than reactive measures.

In their narratives, Anna and Michael both refer to having appealed against LA decisions at mediation. Michael identified meditation as being "the most horrendous event" and, for me, his descriptions of the process suggest that he felt interrogated and questioned about his reasons for seeking an EHCP for Thomas. In response, he considered it necessary to present evidence in order to prove Thomas' eligibility. For Anna, the mediation process appears to have been yet another occasion where she felt her concerns regarding Kaylee's need for an EHCP were dismissed, and she reports that her daughter's declining attendance and attainment were not deemed significant enough by the LA. Anna's and Michael's experiences are consistent with those shared by parents and carers in Cullen and Lindsay's (2019) research who described mediation as "confrontational" (p. 9) and "corrupt" (p. 8), with their views being dismissed by practitioners from the LA. In light of the traumatic experiences of mediation that some parents and carers face and the reported lack of focus on the lived experiences of children, young people and their families, practitioners should consider how such processes can be improved.

5.2.5 A process that does not support parents and carers to feel listened to or heard

> Local authorities, early years providers and schools should enable parents to share their knowledge about their child and give them confidence that their views and contributions are valued and will be acted upon. (DfE & DoH, 2015, p. 21)

Whilst some research has suggested an improvement in parental involvement since the introduction of the current SEND code of practice (Sales & Vincent, 2018), Anna's and Michael's narratives align with other research in which parents and carers shared they did not feel listened to or that their contributions were truly valued in the EHC process (Adams et al., 2018; Arnold, 2024; Cullen & Lindsay, 2019; Hammond, 2024; Holland & Pell, 2017; Starkie, 2024). Michael perceived the LA as being "discriminatory" towards his views, stating that they would "disregard" any evidence he contributed towards the EHC needs assessment. This resonates with existing research where parents and carers have perceived their views as being subordinate to those shared by professionals (Eccleston, 2016; Hughes, 2024).

Adams et al.'s (2018) research found that some parents and carers faced additional challenges during the EHC process due to "uncooperative" (p. 38) relationships with their child's school. Anna was persistent in emphasising the high levels of distress Kaylee was experiencing to staff in school, yet their response was often, "she's fine", disregarding any potential factors in relation to school that may have been contributing towards her anxieties. The implication of parental blame and dismissal of her concerns echoes narratives shared by parents and carers elsewhere (Hammond, 2024; Keville et al., 2025). Anna identifies that Kaylee often masked her anxieties in school, and describes the battle she faced in trying to get her non-attendance recognised as authorised absence. At times, Anna felt practitioners were seeking to change her perspective towards the extent of her concerns and the support she felt Kaylee needed. Similarly, parents in Hughes' (2024) research expressed that their concerns were not believed or seen as valid by practitioners. The importance of parental views being validated is highlighted in Malkin's (2023) research, both in terms of supporting the effectiveness of the EHCP application, but also in relation to legitimising the parents' perspectives. Anna experienced a lack of validation in her meetings with practitioners, although this does appear to have been felt within her interactions with her SENDIASS representative, who supported her to feel more confident to advocate and share her views.

SEND Review: Right support, right place, right time (HM Government, 2022b) highlights the "vicious cycle" (p. 11) that can manifest from a lack of early intervention and additional support being implemented, stating that, "children and young people's needs are identified late, then escalate and become entrenched" (p.

12). I feel the implication of current and previous literature is that there is a role for practitioners in LAs, educational settings and health and social care services to build positive and supportive relationships with parents and carers through which they can experience trust and faith that their voices are being heard and their lived experiences acknowledged. Making space for multiple perspectives to be heard has the potential to contribute towards a shared understanding of a child or young person's needs (Malkin, 2023).

5.2.6 The quality and significance of EHCPs

> The purpose of an EHC plan is to make special education provision to meet the special education needs of the child or young person, to secure the best possible outcomes for them across education, health and social care and, as they get older. (DfE & DoH, 2015, p. 142)

Questions around the level of detail and specificity in EHCPs (Sales & Vincent, 2018) as well as the quality of outcomes have been raised in previous research (Arnold, 2024; Castro-Kemp et al., 2019). It is also reported that there are variations in parents' and carers' satisfaction with final EHCPs across LAs (Adams et al., 2017).

In her narrative, Anna spoke about the draft EHCP she received from the LA following her first application for an EHC needs assessment, stating that it looked more like an "action plan" with the educational psychologist's advice being "copied and pasted" into the document. Anna shared that there was no reference to the private SALT report she had provided which, at the time, she thought may have been due to the fact that she had commissioned the assessment herself. Despite her disappointment with the initial draft EHCP, Anna appeared to be more positive about the plan with which Kaylee was issued following her second application, describing it as a "good one". Michael also expressed disappointment with the fact that the educational psychologist's report was simply copied and pasted into Thomas' draft EHCP.

Anna's and Michael's experiences reflect previous research in which parents and carers have reported poorly written plans (Cullen & Lindsay, 2019) that are sometimes not holistic or personalised (Adams et al., 2018; Arnold, 2024; Matthews et al., 2025), with the focus instead being on educational outcomes and provision rather than health or social care (Castro-Kemp et al., 2019). In his narrative, Michael shares, "we did see it as a golden ticket/ it turned out not to be" suggesting that the EHCP did not live up to expectations for Michael. Such disappointment was also found in Hammond's (2024) research in which parents and carers reported that the EHCP was not the key factor in making a difference for their child; rather, it was how the provision outlined in the plan was implemented. For some, EHCPs can bring little change or additional funding for provision (Arnold, 2024; Hammond, 2024; Keville et al., 2025) with Matthews et al. (2025) finding that only one-third of parents and carers surveyed felt the provision in their child's EHCP represented what they were actually receiving in school.

Despite questioning the quality of their child's EHCP, both Anna and Michael were grateful that their children were issued a plan. Anna stated that it was like "winning the lottery", and she was "over the moon" with the outcome. By having an EHCP, Kaylee was able to access a specialist school placement which, for her, appears to have been life-changing. From Michael's perspective, the EHCP provided him with a sense of security in knowing there was a statutory document that stipulated the support Thomas required in school, a view that has been shared by parents and carers elsewhere (Hammond, 2024).

In my role as a trainee educational psychologist, I have noted that the significance of EHCPs to families can sometimes be missed by practitioners working within the SEND system, and I wonder if this connects to what Michael suggested is dehumanisation in the system. I feel this research emphasises the importance of practitioners attempting to understand the purpose and meaning of an EHCP to a family, and the necessity for them to listen with empathy to the journeys of parents and carers as they navigate the EHC process.

5.2.7 The importance of support from "amazing" practitioners and services

> Practitioners in all services involved in the assessment and planning process need to be skilled in working with children, parents and young people to help them make informed decisions. (DfE & DoH, 2015, p. 149)

The importance of families having access to an individual who can help coordinate the process and provide information and support has been highlighted in other research (Adams et al., 2017; Adams et al., 2018). Whilst Anna and Michael described facing many challenges in their journeys through the EHC process, there were also occasions where they spoke positively about their experiences of working with educational psychologists and individuals from SENDIASS as well as the valuable support they received from charities and their local Parent Carer Forum. There were also some mentions of helpful SENCos in both their narratives who added to the support they received during the EHC process.

Anna referred to her SENDIASS practitioner as the "child's voice" and she appreciated having someone neutral as her advocate in meetings. For Anna, the SENDIASS practitioner gave her confidence and validation, fighting for her when she was too "drained" to do it herself. Michael also describes SENDIASS as being impartial, referring to them as his "legal counsel" from whom he sought advice. In Michael's case, they were a source of valuable support and his "only partner" in the journey. Considering the importance Anna and Michael attributed to SENDIASS' role in supporting them as parents and carers, it is disappointing that some parents and carers are still unaware of their services. In Adams et al.'s (2017) research, only 55% of parents and carers who responded to their survey had been informed about information, advice and support services as part of the EHC process. Furthermore, Newbery (2024) found inconsistencies in the support parents and carers received from SENDIASS, with those eligible for free school meals being less likely to access this form of support.

In line with previous research (Adams et al., 2017; Malkin, 2023; Skipp & Horwood, 2016), assessments by educational psychologists were praised within Anna's and Michael's narratives. Anna was amazed by the educational psychologist's skills in being able to elicit Kaylee's views, and Michael valued the educational psychologist's professionalism and ability to create rapport with Thomas, despite carrying out the assessment online. Michael felt that these qualities allowed her to write a report that "nailed it on the head". Similarly, parents in Malkin's (2023) research shared that the interpersonal skills of educational psychologists made them feel comfortable and at ease to share their views, containing difficult emotions through their "genuine, conscientious, non-judgemental and trustworthy" (p. 97) approach.

To me, this research emphasises the importance of parents and carers feeling supported and highlights the impact that positive relationships can have on their trust and confidence towards LAs, educational settings and wider services.

5.3 Reflecting on the impact of the COVID-19 pandemic

Anna and Michael both reflected on the impact of the COVID-19 pandemic on their experiences of the EHC process and I feel it is necessary to take this context into account when considering the narratives within this research. In this section, I will discuss Anna's and Michael's reflections on the way in which the COVID-19 pandemic affected their experiences of the EHC process. I will also consider how the pandemic influenced this research and my own experiences as a researcher and trainee educational psychologist.

5.3.1 The impact of the COVID-19 pandemic on the EHC process

Between May 2020 and September 2020, statutory deadlines relating to the EHC process were relaxed for cases where the COVID-19 pandemic had impacted on timescales. Consequently, there were delays in some children and young people accessing the support and provision required to meet their needs (Children's Commissioner for England, 2020). Michael referred to the difficulties that services faced in meeting demands during the pandemic and the impact this had on assessments being completed, stating that "everything went into a bit of a freefall". He states that the nation was in "some kinda paralysis" during the national lockdown, impacting on the support available to help him and his family in understanding Thomas' diagnosis of autism and learning disability. The impact of the COVID-19 pandemic on access to education, health and social care services for families is also reflected in research by Ashworth et al. (2024) in which professionals reported, "...increased demand for services, longer waiting lists, staff shortages and burnout amongst staff" (p. 35). Michael identifies the pandemic as being a contributory factor to the challenges he faced during the EHC process.

As the country went into national lockdown, restrictions were introduced, including the requirement for anyone who could work from home to do so. Educational psychologists were one such profession for whom working remotely was considered possible, leading to a sudden adaptation to practice and technology being used in innovative and creative ways to ensure statutory duties were fulfilled. Virtual meetings soon became the norm and many psychology services scrambled to develop ways in which to carry out assessments online. Michael explained that the educational psychologist's observations of Thomas as part of the EHC needs assessment had been carried out by video call and he reflected on how "amazed" he was in what she was able to capture in her report, highlighting the effectiveness of her approach to continuing the assessment despite the potential barrier of not being able to meet Thomas in person.

In her interview, Anna referred to Kaylee's difficulties accessing learning online during the national lockdown periods. For her, it was not an effective way to learn, and what Anna felt her child required was access to specialist teaching in a classroom. Difficulties concentrating for long sessions, feeling overwhelmed by the sensory stimuli of online learning and a lack of access to the required technology were among some of the challenges faced by children and young people with SEND who were trying to learn online during the pandemic (Council for Disabled Children, 2021). Conversely, some children and young people reported the benefits of online learning, including greater flexibility around when they could take breaks and a reduction in sensory stimuli or social pressure compared to the school environment (Council for Disabled Children, 2021).

In research by Ashworth et al. (2024), practitioners expressed concern over the negative impact of the national lockdown periods on mental health and wellbeing as well as social skills development for children and young people with SEND. For some children and young people, extended periods of non-attendance resulted in anxieties connected to returning to school. As was the case for some children and young people (Council for Disabled Children, 2021), the COVID-19 pandemic provided Kaylee with respite from school for which she expressed relief, and when her school reopened she too faced emotional barriers to attending. Taking into account this research as well as my own experiences of working with children and young people as a trainee educational psychologist, I feel there is a role for practitioners in listening to the stories of children and young people, trying to understand their sense-making around their experiences when considering the type of support they may require.

5.3.2 The impact of the COVID-19 pandemic on this research

The initial stages of this research, including the interviews with Anna and Michael, were carried out during the COVID-19 pandemic. At times, the demands of homeschooling my children on top of juggling the workload associated with being a trainee educational psychologist on a doctorate and working for a LA service meant that I had little time and space to dedicate to my thesis studies. The emotional impact of managing such demands as a consequence of the COVID-19 pandemic on top of other personal circumstances has culminated in a significant extension to the completion time of this thesis. The length of time it has taken for me to share Anna's and Michael's voices has often led to uncomfortable feelings of guilt yet, in recent months, those feelings have also become one the most dominant motivators for finishing this thesis.

In Chapter 3, I described having to adapt my research due to the national restrictions and lockdown periods which meant a shift to working online and using video technology. For me, the narrative interviews were successful and I was still able to build rapport with Anna and Michael, which I feel is evidenced by their extended narratives. I was appreciative that they both chose to keep their cameras turned on as this supported me to observe their non-verbal forms of communication in order to support my responses.

5.4 Assessing the quality of this research

5.4.1 Riessman's quality criteria in narrative research

As outlined in Chapter 3, I have adopted Riessman's (1993; 2008) suggestions for approaching validation of narrative analysis within my work. I will now examine the "trustworthiness" (Riessman, 1993, p. 65) of my research in relation to its persuasiveness, coherence and pragmatic use, discussing what I consider to be the strengths and limitations in my methodological choices.

5.4.1.1 Persuasiveness

Riessman (2008) claims that, "good narrative research persuades readers" (p.191). She states, "Persuasiveness is greatest when theoretical claims are supported with evidence from informants' accounts" (p. 65). Taking these assertions into consideration, I have included quotes from the poems to support my interpretations of the narratives. I have also included the annotated transcripts in the appendix of this thesis to allow readers to view the levels of my analysis and to gain insight into my sense-making around Anna's and Michael's experiences.

Gee (2014) states that it can be difficult to distinguish between the boundaries of lines and stanzas due to the "complex syntactic structures within and across the sentences" (p. 162) used by adults within their oral storytelling. Due to my unfamiliarity with his approach, I often found myself returning to Gee's (1991) guidance as well as the examples of transcription provided in the literature (see Riessman, 1993) when editing and reviewing my work. As a result, I found the transcription phase to be time consuming; however, I argue that the process, which included repeatedly listening to the audio recordings in order to detect subtle shifts in pitch, pace and emphasis, supported me to fully immerse myself in Anna's and Michael's narratives. In Chapter 3, I explained that I deviated from Gee's approach by including my own voice in the transcripts, my intention being to acknowledge the interactional context in which Anna's and Michael's narratives were situated.

The transcriptions I have presented are, therefore, interpretations and adaptations of Gee's method. As Mishler (1991) points out, any form of transcription is a "transformation" (p. 48) of speech events. As a researcher, it is not possible to remain neutral within the transcription process (Riessman, 2008). I have been open and honest about my subjectivity in the transcription and analysis of the narratives and I have engaged in reflexivity throughout the research process, presenting my reflections in Chapter 3. In doing so, I have attempted to persuade others of the trustworthiness of my analysis.

5.4.1.2 Correspondence

Following their interviews, Anna and Michael were offered the opportunity to review their transcripts in order to identify any aspects of their narrative they wished to be removed or felt needed to be anonymised. I was grateful for the time they both spent looking at their transcripts as this provided me with reassurance that I was presenting their narratives in a way that felt comfortable to them as contributors to this research. Unfortunately, I did not have time to obtain Anna's and Michael's perspectives towards my analysis of their narrative and to ask whether they recognised themselves in my interpretations as well as in the poems I created. I feel that member checks may have further supported the trustworthiness of my analysis and I, therefore, consider this to be a limitation of my research.

5.4.1.3 Pragmatic use

In this research, I have been transparent about my approach to the analysis of Anna's and Michael's narratives, clearly outlining the steps I followed when transcribing the interviews and creating the poems. I have attempted to provide a level of detail that would allow other people to replicate the processes I followed, including excerpts of the transcripts in the appendix in order to demonstrate my application of Gee's (1991) approach to structuring the narratives. Riessman (1993) states that providing such information can support other researchers to consider the "trustworthiness" of research.

5.4.2 Quality in poetic transcription

In Chapter 3, I outlined the touchstones of qualitative research proposed by Prendergast and Belliveau (2013). I will now consider my use of poetic transcription in relation to this criteria.

5.4.2.1 Effective contextualisation and application of poetic forms

There were occasions during the completion of this thesis where I questioned my decision to use poetry transcription in my research, not because I doubted the suitability of poetry as a method of re/presentation, but rather I sometimes became overwhelmed when constructing the poems as I did not feel there was a clear enough structure and process for me to follow based on previous literature. I often found myself asking, “Am I doing this right?” However, whilst daunting at times, not feeling constrained by a rigid structure meant that I had the freedom to adapt the poetry to Anna’s and Michael’s narratives and the aims of my research. This included taking licence with the punctuation but not the words used, reflecting the order in which the words were said in the transcript and using line breaks in accordance with the structure of idea units in the transcript. In doing so, the intention was to create rhythm and highlight certain aspects of the narrative that I felt were significant. I also included some of my voice in the poems to emphasise the co-construction of the narrative and my potential influence on its direction.

As I had intended my research to honour Anna’s and Michael’s narratives, I sought to re/present them in an accessible way that would provide space for other people to listen and hear their voices. With parents and carers of children and young people reporting that they feel marginalised and dismissed when navigating SEND systems (Starkie, 2024), it was important to me for my research to be faithful to Anna’s and Michael’s voices. Reflecting on the poems I have constructed, I feel they are powerful and emotive, capturing Anna’s and Michael's rollercoaster journeys through the EHC process. I believe they achieve my aim of potentially eliciting empathy and understanding for parents’ lived experiences; therefore, I consider poetic transcription to have been appropriate for this research.

5.4.2.2 Affective and or imagistic elements present in the work

Anna and Michael both employed imagery, metaphors and emotive language when describing their experiences. In doing so, they allowed me the opportunity to represent their narratives “imagistically, metaphorically [and] symbolically” (Piirto, 2009, p. 87). When revising and editing the poems, I played around with the use of punctuation, line breaks and line length to create rhythm, speeding up or slowing down the pace of the poem to reflect the emotions conveyed or to emphasise particular words or phrases. By revising and editing the poems repeatedly, I was able to refine my use of poetic devices and ensure the essence of Anna’s and Michael’s narratives were captured. As a result of the process I have followed, I feel I have achieved what Lahman et al. (2011) describes as being “*good enough research poetry”* (p. 894) and I hope that readers share this view.

5.4.2.3 Reflexivity and presence of researcher and/or participants

I chose poetic transcription as a method as it aligned with my aim to foreground the voices of the parents and carers. I hoped to evoke empathy and understanding of Anna’s and Michael’s experiences by drawing out the emotions conveyed within their narratives. Whilst all the words in the poems belonged to Anna and Michael, I acknowledge that the process of selecting words or phrases to include in the poems is likely to have been driven by my own experiences, values and motives for carrying out the research, in addition to the cultural, political or theoretical context in which I was operating (Riessman, 1993). To some, the process of using only words taken from interview transcripts may be "restricting" (Butler-Kisber & Stewart, 2009, p. 4), but I feel it provided me with reassurance that I was staying close to Anna's and Michael's narratives.

Re/presenting participants' experiences is a subjective process that requires interpretation (Riessman, 1993) and I have offered my reflections with regard to reflexivity in Chapter 3. Through the iterative process of creating the poems, I became "a co-constructor of, and active participant in, the narrative" (Nichols, Biederman & Gringle, 2014, p. 9). I acknowledge that the way in which I have constructed the poems may differ to the methods other researchers would have chosen and the decisions they would have made when selecting aspects of the narrative to re/present in the poems.

I consider a limitation of this research to be that I did not have time to work collaboratively with Anna and Michael when constructing the poems, nor did I obtain their feedback as part of the member checking process. I feel this would have provided another valuable layer of interpretation and supported my efforts to stay loyal to the meaning of their narratives in their re/presentation as poems.

5.4.2.4 Overall impact in aesthetic and disciplinary terms

Prendergast and Belliveau (2013) suggest that researchers ask the following questions when assessing this aspect of quality:

a) How well do the poetic elements work within the study as poetry?
b) How well does the study overall work as a scholarly contribution? (p. 203)

I will now address these questions in relation to my research.

In this research, I aimed to offer readers a different way of listening to parents' and carers' stories. Existing literature has often summarised their experiences in prose following thematic analysis of semi-structured interviews (Cullen & Lindsay, 2019; Sales & Vincent, 2018; Starkie, 2024), or presented statistical data to demonstrate their satisfaction with the EHC process (Adams et al., 2017, Adams et al., 2018, Holland & Pell, 2017). I feel the unique contribution of this research is its potential to reach a wider audience through poetry as an accessible form of re/presentation, inviting readers to consider parents' and carer's experiences of the EHC process from a different perspective. For me, poetry is a powerful method of re/presenting voice in an ethical and thoughtful way.

The reader adds another level of representation to the poetry (Riessman, 1993). The meaning they derive from the poems will be shaped by their interpretations and the factors that influence how they construct reality.

Poetry "necessitates deep reading and rewards with vicarious experience" (Nichols, Biederman & Gringle, 2014, p. 16). The time I spent creating the poems has allowed me to form a deeper and more meaningful connection with Anna’s and Michael’s narratives, and their words continue to impact upon my practice in my role as a trainee educational psychologist. When meeting with parents and carers, I sometimes hear Anna’s and Michael’s stories being echoed and I am reminded of the emotions I experience when reading these poems. I am mindful of what Anna and Michael shared as being important to them when working with practitioners, and I try to consider the implications for my own practice.

5.5 Summary

In this research, I aimed to explore parents’ and carers’ experiences of the EHC process. Adopting narrative approaches and poetic inquiry, I have offered space for Anna and Michael to share their narratives and, in doing so, I believe this research offers valuable insight into their individual lived experiences. The unique contribution of this research is its use of poetic inquiry to re/present parents’ experiences. I feel poetry has allowed me to achieve my aims of privileging Anna’s and Michael’s voices, inviting readers to emotionally connect with the narratives shared and to form their own interpretations of their experiences.

Synthesising existing literature with my analysis of the narratives shared by Anna and Michael, I conclude that to parents and carers the EHC process can be:

- Perceived as being a complex process that is difficult to navigate, opening them up to feeling vulnerable, marginalised and manipulated by those who they consider to hold more power in the context of the SEND system.
- Experienced as lacking collaboration and communication which can lead to a loss of faith and trust and cause parents and carers to feel they are fighting against systems and processes to obtain additional support for their child.
- Frustrating when it is not coordinated which means they are sometimes forced to transcend their roles as parents and carers in project managing the process themselves, adopting various other identities when advocating for their child. It is reported that this can be an exhausting and painful process.
- Experienced as a dehumanised system that is not always person-centred, causing them to feel their child has to fail before receiving the additional support they require.
- Experienced as discriminatory when they feel their views are being disregarded and are not valued by practitioners.
- Disappointing when the final outcome of an EHC needs assessment is an EHCP that is not felt to be personalised, a holistic representation of their child or collaboratively produced.
- More positive when practitioners take time to be person-centred and compassionate in their approach and where there is access to support and impartial advice throughout the process.

I invite practitioners in LAs, educational settings and health and social care services to consider the implications of this research for their own practice when working with parents, carers and their families. The following section presents some of my own reflections around implications for practice.

5.6 Reflecting on the implications for practice

This section considers my second research question which asked:

- What can local authority services, including educational psychologists, learn from the narratives parents and carers tell about their experiences, and how might they shape practice?

In this section, I reflect on Anna's and Michael's experiences of the EHC process as well as those shared by parents and carers in the existing literature, suggesting possible implications for practice for practitioners who work within the EHC process, including educational psychologists, staff in educational settings, caseworkers in EHC teams and those who work in health and social care services. I also offer considerations for policy makers and LAs.

I have chosen to summarise the implications for practice under four headings which are drawn from the conclusions I outlined in section 5.2:

- Parents and carers need access to information, advice and support that enables them to participate fully in the EHC process and make informed decisions.
- Parents and carers need to feel able to share their lived experiences and valuable knowledge of their child during the EHC process and confident that their views will be valued within the EHC process.
- Parents and carers need to experience trust when working with practitioners as part of the EHC process through effective communication, transparency and supportive relationships.
- Parents and carers need to feel their child is at the heart of the EHC process.

5.6.1 Parents and carers need access to information, advice and support that enables them to participate fully in the EHC process and make informed decisions

In this research, Michael reported feeling "fairly blind" (Poem 1, line 5) at the beginning of the EHC process due to a lack of knowledge of the SEND system. He described a journey of "continuous learning" (Poem 1, line 24) in which he spent "many hours reading" (Poem 1, line 25) in order to improve his confidence and understanding. Similarly, Anna shared that she was forced to carry out "lots of research" (Poem 18, line 1) to support her own understanding, describing her experience as a "steep learning curve" (Poem 18, line 47).

Taking into account the narratives shared by Anna and Michael in this research, in addition to the findings cited in previous literature, I have concluded that the EHC process is complex and difficult to navigate for parents and carers (HM Government, 2022b). They are often forced to improve their understanding of systems and processes through independent research and training courses (Arnold, 2024; Keville et al., 2025; Sandiford, 2025), yet they are not always equipped with the information they require and are left feeling alone (Adams et al., 2018) and disempowered (Arnold, 2024). In Poem 1, Michael highlights that the language used by LAs and policy makers is sometimes “gibberish” (line 17), commenting specifically on unfamiliarity with terminology such as *Local Offer* and *graduated response*. Concern over the use of jargonistic terminology has also been raised elsewhere (Adams et al., 2018).

Parents and carers require improved access to user-friendly information and guidance from external services (Atkinson et al., 2024) to support their autonomy and confidence within the EHC process. Parents and carers often value the support they receive from external services, indeed Anna commented on the “fabulous” (Poem 19, line 36) support she received from local groups and other “parents or advocates sharing their knowledge” (Poem 19, line 38) about the process. She also reflected on the “validation” (Poem 19, line 34) she received from the practitioner from SENDIASS and the “confidence” (Poem 19, line 33) this gave her to advocate for Kaylee.

Anna found training courses particularly helpful in supporting her understanding of her daughter’s needs, but she also reflected on sometimes having to "teach the teachers" (Poem 18, line 35) due to their lack of knowledge of the support Kaylee required in school.

Considering the findings summarised above, I propose the following implications for practice:

- Policy makers and LAs should try to make sure that information about the EHC process and the SEND system is accessible to all families and widely available, for example, by publishing the information online, in a range of languages and in a range of formats.
- LAs should try to consider how best to promote their Local Offer with the intention of increasing its accessibility to more families.
- Practitioners working with families as part of the EHC process, including educational psychologists, caseworkers within EHC teams and SENCos, should try to develop parents’ and carers’ autonomy by providing them with the information and support they need to make informed choices and participate fully in decision making. They should remain informed about resources and services that are locally available so they can signpost

families to further avenues of support, possibly reflecting training needs within the system.

- Education, health and social care services may wish to consider how they can improve access to locally available training for families as well as staff in educational settings to increase their understanding of best practice in supporting children and young people with additional needs.
- In line with recommendations outlined by ISOS Partnership (2024), policy makers and LAs should consider how they can support the development a “skilled and stable workforce” (p. 150), ensuring continuing professional development opportunities for practitioners and considering how to promote recruitment and retention to build capacity across education, health and social care services.

5.6.2 Parents and carers need to feel able to share their lived experiences and valuable knowledge of their child during the EHC process and confident that their views will be valued within the EHC process

Consistent with the narratives shared by parents and carers elsewhere (Adams et al., 2018; Arnold, 2024; Cullen & Lindsay, 2019; Hammond, 2024; Holland & Pell, 2017; Starkie, 2024), Anna and Michael both felt their voices were not always listened to or heard by practitioners leading up to and during the EHC process. Michael shared that his parental views were “discarded” (Poem 9, line 1) and “disregard[ed]” (Poem 8, line 6), which he considered to be “discriminatory” (Poem 8, line 3). He also spoke of his tokenistic involvement in reviewing the draft EHCP: “my comments/ just added in/ hadn’t actioned it all” (Poem 9, lines 15-17). Anna often felt that her views were not validated in meetings. Her concerns relating to Kaylee’s declining mental health and her need for additional support were often dismissed, with school staff insisting, “we don’t see that” (Poem 14, line 88) and “she’s fine in school” (Poem 14, line 9). Anna shared that she sometimes felt practitioners were trying to change her perception of Kaylee’s needs stating that, “she doesn’t need/ to be on’t special needs register” (Poem 14, line 59). The lack of validation from Kaylee’s school was a contributing factor in Anna’s decision to submit a parental request for an EHCNA and possibly contributed towards delays in her eventually obtaining an EHCP.

Both Anna and Michael spoke of their views being dismissed, suggesting that their voices were marginalised and, similarly to parents and carers in Eccleston’s (2016) and Hughes’ (2024) research, perceived as subordinate to those shared by practitioners. From my experience of working with parents and carers, when they are offered time and space within meetings, they often have emotive stories and valuable information to share, which supports practitioners to form a deeper understanding of their child. However, some parents and carers can find it difficult to verbalise their views or may be wary of doing so because of concern about their acceptance by others (Malkin, 2023). It can sometimes be helpful to provide scaffolds to support parents and carers to participate in meetings, with person-centred approaches being noted as one way in which to support individuals to feel “heard, respected, valued and empowered” (Boorman et al., 2025, p. 86).

With this in mind, I suggest the following implications for practice:

- Practitioners within LAs, education, health and social care services, as well as staff within educational settings, should try to listen to the lived experiences of families with empathy, curiosity and compassion.
- Practitioners should try to consider how they can strengthen their partnerships with parents and carers, building trust through increased transparency and effective communication. Those who are interested in exploring models that promote relational practice and systemic change with regards to building relationships with children, young people and parents and carers may wish to refer to the recent publication by Davies et al. (2025).
- Policy makers and LAs should try to consider how to build capacity in the workforce to enable practitioners to adopt a person-centred approach when working with families as part of the EHC process.
- Policy makers and LAs should try to consider the training needs of practitioners to support the embedding of person-centred approaches into practice.
- Gray and Woods (2022) suggest that educational psychologists are well-placed to support the implementation of person-centred practices, a view which is consistent with recent research by Boorman et al. (2025). Exploring the use of person-centred planning (PCP) in EHCP annual reviews, they concluded that educational psychologists played a key role in “providing facilitation, guidance and training to education professionals who [were] seeking to use PCP in annual reviews” (p. 100); therefore, educational psychology services may wish to consider how they can support the implementation of person-centred approaches within their LA.

5.6.3 Parents and carers need to experience trust when working with practitioners as part of the EHC process through effective communication, transparency and supportive relationships

Parents and carers continue to experience a lack of trust in LAs (Keville et al., 2025; Newbery, 2024, Sandiford, 2025), with statutory deadlines and processes not always being adhered to (Arnold, 2024) and communication with parents and carers at times being poor (Local Government and Social Care Ombudsman, 2019). Parents and carers voice their dissatisfaction with the EHC process (Adams et al., 2018), feelings which are echoed by Anna and Michael in this research.

Michael conveys feelings of powerlessness as he navigated the EHC process, with practitioners in LAs holding the power and control over key decisions relating to the

EHCNA, resulting in him experiencing a lack of involvement and communication in such processes: “over to them” (Poem 2, line 1). Michael asserted that you are “left to your own devices” as a parent and used the metaphors “wall of silence” (Poem 2, line 35) and “sea of silence” to describe the obstacles he faced in obtaining updates and information during the process. Similarly, Anna found herself chasing the LA for weekly updates on whether they had agreed a school placement for Kaylee, with a sense of urgency and desperation to get her back into education.

Michael’s lack of trust in the LA is further exemplified by his warning to other parents to “never take on face value/ anything the local authority tell you” (Poem 5, lines 11-12) and, in the battle to obtain an EHCP and additional support, he asserts that, “It’s you versus the state” (Poem 5, line 48). Anna also describes the EHC process as being a “battle” (Poem 16, lines 25, 74 & 79), capturing her relentless fight to obtain support for her daughter. Her use of this metaphor mirrors those shared by parents and carers elsewhere (Arnold, 2024; Cullen & Lindsay, 2019; Keville et al., 2025; Malkin, 2023; Richards, 2024; Sandiford, 2025) who describe fighting to achieve the best possible outcome for their children (ISOS Partnership, 2024).

Michael felt the LA “put up barriers so high” that success in obtaining an EHCP felt “unachievable” (Poem 7, line 21). In particular, Michael refers to his “horrendous” (Poem 6, 21) experiences of mediation in which he felt he was put through the “wringer” (Poem 5, line 14), suggesting that he felt tortured by the process. As a result of the turbulent nature of the mediation session and the perceived unprofessional behaviour of the LA representative, Michael states that his relationship with the LA was then “broken” (Poem 5, line 19).

The *SEND Review* (HM Government, 2022b) found that parents and carers experienced emotional and financial implications when challenging decisions at tribunal. The detrimental impact of the EHC process on parents and carers has also been reported elsewhere (Arnold, 2024; Hughes, 2024; Keville et al., 2025; Sandiford, 2025). Certainly Michael and Anna both described feeling they needed to be proactive in organising and coordinating processes, with Michael having to “push meetings” (Poem 4, line 3) and chase reports from practitioners, and Anna “pulling everyone together” (Poem 17, line 1) in navigating the complexities of submitting parental requests for an EHCNA. Anna stated that “no-one else was gonna do it” (Poem 17, line 32) and Michael asked, “If I had not,/ what?/ No input?” (Poem 4, line 34), both acknowledging their pivotal role in driving the process forwards. Anna emphasised the additional pressure the process placed upon her as a mother who was already “stressed/ looking after an additional needs child” (Poem 17, line 24-25). An additional complication for Anna was the need for her to convert the paper-based EHCNA request she had submitted into an online application. Anna worried that the process was going to create delays in her application (“were gonna take days” (Poem 16, line 34) and was advised by an advocacy service that it was not a legal requirement; however, she felt she had no choice but to be compliant to the LA’s request for fear of jeopardising her application. Michael reflected on the benefits of the online portal, commenting that, “least through the portal/ you could track movements,/ see tasks and names” (Poem 2, lines 15-17). From my experience of working in a LA that has adopted an online EHC portal, I am aware that families do not always have access to a computer and are sometimes reliant on mobile phones. Research has also suggested that there may be a training need with the introduction of any new system to support accessibility to all users, including SENCos, parents and carers.

I feel the implications of the findings outlined above are as follows:

- LAs should try to consider how to build capacity in the workforce to support effective communication and the development of supportive relationships with parents and carers. Having a key point of contact who is available and can provide updates on the EHC process for families would be helpful in building parents’ and carers’ trust.
- Policy makers and LAs should try to acknowledge the additional emotional and financial burdens placed upon parents and carers when they feel forced to challenge decisions at mediation and/or First-tier tribunal. Consideration should be given to whether there are “less adversarial” (ISOS Partnership, 2024, p. 132) alternatives to the current systems and processes that may reduce the detrimental impact of existing structures whilst also retaining the rights of parents and carers to challenge decisions and hold educational settings and LAs to account. To provide a route of redress for all children and young people with additional needs, not just those with an EHCP, ISOS Partnership (2024) suggest the development of *Local Inclusion Partnerships* which would be responsible for managing complaints at a local level. They propose that the partnerships would be formed from representatives across education, health and social care, local Parent Carer Forums and strategic groups for children and young people, and suggest they would have statutory powers to hold education settings and LAs to account where complaints are upheld.
- With regards to the digitalisation of the EHC process, policy makers and LAs should carefully consider the implementation of any new systems, with attention given towards the way in which they are introduced to families and practitioners. They may also wish to consider whether training should be made available to support accessibility for all users (Hammond, 2024). I feel that any digital system will need to be mobile user-friendly to support accessibility to a wider number of families, whilst also providing alternative methods where such technology is not available. Furthermore, LAs should try to make sure that families and practitioners are able to access practical assistance when needed to prevent disadvantage or delays in the EHC process.

- Practitioners who are responsible for coordinating or contributing to the EHC process, including educational psychologists, caseworkers within EHC teams, SENCos and those in health and social care services, should try to ensure their knowledge of local systems and processes is kept up-to-date, accessing training where appropriate to their role.

5.6.4 Parents and carers need to feel their child is at the heart of the EHC process

Michael described the EHC process as being “so cold” (Poem 8, line 14) and not “humanistic” (Poem 8, line 37), sharing his experiences of navigating a system that often appeared lacking in emotion and compassion. Michael perceived the LA to be adopting a policy of “see how they survive/ we’ll intervene if necessary” (Poem 7, lines 6-7), implying that support for children and young people with SEN felt reactive rather than proactive. The *SEND Review* (HM Government, 2022b) proposes that a consequence of failing to intervene early is that needs can “escalate and become entrenched” (p. 12). For Anna’s daughter, intervention at the earliest stages when Anna first raised concerns may have supported her to have more positive experiences of mainstream education.

Anna reflects on the harmful language that was used by educational settings in their consultation responses to the LA when seeking a school place for Kaylee. Whilst Anna acknowledges the need for oversubscribed settings to use a legally justifiable defence to why they were unable to offer her daughter a place at their school, she emphasises the damaging effects of being told that it “would be detrimental to other children/ if your child comes to this school” (Poem 16, lines 65 & 66). This example reiterates the need for practitioners to consider their communication with children, young people and their families and to reflect on how their use of language may be received by others.

Practitioners in education settings, LAs and education, health and social care services have the potential to shape narratives through the way in which they speak and write about children and young people (Billington, 2000). For educational psychologists, this extends to the construction of their psychological advice, which forms part of the EHC needs assessment process (Charleson, 2023).

To support reflective practice, Billington (2000) offered five questions, which practitioners working with families within the EHC process may find helpful to consider in their practice. These have recently been adapted by Whiting and Johnson (2025) to include all groups, including parents and carers:

- How do we speak with children [people]?
- How do we speak of children [people]?
- How do we write of children [people]?
- How do we listen to children [people]?

- How do we listen to ourselves (when working with children [people])? (p. 129)

Regardless of the value and significance of EHCPs to parents and carers (Hammond, 2024; Malkin, 2023), they report disappointment when their child's plan is considered to be too generic and lacks personalisation (Adams et al., 2018). Parents and carers can feel dissatisfied when EHCPs fail to provide an accurate representation of their child's needs or when they contain deficit-based language (Arnold, 2024). The experiences shared in this research were similar, with Michael stating that Thomas' EHCP was "pretty meek, pretty lame" (Poem 9, lines 24-25) and both Anna and Michael reporting that the educational psychologist's report was just "copied and pasted" (Poem 16, line 10) into the plan. Anna also noted the absence of assessment information she perceived to be crucial, such as the "amazing" (Poem 16, line 13) speech and language therapy assessment; however, despite perceiving the draft EHCP to be unacceptable, she did not have "the energy to battle" (Poem 16, line 25) with the LA at that time.

Aside from disappointment in the way in which their child's EHCPs were constructed, Anna and Michael each reflected on the benefits of having a plan for their child. For Anna, it was like "winning the lottery!" (Poem 20, line 3), providing Kaylee with access to a specialist setting where she was supported to have positive experiences of education. Michael reflected on feeling "more secure" (Poem 10, line 21) from knowing he and his wife had a "vehicle" (Poem 10, line 23) to accessing additional support for Thomas, expressing that he was "just relieved he'd got a plan" (Poem, 9, line 10).

In light of the findings above, I consider the implications for practice to be as follows:

- Policy makers and LAs should try to consider how to strengthen early intervention to ensure that children and young people receive the support they require to thrive. This may include training for practitioners in educational settings, LAs and health and social care services to ensure they are confident in identifying and supporting additional needs at the earliest stage.
- Policy makers should try to appreciate the value that families place on EHCPs, listening with empathy and compassion to the lived experiences of parents, carers, children and young people and holding them in mind as they consider future reforms to the SEND system.
- LAs may wish to consider their processes for quality assurance of EHCPs, ensuring that they reflect the statutory requirements outlined in the *SEND Code of Practice: 0-25 years* (DfE & DoH*,* 2015).
- Caseworkers in EHC teams who write plans and practitioners who contribute advice, including educational psychologists, may wish to refer to the five questions proposed by Whiting and Johnson (2025) above,

reflecting on their use of language when working with children, young people and their families as part of the EHC process.

- For the purpose of this thesis, I have adopted the term *special educational needs* as this is the language used currently within government policies and the *SEND Code of Practice: 0-25 years* (DfE & DoH*,* 2015). In the recent workshops held by Bryant and Parish (2025), the potential negative connotations of the term SEND were noted, with “additional needs” or “additional support” (Bryant & Parish, 2025, p. 32) being proposed as alternatives to encompass a broader range of needs and shift away from a deficit-based model. Policy makers may wish to consider the views expressed in these workshops as part of future reforms.

5.7 Possibilities for further research

In this research, constraints of time limited my ability to work more collaboratively with Anna and Michael when constructing and analysing their poems. Further research may wish to explore ways in which narrators can contribute towards the poetic transcription process in order to increase their participation.

Along with others, I feel that arts-based methods, including poetic inquiry, have the potential to be a powerful (Furman, 2007; Lahman et al., 2011; Leavy, 2020) and accessible (Chilton & Leavy, 2014; Leavy, 2020) form of presenting research to a wider audience. Where its intentions are to elicit empathy and understanding, creative methods could be an effective way in which to carry out research (Barone & Eisner, 2012; Leavy, 2015; Leavy, 2020). When I first started my journey into poetic inquiry, I lacked confidence and doubted my skills as a researcher to employ methods which felt unfamiliar and daunting. Those who engage in this type of work may wish to consider the extent to which their methods are clearly outlined to support future researchers to explore such approaches in their own work.

From my review of the existing literature, it appears that the exploration of children and young people’s experiences of having an EHCP or contributing towards the EHC process is an under-researched area. In light of the fact that children and young people are not always supported to effectively contribute their views as part of the EHC process (Adams et al., 2017; Adams et al., 2018), research may wish to focus on how to increase their involvement. The research published by RIP:STARS (2018) acknowledged that further work was needed around developing creative, person-centred and flexible approaches to support children and young people to contribute their views. Hickey-Moody et al. (2021) claim that arts-based methods “present opportunities to engage with [children’s] emotions, experiences, hopes, plans and pleasures, which may be hidden just below the surface of their usual interactions” (p. 128). Considering the potential for arts-based research to support children and young people to “communicate their experiences and world views beyond their verbal capability” (Hickey-Moody et al., 2021, p. 129), further research may wish to explore the application of creative methods, such as poetry, to the EHC process.

5.8 Final reflections

I remain disappointed with the fact that I was not able to work more collaboratively with Anna and Michael in this research as I feel their feedback would have strengthened my understanding of their experiences and added greater depth to my analysis. I do, however, plan to reach out to them both to notify them that the thesis is now complete and that it will be available to access on White Rose eTheses Online.

I intend to share my research with my colleagues in the educational psychology service in which I am employed, and I also hope to extend this offer to other services within the LA who work with parents and carers as part of the EHC process. Furthermore, I would like to explore the possibilities for using arts-based methods in my practice when working with parents, carers, children and young people to increase collaboration and support them to share their lived experiences.

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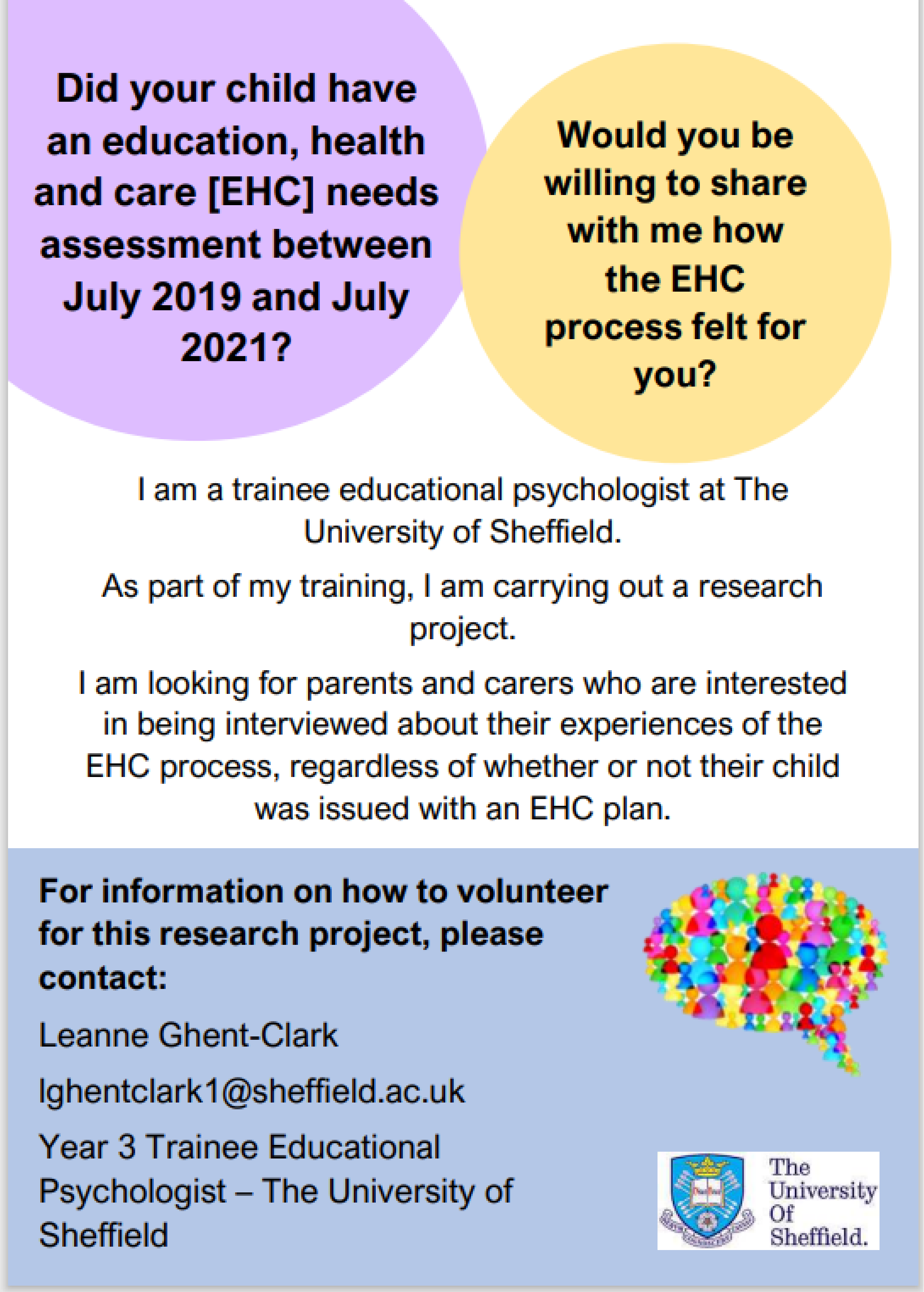
APPENDICES

Appendix A: Recruitment poster



Did your child have an education, health and care [EHC] needs assessment between July 2019 and July 2021?

Would you be willing to share with me how the EHC process felt for you?

I am a trainee educational psychologist at The University of Sheffield.

As part of my training, I am carrying out a research project.

I am looking for parents and carers who are interested in being interviewed about their experiences of the EHC process, regardless of whether or not their child was issued with an EHC plan.

For information on how to volunteer for this research project, please contact:

Leanne Ghent-Clark

lghentclark1@sheffield.ac.uk

Year 3 Trainee Educational Psychologist – The University of Sheffield

Appendix B : Participant information sheet

Participant Information Sheet

Research exploring parents' and carers' experiences of the education, health and care needs assessment and planning process

I am looking for volunteers to take part in my research project which aims to explore parents' and carers' experiences of the education, health and care (EHC) needs assessment and planning process.

I am using the term "**EHC needs assessment and planning process**" to mean the following:

> The process where the local authority carries out an EHC needs assessment for a child or young person, following which they either:
>
> a) decide not to issue an EHC plan OR
>
> b) draft and issue an EHC plan (the planning stage).

I am interested in hearing from parents and carers whose child had an EHC needs assessment between July 2019 and July 2021, regardless of whether an EHC plan was issued when the needs assessment period ended. Volunteers would need to be over 18 years old and have parental responsibility for the child or young person.

Unfortunately, I am unable to accept volunteers where the EHC needs assessment and planning process for their child is not yet complete, or where decisions relating to mediation or tribunal appeals have not yet been reached.

Before deciding whether to volunteer for this research project, it is important that you fully understand why this research is being carried out and what your role as a participant would involve. Please read the following information carefully and, where appropriate, seek support from other people, for example, friends and relatives, to help you make an informed decision about whether to volunteer.

If, after reading the information below, you have any questions, please seek further guidance by emailing: lghentclark1@sheffield.ac.uk

What is the purpose of this research project?

My name is Leanne Ghent-Clark and I am a trainee educational psychologist studying at The University of Sheffield. I am also currently on placement at a local authority educational psychology service within the Yorkshire and Humberside region.

This research project is being carried out to fulfil the requirements of my doctoral training in educational and child psychology and aims to listen to the stories that parents and carers tell about their experiences of the EHC needs assessment and planning process.

Who is organising and funding the research?

This research has been organised through The University of Sheffield. It has not been commissioned by the local authority, nor will the findings of this research directly influence local authority policy or practice. Whilst there are no immediate benefits for the local authority or for those taking part in this research, it is hoped the findings will support professionals who work within the EHC needs assessment and planning process to consider the perspectives and experiences of parents and carers.

Do I have to take part?

You do not have to take part in the research and, should you wish to volunteer, you have the right to remove yourself from the project at any point leading up to or during the interview. You do not have to give a reason and you will not face any negative consequences.

What would the research involve?

If you volunteer, you would be asked to take part in an individual interview aiming to last no longer than an hour and a half. During the interview, I will ask you to talk about your thoughts, feelings and experiences of the EHC needs assessment and planning process. Due to the COVID-19 pandemic, these interviews will take place using video technology, such as Google Meet; however, if you are unable to access video technology we can discuss the option of a face-to-face interview in a private room at a local community building. Where face-to-face interviews are deemed necessary in order for you to take part, we will be following the latest government advice in order to minimise any risks associated with COVID-19. Separate guidance will be provided prior to any face-to-face meetings.

The interviews will be audio recorded, which means that our voices will be taped; however, no video recordings will be made. I will use the audio recordings to make transcripts of our conversation - this means I will type up everything we say during the interview.

You will be given the opportunity to read the transcript of your interview and decide how your data is used, for example, you will be able to state whether there are sections of the transcript you wish to be removed before it is analysed. Your real name will not be used in the transcript; instead, you will be given a pseudonym (a false name) to help protect your identity.

Using the transcript, I will pick out key words and phrases that appear to be important to your story and will use these to create a poem. You will be given the opportunity to provide feedback and be involved in the writing of your poem if you wish to do so.

You have the right to ask for your data to be removed from the research project for a period of two weeks following the poem being shared with you. I will ensure you are made aware of the final date for requesting the removal of your data.

How will my data be used?

Once the research project is complete, the transcript of your interview and the poem created will be included in a written report called a thesis. You will not be referred to by name within any research outputs and a pseudonym will always be used to protect your identity. Once finalised, the thesis will be publicly available on a website called White Rose eTheses Online (WReO). You will also be asked whether you would like to directly receive an emailed copy of the final thesis.

I will be aiming to present the findings of the research project to other trainees at The University of Sheffield and also to professionals who have an interest in the research, including those who may work for the local authority. You should also be aware that the thesis will be publicly available to other researchers who may wish to use the data presented in their own research outputs, for example re-quoting words or phrases from the poems or interview transcripts.

How will my data be protected?

Any personal data (name, email address, telephone number etc.) collected throughout the research project will be kept strictly confidential and will only be accessible to myself as the lead researcher. Pseudonyms will always be used to protect your identity and your name will not be mentioned in the final thesis or in any subsequent publications. Any data collected will be stored securely on my University of Sheffield Uni Drive. All data relating to individual participants will be deleted within one month of the research project being completed.

There are some circumstances under which confidentiality will be breached, for example, where there are concerns relating to the safety of yourself or others. Any safeguarding concerns will be handled in line with the University's Preventing Harm in Research and Innovation (Safeguarding) Policy: https://www.sheffield.ac.uk/rs/ethicsandintegrity/safeguarding.

What are the potential risks of taking part?

Even though steps will be taken to protect your identity and that of your child throughout the research process, there is still a possibility that those reading the thesis could identify you both from the interview transcript or the poem we create. We will work together to identify any details you wish to be removed from the interview transcript in order to protect the identity of you and your child.

You may have experienced strong emotions in relation to your experience of the EHC needs assessment and planning process; therefore, it is possible that talking about your experience may lead to feelings of discomfort or distress. You will be able to stop the interview at any time and you will also be given the opportunity to attend a debrief with myself where you will be able to discuss any difficult feelings raised by the research. Before you volunteer for this research please think carefully about whether you feel comfortable taking part.

How do I volunteer to take part?

If you wish to volunteer for this research project, please contact me via the following email address: lghentclark1@sheffield.ac.uk. I will then send you a consent form that you will need to sign and return in order to confirm that you wish to be considered as a participant.

Participants will be selected in the order they return their signed consent forms. Once the maximum number of participants has been reached, remaining participants will be placed onto a waiting list. If you are chosen to take part, you will be contacted to arrange a suitable time for a follow-up discussion.

How should I report any safeguarding concerns?

If you wish to make a report of a concern or incident relating to potential exploitation, abuse or harm resulting from your involvement in this project, please contact the project's Designated Safeguarding Contact: Claire Whiting (ed4cmw@sheffield.ac.uk).

If the concern or incident relates to the Designated Safeguarding Contact, or if you feel a report you have made to this contact has not been handled in a satisfactory way, please contact the Head of the School of Education, Rebecca Lawthom (r.lawthom@sheffield.ac.uk) and/or the University's Research Ethics & Integrity Manager, Lindsay Unwin (l.v.unwin@sheffield.ac.uk).

What is the legal basis for processing my personal data?

According to data protection legislation, we are required to inform you that the legal basis we are applying in order to process your personal data is that 'processing is necessary for the performance of a task carried out in the public interest' (Article 6(1)(e)). Further information can be found in the University's Privacy Notice https://www.sheffield.ac.uk/govern/data-protection/privacy/general.

Who is the Data Controller?

The University of Sheffield will act as the Data Controller for this study. This means that the University is responsible for looking after your information and using it properly.

Who has ethically reviewed the project?

This project has been ethically approved via the University of Sheffield's Ethics Review Procedure, as administered by the School of Education.

What if something goes wrong and I wish to complain about the research?

If you are dissatisfied with any aspect of the research and wish to raise a complaint, please contact myself as the lead researcher in the first instance: Leanne Ghent-Clark (lghentclark1@sheffield.ac.uk)

If you feel your complaint has not been handled to your satisfaction, you can contact the project supervisor: Claire Whiting (ed4cmw@sheffield.ac.uk)

If your complaint relates to how your personal data has been handled, you can find information on how to raise a complaint in the University of Sheffield's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general

Contact details for further information about this research project:

lghentclark1@sheffield.ac.uk (Leanne Ghent-Clark, Lead Researcher, University of Sheffield)

ed4cmw@sheffield.ac.uk (Claire Whiting, Project Supervisor, University of Sheffield)

If you would like to express interest in taking part in this research, please contact me via email: lghentclark1@sheffield.ac.uk

Please keep a copy of this information sheet for your future reference.

Thank you for taking the time to read this information.

Leanne Ghent-Clark

Year 3 Trainee Educational Psychologist

The University of Sheffield

Appendix C: Participant consent form

Participant Consent Form

Research exploring parents’ and carers’ experiences of the education, health and care (EHC) needs assessment and planning process

Please tick ‘Yes’ or ‘No’ for each statement below	Yes	No
Taking part in the research project		
I have read and understood the research project information sheet and my role in the research project has been fully explained to me. (If you answer ‘**No’** to this question, please do not proceed with this consent form. Please contact the lead researcher, Leanne Ghent-Clark, to obtain further information regarding your involvement in the research project.)		
I have been given the opportunity to ask questions about the research project and feel my questions have been answered.		
I agree to take part in the research project.		
I understand that volunteering in this research will involve participating in an interview with the lead researcher where I will be asked questions about my experiences of the EHC needs assessment and planning process.		
I understand that taking part in this research project is voluntary and I can choose not to participate in the interview, with or without notice, at any time. I understand that I do not have to give reasons for removing myself from the interviews and there will be no adverse consequences should I wish to do so.		
I understand that choosing to participate as a volunteer in this research does not create a legally binding agreement, nor is it intended to create an employment relationship with The University of Sheffield.		
How information will be used during and after the project		
I understand that the research interview will be audio recorded and I give permission for anonymised (where personal details are removed) transcripts of the interview to be produced by the lead researcher. I understand that these transcripts will be anonymised through the use of a pseudonym (a false name) that will be agreed with the researcher prior to the research interview.		
I understand that the anonymised version of my interview transcript will be included in the final research report.		
I understand that I will be given the opportunity to view my interview transcript and remove any sections I do not wish to be included in the final research report.		
I understand that a poem will be created using words and phrases from my interview transcript and this will be included in the final research report.		

I understand that I will be given the opportunity to edit the poem created from my interview transcript before it is included in the final research project.		
I understand that I am able to ask for my data to be removed from the research project up until two weeks after the poem has been created. I understand there will be no adverse consequences should I wish to withdraw my data.		
I understand that the audio recording of my interview, the anonymised interview transcript and the poem will be stored securely on the lead researcher's University of Sheffield Uni Drive account until the project is completed following which they will be deleted.		
I understand that my personal details, such as my name and contact details, will be stored safely by the lead researcher in line with the university's data protection policy and will only be available to those who need access to the details in order to protect the safety of the lead researcher and myself or where a safeguarding concern has been raised.		
I give permission for my contact details (name, telephone number, email and the address where appropriate) to be stored safely by the lead researcher on her University of Sheffield Uni Drive account until the final research report is complete after which time they will be deleted.		
I understand that words and phrases taken from my interview transcript and poem may be re-quoted in publications, reports and other research outputs by the research team. I understand that I will not be named in these outputs.		
I understand that the final research report containing the anonymised transcript of my interview and the poem created will be published on White Rose eTheses Online so it can be used for future research and learning.		
I am aware that other researchers will have access to the anonymised transcript of my interview and the poem created by the lead researcher as these will be included in the final published research report.		
I understand that other researchers may use my anonymised interview transcript and the poem created by the lead researcher within their own publications, reports, web pages and other research outputs.		
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this research project to The University of Sheffield.		

Participant's full name (printed): _______________

Participant's signature (printed): _______________

Date: ______

Contact details for further information about this research project:

Leanne Ghent-Clark - Lead Researcher:
lghentclark1@sheffield.ac.uk (Trainee Educational Psychologist)

Claire Whiting - Project Supervisor:

ed4cmw@sheffield.ac.uk (Project Supervisor)

Contact details for making a complaint about this research project:

If you are dissatisfied with any aspect of the research and wish to raise a complaint, please contact myself as the lead researcher in the first instance: Leanne Ghent-Clark (lghentclark1@sheffield.ac.uk)

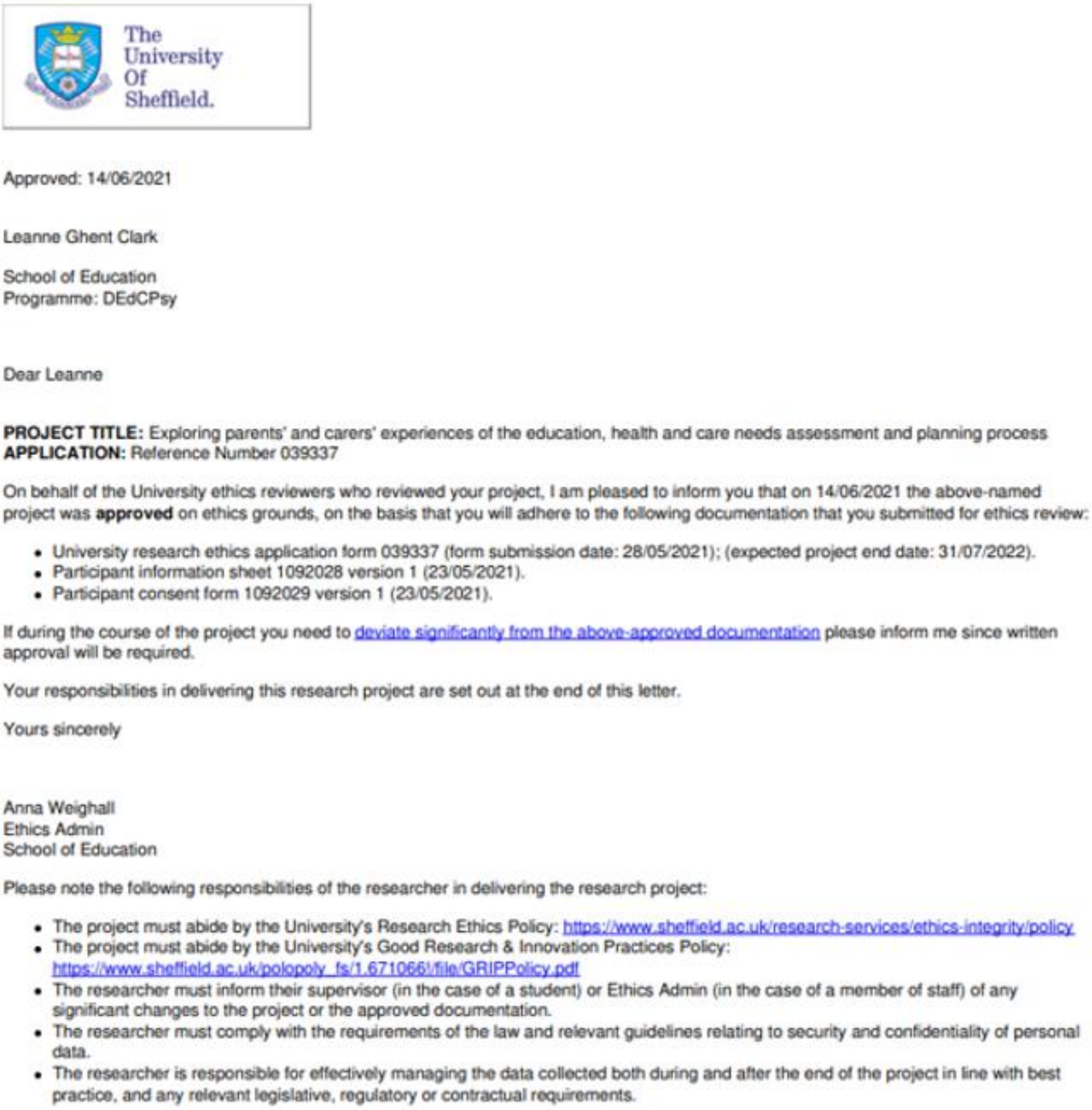
If you feel your complaint has not been handled to your satisfaction, you can contact the Project Supervisor: Claire Whiting (ed4cmw@sheffield.ac.uk)

If your complaint relates to how your personal data has been handled, you can find information on how to raise a complaint in the University of Sheffield's Privacy Notice: https://www.sheffield.ac.uk/govern/data-protection/privacy/general

Contact details for raising a safeguarding concern in relation to this research project:

Designated Safeguarding Contact: Claire Whiting (ed4cmw@sheffield.ac.uk).
Head of the School of Education: Rebecca Lawthom (r.lawthom@sheffield.ac.uk)
University's Research Ethics & Integrity Manager: Lindsay Unwin (l.v.unwin@sheffield.ac.uk).

Appendix D: Ethical approval letter



The University Of Sheffield.

Approved: 14/06/2021

Leanne Ghent Clark

School of Education
Programme: DEdCPsy

Dear Leanne

PROJECT TITLE: Exploring parents' and carers' experiences of the education, health and care needs assessment and planning process
APPLICATION: Reference Number 039337

On behalf of the University ethics reviewers who reviewed your project, I am pleased to inform you that on 14/06/2021 the above-named project was **approved** on ethics grounds, on the basis that you will adhere to the following documentation that you submitted for ethics review:

- University research ethics application form 039337 (form submission date: 28/05/2021); (expected project end date: 31/07/2022).
- Participant information sheet 1092028 version 1 (23/05/2021).
- Participant consent form 1092029 version 1 (23/05/2021).

If during the course of the project you need to deviate significantly from the above-approved documentation please inform me since written approval will be required.

Your responsibilities in delivering this research project are set out at the end of this letter.

Yours sincerely

Anna Weighall
Ethics Admin
School of Education

Please note the following responsibilities of the researcher in delivering the research project:

- The project must abide by the University's Research Ethics Policy: https://www.sheffield.ac.uk/research-services/ethics-integrity/policy
- The project must abide by the University's Good Research & Innovation Practices Policy: https://www.sheffield.ac.uk/polopoly_fs/1.671066!/file/GRIPPolicy.pdf
- The researcher must inform their supervisor (in the case of a student) or Ethics Admin (in the case of a member of staff) of any significant changes to the project or the approved documentation.
- The researcher must comply with the requirements of the law and relevant guidelines relating to security and confidentiality of personal data.
- The researcher is responsible for effectively managing the data collected both during and after the end of the project in line with best practice, and any relevant legislative, regulatory or contractual requirements.

Appendix E: Pilot study to main study consent form

Participant Consent Form
Consent to use data from pilot study in the main study
Research exploring parents' and carers' experiences of the education, health and care (EHC) needs assessment and planning process

Please tick 'Yes' or 'No' for each statement below	Yes	No
Taking part in the research project		
I have read and understood the research project information sheet and my role in the research project has been fully explained to me. (If you answer '**No'** to this question, please do not proceed with this consent form. Please contact the lead researcher, Leanne Ghent-Clark, to obtain further information regarding your involvement in the research project.)		
I have been given the opportunity to ask questions about the research project and feel my questions have been answered.		
I agree for my pilot interview data to be considered for use in the main study.		
I understand that taking part in this research project is voluntary and I do not have to consent to the lead researcher using data from my pilot study within the main study.		
I understand that choosing to participate further in this research does not create a legally binding agreement, nor is it intended to create an employment relationship with The University of Sheffield.		
How information will be used during and after the project		
I give permission for anonymised (where personal details are removed) transcripts of my pilot study interview to be produced by the lead researcher. I understand that these transcripts will be anonymised through the use of a pseudonym (a false name).		
I understand that the anonymised version of my interview transcript will be included in the final research report.		
I understand that I will be given the opportunity to view my interview transcript and remove any sections I do not wish to be included in the final research report.		
I understand that a poem will be created using words and phrases from my interview transcript and this will be included in the final research report.		
I understand that I will be given the opportunity to edit the poem created from my interview transcript before it is included in the final research project.		
I understand that I am able to ask for my data to be removed from the research project up until two weeks after the poem has been created. I understand there will be no adverse consequences should I wish to withdraw my data.		

I understand that the audio recording of my interview, the anonymised interview transcript and the poem will be stored securely on the lead researcher's University of Sheffield Uni Drive account until the project is completed following which they will be deleted.		
I understand that my personal details, such as my name and contact details, will be stored safely by the lead researcher in line with the university's data protection policy and will only be available to those who need access to the details in order to protect the safety of the lead researcher and myself or where a safeguarding concern has been raised.		
I give permission for my contact details (name, telephone number, email and the address where appropriate) to be stored safely by the lead researcher on her University of Sheffield Uni Drive account until the final research report is complete after which time they will be deleted.		
I understand that words and phrases taken from my interview transcript and poem may be re-quoted in publications, reports and other research outputs by the research team. I understand that I will not be named in these outputs.		
I understand that the final research report containing the anonymised transcript of my interview and the poem created will be published on White Rose eTheses Online so it can be used for future research and learning.		
I am aware that other researchers will have access to the anonymised transcript of my interview and the poem created by the lead researcher as these will be included in the final published research report.		
I understand that other researchers may use my anonymised interview transcript and the poem created by the lead researcher within their own publications, reports, web pages and other research outputs.		
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this research project to The University of Sheffield.		

Participant's full name (printed): ______________________________

Participant's signature (printed): ______________________________

Date: ______________

Contact details for further information about this research project:

Leanne Ghent-Clark - Lead Researcher:
lghentclark1@sheffield.ac.uk (Trainee Educational Psychologist)

Claire Whiting - Project Supervisor:

ed4cmw@sheffield.ac.uk (Project Supervisor)

Contact details for making a complaint about this research project:

If you are dissatisfied with any aspect of the research and wish to raise a complaint, please contact myself as the lead researcher in the first instance: Leanne Ghent-Clark (lghentclark1@sheffield.ac.uk)

If you feel your complaint has not been handled to your satisfaction, you can contact the Project Supervisor: Claire Whiting (ed4cmw@sheffield.ac.uk)

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Contact details for raising a safeguarding concern in relation to this research project:

Designated Safeguarding Contact: Claire Whiting (ed4cmw@sheffield.ac.uk).
Head of the School of Education: Rebecca Lawthom (r.lawthom@sheffield.ac.uk)
University's Research Ethics & Integrity Manager: Lindsay Unwin (l.v.unwin@sheffield.ac.uk).

Appendix F: Pilot study consent form

Participant Consent Form: Pilot Study
Research exploring parents' and carers' experiences of the education, health and care (EHC) needs assessment and planning process

Please tick 'Yes' or 'No' for each statement below	**Yes**	**No**
Taking part in the pilot study for the research project		
I have read and understood the pilot study information sheet and my role in this part of the research project has been fully explained to me. (If you answer '**No'** to this question, please do not proceed with this consent form. Please contact the lead researcher, Leanne Ghent-Clark, to obtain further information regarding your involvement in the research project.)		
I have been given the opportunity to ask questions about the pilot study and the research project and feel my questions have been answered.		
I agree to take part in the pilot study for this research project.		
I understand that volunteering in this pilot study will involve participating in an interview with the lead researcher where I will be asked questions about my experiences of the EHC needs assessment and planning process.		
I understand that the interview will be audio recorded to allow the lead researcher to listen to it at a later date during the research process.		
I understand that, after the pilot study, I may be asked questions about my experiences of the interview and that any feedback I share with the researcher could be included in the final research report.		
I understand that the lead researcher's reflections of her experiences of carrying out my interview may also be included in the final research report.		
I understand that taking part in this research project is voluntary and I can choose not to participate in the interview, with or without notice, at any time. I understand that I do not have to give reasons for removing myself from the interviews and there will be no adverse consequences should I wish to do so.		
I understand that choosing to participate as a volunteer in this research does not create a legally binding agreement, nor is it intended to create an employment relationship with The University of Sheffield.		
How information will be used during and after the pilot study		
I understand that any personal details I provide, such as my name and contact details, will be stored safely by the lead researcher in line with the university's data protection policy and will only be available to those who need access to the details in order to protect the safety of the lead researcher and myself or where a safeguarding concern has been raised.		

I am aware that my personal details will be stored safely until the research project is completed and then they will be deleted.		
I understand that the audio recordings of my interview will be stored on the lead researcher's University of Sheffield Uni Drive account and will only be available to the lead researcher. I am aware that the audio recordings will be deleted after the research project has ended.		
I understand that the reflections of the research interview I share with the lead researcher may be used in future publications, reports and other research outputs by the research team. I understand that I will not be named in these outputs.		
I understand that the final research report will be publicly available as it will be published on White Rose eTheses Online. This is so it can be used for future research and learning.		
I understand that other researchers may use data from the final research report in their own publications, reports, web pages and other research outputs.		
I understand that I am able to ask for my reflections of the pilot study to be removed from the research project for a period of four weeks following my interview. I understand there will be no adverse consequences should I wish to withdraw my data.		
So that the information you provide can be used legally by the researchers		
I agree to assign the copyright I hold in any materials generated as part of this research project to The University of Sheffield.		
Possible further involvement in the research project		
I understand that, with my permission, it may be possible for the recordings of my interview to be used in the final research report instead of just the pilot study. I understand that, if this was possible, I would need to give the lead researcher permission for this to happen and would be asked to sign a separate consent form.		

Participant's full name (printed): ______________________________

Participant's signature (printed): ______________________________

Date: ______________

Contact details for further information about this research project:

Leanne Ghent-Clark - Lead Researcher:
lghentclark1@sheffield.ac.uk (Trainee Educational Psychologist)

Claire Whiting - Project Supervisor:

ed4cmw@sheffield.ac.uk (Project Supervisor)

Contact details for making a complaint about this research project:

If you are dissatisfied with any aspect of the research and wish to raise a complaint, please contact myself as the lead researcher in the first instance: Leanne Ghent-Clark (lghentclark1@sheffield.ac.uk)

If you feel your complaint has not been handled to your satisfaction, you can contact the Project Supervisor: Claire Whiting (ed4cmw@sheffield.ac.uk)

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Contact details for raising a safeguarding concern in relation to this research project:

Designated Safeguarding Contact: Claire Whiting (ed4cmw@sheffield.ac.uk).
Head of the School of Education: Rebecca Lawthom (r.lawthom@sheffield.ac.uk)
University's Research Ethics & Integrity Manager: Lindsay Unwin (l.v.unwin@sheffield.ac.uk).

Appendix G: Michael’s interview transcript

Speaker	Part	Strophe	Stanza	Transcript	Line	Comments
LEANNE:				Okay So I'm just going to ask the broad question now Michael and then it’s over to you really So in your own words then please can you tell me about your experiences of the education health and care needs assessment and planning process include as much detail as you feel comfortable		Opening question NOTE: Michael and Thomas are pseudonyms Orange: Words or phrases that stand out Purple: How things are said Blue: Idioms/ metaphors/ similes/ visual imagery Yellow: Repeated phrases Green: Psychological subject - I/ me/ you/ he/ she/ they/ them Red: Descriptions of self/ identity Turquoise: Emotive language Pink: Emotions
MICHAEL:	**Introduction:** Introducing Thomas			Okay	1a-f	States that he is sharing a “story” about **Thomas**, but the question asked about **his** experiences as a parent - is this because the two are intertwined together within the EHC process?
				alright		
				perfect		
				alright		
				erm so yeah		
				so this is a story about Thomas erm		

				and I don't mind sharing to be honest with you	2a-b	Thomas: subject
				I'll give you a visual reference of Thomas		
				so err	3a-d	Shows me a photograph of Thomas to introduce me to him - later talks about this being a “trick” he uses to add a human element
				I'm just going to share my screen for a minute		
				so err		
				this is Thomas		
				so err this is about a year	4a-g	
				this is about two years ago actually now		
LEANNE:				Ah lovely		
MICHAEL:				so err		redacted description of Thomas
				but yes		
				[redacted]		
				so err [chuckling]		
				so there you go		
LEANNE:				That’s a lovely picture		
MICHAEL:	**Part 1:** Applying for EHC plan following diagnosis: being	**Strophe 1:** Diagnosis: shell-shocked	**Stanza 1:** New diagnosis for the family	So yeah	5a-e	us: Michael, his wife and his son? Shared experiences?
				erm		
				right		
				so basically everything started for us		
				ironically just before lockdown		
				erm	6a-c	we: Michael and his wife - and his son?
				we had been on the pathway with paediatrics		

	turned down			err for a long time		
				err and we finally got a diagnosis of ASD and LD	7a-b	“finally”: sense of relief/ waiting a long time
				erm		
				and as a family	8a-d	“all very new”: Unfamiliar
				we've never kind of had anybody before with any of these kinds of disabilities or anything		
				so it was like all very new an’		
				erm you know		
			Stanza 2: Shell-shocked/ lockdown	we finally had that meeting [inaudible]	9a-f	we: collective experience - Michael and his wife “shell-shocked”: Shocked, confused, anxious, unable to think or act normally
				coming out of that we were kinda shell-shocked		
				and then obviously we went into lockdown		“ obviously”: Obvious because I had also experienced that? paralysis: nothing moving “lockdown”: reference to the COVID-19 pandemic “not really anybody around to talk to”: On their own?
				and obviously the whole country went to some kinda paralysis right		
				erm on top of this information we'd received		
				and not really anybody around to talk to at all at that point in time		
			Stanza 3: Needing to prepare for school	so erm	10a-f	“gathered our thoughts”: Thought about what to do or how to act before doing so Pathway seen as being part of the preparation for school
				once we kind of gathered our thoughts and started to think		
				look into things		
				we said		
				right okay		
				we we need to get prepared for him going to school right		

				[redacted]	11a-b	Personal details redacted
				err but we thought right we'd better start this pathway now		
		Strophe 2: Application for an EHCP	**Stanza 4:** Finding out how to apply for an EHCP	so by then we'd researched a little bit about EHCP we'd	12a-e	"could at least tell you what it meant": Had very little information about EHCPs we: Michael and his wife
				we could at least tell you what it meant		
				kind of the letters of the acronym		
				erm		
				but not much more than that		
				so to be honest with you	13a-c	"fairly blind on the topic": Unknowing, unaware, uninformed "no support": Lack of support becomes a theme throughout
				so we started off fairly blind on the topic		
				'cause we had really no support at that point in time		
				erm	14a-j	"straightforward": links to below phrase - does Michael feel there was some naivety to this perspective at the time? "surely": expected/ confident/ surprised if this wasn't the case? "simple": does this link to later frustration when this didn't happen?
				an' we just did the very straightforward thing		
				of thinking		
				well you know		
				he's been diagnosed right		
				so now they		
				you know		
				surely you know		
				they will do an assessment to understand what his needs are right		
				it's as simple as that		
				an' we were told	15a-e	

				oh you can just apply for an assessment at any time		"an' that's what we did right": Significant rise in pitch across the line
				erm you know		
				all you need to do is drop an email to the local authority requesting one		
				an' that's what we did right		
LEANNE:				Yeah		
MICHAEL:			**Stanza 5:** Application turned down	erm	16a-h	"this diagnosis, that diagnosis": Listing Thomas' needs to justify reasons for EHC needs assessment request? we/us: Michael and his wife
				an' we put together a very short letter just explaining		
				you know		
				he's got this diagnosis		
				that diagnosis		
				an' you know		
				asking them to assess his needs		
				erm		
				an' they basically you know	17a-d	they: The LA? "basically": Describing in a simple way "straight away: without thought?
				they just turned us down straight away you know		
				within the statutory time frame		
				err		
				and we were like	18a-h	Hesitation: disbelief "Right?": disbelief "already diagnosed": Belief that the diagnosis would lead to an EHC needs assessment - he has additional needs Third party - not "my child", "the child": is this to
				right		
				but you know		
				we were kind of like		
				but he' he' he's got additional needs right		
				so you know		
				you've already diagnosed the the child right		
				so erm		

						do with emotional detachment?
	Part 2: Greater understanding/ learning and finding things out	**Strophe 3:** Finding things out for the first time	**Stanza 6:** Learning on their feet/ finding out the hard way	so then basically we kind of understood a bit more about this all this graduated response and evidence-base	19a-c	Why does he say it in this way? we: Michael and his wife
				we started we were learning on our feet to be honest with you and we were finding out really as we go erm	20a-d	Twist on the idiom “thinking on your feet”: to have to learn quickly or without planning “as we go”: learning as they went through the process - no opportunity to plan ahead
LEANNE:				Yeah		
MICHAEL:				the hard way I would say basically at that point in time	21a-b	Difficult process of learning “at that point in time” - did this change later?
LEANNE:				Mmm		
MICHAEL:			**Stanza 7:** Hearing about SENDIASS/ the local offer	so erm that's when we got	22a-n	“first time”: New information we/us: Michael and his wife

Appendix H: Anna's interview transcript

Speaker	Part	Strophe	Stanza	Transcript	Lines	Comments
LEANNE:				Okay So, in your own words Anna can you please tell me about your experiences of the education, health and care needs assessment and planning process And you can include as much detail or as little as you feel comfortable		Opening question to elicit the narrative NOTE: Anna and Kaylee are pseudonyms Orange: Words or phrases that stand out Purple: How things are said Blue: Idioms/ metaphors/ similes/ visual imagery Yellow: Repeated phrases Green: Psychological subject - I/ me/ you/ he/ she/ they/ them Red: Descriptions of self/ identity Turquoise: Emotive language
ANNA:	1: Towards a	1: Not sure what the	1: The first anxiety attack	Yeh erm	1a-c	
				I can begin right at the beginning		
				I think that's the best thing		
				so erm Kaylee was struggling	2a-e	Year 4:

	diagnosis	problem was		in year four		The start of parents being aware Kaylee was finding it difficult at school
				and we only knew because the erm		
				year four teachers erm		
				told us that erm		
				in year four	3a-g	anxiety attack: fear, panic, response to threat (from exam paper)
				she was given a year six SATs paper		
				and apparently it was very er common for the top table to erm		
				the high achievers to erm		
				do er SATs papers in year four		
				it was a nor- normal practice for them to do		
				and that was the first time she’d suffered an anxiety attack		
				so erm the teachers to-	4a-d	froze: freeze response to the perceived threats of assessments
				informed us at parents' evening		
				that she just froze		
				and she couldn't write anything in that assessment		
				so err they said	5a-i	we're not sure: Parents unaware of underlying cause of anxiety so surprising to us: new, not happened before top set/ always had friends: trying to locate the source of the anxiety?
				we're not sure what the problem is do you		
				and we-		
				it was just err		
				so surprising to us		
				because she'd always you know		
				been on the top set		
				she's always had friends		
				and we definitely didn't know what the problem was		
			2: Not thinking anything of Kaylee’s behaviour	we err	6a-j	spirited: enthusiastic, energised, lively over excited/ really loud: suggests difficulties with
				we knew sometimes she was a bit spirited		
				so err		
				she used to get you know like		
				over excited sometimes		

				[Redacted]		controlling excitement or volume when speaking
				whereas sometimes she used to err		
				get over excited		
				and err		
				really loud sometimes		
				[Redacted]	7a-c	normal/ didn't think anything of it: suggests no concern around behaviour T that time
				but we thought that was normal for younger sisters		
				err didn't think anything of it		
			3: Dyslexia assessment	and then we said well ma-	8a-d	possibly: wondering about what had caused the anxiety attack
				she's possibly got dyslexia		
				let's err		
				let's have a look at that		
				and we asked the school if they did assessments	9a-g	onus: responsibility on parents to find an assessment
				no they didn't do them anymore		
				it was ya know		
				handed over to private err		
				it was outsourced the par-		
				the onus was on the parents to do it		
				okay fine		
				so we booked in at the XX [assessment centre] in XXX [location]	10a-f	
				had her assessed		
				that was in		
				I don't know		
				within a couple of months later		
				so more or less immediately had her assessed		
				and they said yeah	11a-e	something happening : suggests some
				she's got erm		
				she's not got dyslexia traits as stuff er as such		

				but she's got something happening with her processing		uncertainty or unsure what exactly is happening
				and they couldn't point out what it was		
		2: Overnight extreme behaviour	4: Meltdowns and panic attacks	so during that couple of months of her seeing	12a-g	don't like using the the the term school refusal: doesn't explain her reasons meltdowns/panic attacks: overwhelmed, loss of control over emotions not being able to: loss of control over actions
				being seen at the XX [assessment centre]		
				she started erm		
				I don't like using the the the term school refusal		
				but she started having erm meltdowns		
				panic attacks		
				an' not being able to go to school		
				erm	13a-g	just overnight : sudden, unexpected extreme: high levels of emotion so regular and common: happening all the time - a pattern?
				to the point where it was just overnight		
				an' so extreme		
				where she was like erm		
				it it was so regular and common every morning		
				she was like in a fetal position		
				on the floor in the bedroom		
				so she'd gone from being a high flyer	14a-f	high flyer: successful, able to achieve (at school) wow: shock/ surprise what what is this [chuckles]: unknown, surprised, shocked extreme: Repetition for emphasis?
				to doing this overnight immediately		
				an' we were just like wow		
				what what is this [chuckles]		
LEANNE:				Yeah		
ANNA:				it was err		
				extreme behaviour		
			5: OCD traits and rituals	and then she had OCD traits	15a-d	overnight: repeated - for emphasis?
				so she was doing rituals in a morning		
				and again from not doing it		

				to overnight doing these controlling rituals		controlling rituals: power, taking away choice, limiting
				her hair had to be perfect erm and she'd spend absolute hours to the point where I was worried that 'er hair were gonna fall out because she was doing it that much	16a-e	perfect: faultless worried: concerned about the impact that much: excessive
				and erm so erm I can't remember whether we went to the GP or school referred erm her to CAMHS I don't think the school was really involved it was us going to the GP and saying this is happening erm it's mental health can you help us with it	17a-i	I don't think the school was really involved/ us going to the GP: Responsibility on the parents at this point to request the support
		3: Exploring ADHD/ ASD	6: Questioning ADHD	and then err she was referred into CAMHS CAMHS wasn't as bad as it is now with the waiting list erm initially we we'd got an initial appointment more or less immediately	18a-e	
				and erm obviously they we were put on a waiting list but they said you've got this appointment initially just to find a few things out	19a-e	waiting list: waiting for support

				and erm I said	20a-f	could it be things like ADHD: questioning/ trying to find an answer definitely not: certainty in the response/ without doubt - followed by the justification
				could it be things like ADHD		
				and erm the person who I spoke to said erm		
				definitely not		
				because she wouldn't be able to sit in that chair		
				and I wouldn't be able to have a conversation with her		
				err	21a-j	I questioned that: Having doubts over the CAMHS worker’s reasoning - followed by her justification for that position could you mask your ADHD as well: unsure/ uncertainty over whether this is possible
				and I thought at the time		
				well maybe err		
				I questioned that 'cause I I ya know		
				I know people with ADHD that err		
				obviously in boys it's a lot different to girls		
				'cause girls mask		
				but then I thought		
				could you mask your ADHD as well		
				so I I was questioning that		
			7: Autism pathway	they actually said	22a-f	possibly put 'er on the ASD pathway: “possibly” suggests uncertainty it could be signs of: “could be” again suggests uncertainty/ exploring
				err it's		
				we're gonna possibly put 'er on the ASD pathway		
				because err		
				it could be signs of erm		
				autistic err behaviours		
				so we're like	23a-e	it's gonna take a year: going to have to wait for the assessment I can't wait a year [chuckles]: surprise/ disbelief/ finds this unreasonable/ ridiculous?
				right great		
				and they said it's gonna take a year		
				and that was when the waiting list were good		
				and I thought I can't wait a year [chuckles]		

LEANNE:				Yeah		
ANNA:		4: Impact of demand avoidance	8: Researching PDA	so err a	24a-e	I was doing lots of research: Anna as “researcher” - responsibility for finding an answer looking at PDA: first time she mentions PDA - found this out herself? it was the demand avoidance: said with certainty
				an' then I was doing lots of research by that time		
				and I was looking at PDA		
				because erm		
				it was the demand avoidance		
				so erm	25a-f	so popular/ 'ad lots of friends/ invited to lots of parties: positive descriptions of Kaylee unable to go: not in Kaylee’s control
				so what was happening then is sh' she		
				because she was so popular		
				and 'ad lots of friends		
				she was invited to lots of parties		
				but she was unable to go		
			9: Anxiety cycle and lateness: a downwards spiral	so it was happening in school in a morning	26a-i	meltdowns couldn't get into school/ made her late: the start of the knock-on effect of her anxiety on school
				where she was having these meltdowns		
				she couldn't get into school		
				which made her late		

Appendix I: Michael's narrative poem

So this is a story about Thomas

Finally a diagnosis
and
all very new.

Coming out shell-shocked
and then obviously – lockdown –
and some kinda paralysis,
right?
Not anybody to talk to at that point in time.

Gathered our thoughts
said
we need to get prepared for school.

So…
researched EHCP
what it meant
not much more,
fairly blind
at that point in time.
Thinking,
he's been diagnosed,
right?
Surely they will do an assessment,
right?
Simple as that!

Short letter,
he's got this diagnosis
that diagnosis
asking them to assess his needs
turned down straight away,
"But he, he, he's got additional needs,
right?
You've already diagnosed the child,
right?"

So then,
kind of understood more
all this graduated response
and evidence base,
learning on our feet
and finding out as we go
the hard way I would say!

Heard
for the first time about SENDIASS,
and
what does that word Local Offer mean?
You're talking gibberish,
right?
I just want support for my child.

So…
obviously frustration –
Local authority batting us back.
SENDIASS
and Parent and Carers Forum
said,
"Not surprised,
right?

Default behaviour!”
Ah, right, okay,
so this is going to be a different ball game!

Decided to appeal
went through the legal hoops
like -
We’re going to mediation!

But
mediation –
the most horrendous event!
I’m extremely calm in a crisis
so when this completely exploded…

I do negotiation
I had to step in and
take control –
“We need a break
go away
and reflect.”
Disappointing,
you know?
The mediator
failed in their duty at the most critical part.

So…
massive
rupture,
legal arguments
borderline illegal
and twistin’ the rules,
‘cause the local authority has a policy of
see how they survive
we’ll intervene if necessary.
We said,
“You want them to drown and then learn to swim!”
Adamant –
we’re not buying that.

So…
agreed we would meet again
with additional evidence.
Nearly raised a complaint
but,
wanting cooperation
decided against that.

Reflecting,
decided not to go back
gonna be
put through the wringer again,
not a significant bank of evidence
to change the state of play
an’
didn’t wanna play ball
anymore.
That relationship was broken.

Then, went wholesale approach
to bring evidence
for an assessment again.
Put together a bank of evidence
so compelling…

and
local boundary issues coming into play,

who was responsible –
really frustrating!
"I can’t go and see him."
Seriously?
You, you have a duty!
Boundary politics come into play
completely unnecessary,
caught in the middle there.

With SENDIASS,
able to knock heads together
lines of accountability
were defined
somebody from the local authority
to come on board,
put evidence together with the nursery.
Nursery
expecting the local authority to
pick it up and run with things,
again
challenges!
Stuck in the middle
a bit of a triangle
between
the different authorities
the nursery
and us.

So…
really had to call upon my professional experience
to drive something
push meetings
and bring everybody together.
Huge amount of time
during my working day
(lucky my employer was so sympathetic)
having to drive
a monthly meeting –
I was having to drive that,
right?
Nobody
one person
one entity
was not willing to take control.

So…
somebody from the local authority
gave the nursery some guidance
us some guidance
very transparent,
an’ helped us to
nursery to
gather some evidence –
because obviously
the parental evidence was discarded,
right?
Completely.
Discriminatory
practically
discarded,
they would basically disregard anything parents say –
quite hurtful,
it’s not helping.
They want an unbiased view,
but there’s a more diplomatic way.

So we
pushed ahead
new documentation
different forms
everybody has their own spin on things,
really strange ones.
Challenge was
this local authority want this,
and that local authority want that –
“Look!
We just need to get the facts down,
right?”
Managed a happy medium
a painful exercise in itself,
thinking
do we not just have a national way
for God’s sake?
Frustrating
and eye-opening.
Interesting when a load of professionals
can’t agree
and you’re the least qualified in that call.
So yeh!

So…
body of evidence was building
and (kudos to the person from the LA)
managed to get
an ed psych
assessment
ahead of submission
due to the pandemic
via Zoom.
Actually really good,
absolutely amazed
by what she was able to pick up
purely just observing,
amazing!

Absolutely nailed,
nailed it on the head!
Amazing!
Testament to their professional capability.
Really nice
really warm,
immediately able to create rapport
and
report so strong
felt we’d knock this out of the park
at that point in time.

So…
got updated SALT,
again had to push
‘cause
free fall during the pandemic,
right?
SALT not present
had to push,

and OT
trying to push on sensory assessment
which was flailing,
but again
second stage
and into the mist
because
the pandemic

and continuous turmoil within the local authority.
On the waiting list so long it's unbelievable!

So…
got our evidence together
I catalogued everything
and SENDIASS told us
be pretty upfront
say:
"We've been here before,
we're here again.
If you don't accept us we'll see you at tribunal!
Body of evidence is overwhelming –
don't try to play games this time
we're playing hard ball!"

So…
submitted
electronically
(Godsend)
then over to them.
Heard nothing
for a long
you know
until they sat down,
and you don't really know when
is the whole thing,
right?
There is no partner in this journey –
left to your own devices.

So, ultimately
somebody rang
says,
"Oh! It's been approved
an assessment."
then,
passed from person to person
immediately.
Least through the portal
you could track movements,
see tasks and names
a coordinator I could call upon,
extremely difficult to get hold of

did not contact us
we had to engage with them
which was poor.
'Cause I just said,
"I'm gonna ring this person up,
I want them to know
we're not playing games!"

Set expectations,
this is not gonna be a rollover
you need to work with us.

So…
assessment was a damp squib!
Ed psych report – done.
"Oh! We'll just take that and put it in."

Then with the nurse,
nothing.
Took it upon myself
and she updated it

straight away.
Got an understanding of the workload
which is scary
to be honest with you.
If I had not,
what?
No input?
Again a statutory need,
right?
Who cares about statutory I would say
based on how the local authority behaves.

So yeah…
getting evidence
was extremely difficult
people citing processes and GDPR
I understand GDPR,
it's nonsense!
Blankly refused
says,
"We don't write reports,
only if the local authority asks…
you don't have to provide it"
"Well nobody else is gonna provide it!"

So,
different perspective
personal information request
dealt with so quickly
an'
put that in the melting pot!

So assessment went on,
everything in
but no updates.
Clock was ticking,
there's a statutory deadline here,
right?

Randomly a phone call
they agree
for an EHCP,
but again
very little contact.
So
onto the next timeline
the plan needs to be issued
the next deadline
an' portal would give a date
no real excuse from the local authority –
the day
was staring them
in the face,
right?

So we moved on
trying to get the plan
asking,
"What's going on?"
A sea of silence
nothing we could see at all,
randomly a phone call
asking,
"Where's the evidence?"
And I'm going,
"Evidence is in the portal,
right?"
Had to show them,

really disappointing.
Not taking this lying down,
feeding it back
through SENDIASS.

Little work on the plan,
literally
took the ed psych's report
copied it in
copying and pasting
no trying to summarise
or put things in a clearer form,
a more actionable sense.
At this point completely exhausted
– physically and emotionally –
just relieved he'd got a plan.

School engaged,
amazing
SENCos really good,
syphoning bits off the plan
for the school.

Asked to formally review the plan
collaboratively through the portal,
really good
however,
they did nothing with the comments
just added it in
hadn't actioned it at all
and I'm thinking,
"Does anybody actually read these plans
before they approve them?"

So,
having an EHCP is great
but the plan itself was
pretty meek
pretty lame,
not to the standard I would be proud of
if it was me –
damn lazy
to be honest with you!

So…
got the plan approved
(late by the way)
no regard to the timelines.

Can't remember how many emails I sent
for an update
on panel
not getting anything back
like a wall of silence.
School helped
said,
"Don't worry,
we know we've got a plan.
We'll work with you guys
and adapt to what Thomas needs."
Really comforting,
a really caring school.

So the journey,
end to end:
A – journey
B – learning,
continuous learning.

Obstacle after obstacle
and
sheer incompetence of the local authority.
No compassion
it's like
we're talking about people
not some taxation event,
right?

So cold –
where as a parent
the polar opposite.
Never take on face value
anything the local authority tell you –
do your homework.
A sad state of affairs,
right?
But it's the truth.
Trying to
fix it in a way that's convenient for them,
you know?
Talk to everybody
valuable charities
(they're amazing!)
other parents
and SENDIASS –
your legal counsel,
right?

Don't know how many meetings I had with SENDIASS
just check-ups,
the only partner
from a local authority perspective.
Picking up the brunt
of the failures of the local authority.

So you know
horrendous,
absolutely horrendous!
Minefield,
absolute minefield!
Many hours reading stuff,
talking to people
trying to get perspectives and understandings of the law
to challenge them back.
Quoted legislation
(a very good trick),

but it's like
seriously,
you have to become your own lawyer,
right?
Become solicitor like,
an' not everybody has the time
or ability
or inclination,
right?
Children dropping through
not getting support.

This country –
far from where it should be.
The state is a device you call upon when you need them,
but the state wasn't there
when you needed it.

So yeah!
Really frustrated.
If not able to box my emotions
not sure where we would be.

Box your emotions
be your own lawyer,
how do you feel?

Boxin’ my emotions –
I can box them for the time,
this is therapy
my processing,
store it away and bring it back later.
Good and bad
from a mental health perspective,
right?

Being my own lawyer –
really shocking!
It’s you versus the state
like
this is not a dispute over land or tax –
it’s about a child’s health and education
for God’s sake!
Let’s get some perspective,
right?
There every step of the way
to trip you up
or close the door
or put barriers so high it’s unachievable!
It’s complex
multi-agency
really hard –
really hard to navigate,
right?

The triangle,
caught in the middle
having to bring everybody together
sounded difficult to navigate?

Exacerbated with cross boundaries,
an additional complexity
that caused frustration,

sayin’,
“Let’s focus for a minute,
who is this about?”
Play the guilt trip –
it’s about a child,
you know?
Emotional blackmail
to bring back humanity
‘cause I understand process
but you can have process
and execute it,
process it
in a humane way,
right?

Wondering,
your initial hopes for the EHC
an’ the process,
how has that been since you’ve been issued with a plan?

So…

EHCP –
the ticket
to support.
We got the ticket
but disappointed,
because
then the next hurdle
an’ the next hurdle
an’ the next hurdle –
the hurdles will never go away.
A significant hurdle,

but in the beginning
thinking
it goes back to a steady state of living,
reality is no –
that journey will continue
forever more.
You get used to the hurdles
know how to deal with them
better equipped
got the experience,
they become less traumatic
shall we say
and…

the school,
cannot praise the school enough.
And
that teacher
from the local authority
helped Thomas settle in school
restored my confidence,
amazing!
So much compassion!

So…
golden ticket,
turned out not to be
nobody explained this
(the pandemic didn’t help)
and
Local Offer –
nobody understands that at the beginning,
I don’t want a Local Offer
I just want support,
you know?
Information
internal
using lots of terms: graduated response
a beautiful term,
right?

Need a campaign in plain English
a chaperone
end to end
explain the process in plain English
an’
guide you on that journey.
Be neutral
with no unconscious bias,
‘cause the feedback
from the local authority
is conscious bias.
So…
advice is,
do your homework
do not take it at face value,

there is no partner for you in this relationship

just a set of faces and names,

it's not humanistic!

What does it mean now to have the EHCP?

We feel more secure,

there's recognition he needs additional support

we have a vehicle to get that:

the EHCP.

Not in freefall

as before –

a comfort.

Trick is now,

make sure the EHCP

is reflecting his needs,

a continuum

Appendix J: Michael’s Narrative Map

Introduction: Introducing Thomas

Part 1: Applying for an EHC plan following diagnosis: being turned down
- *Strophe 1: Diagnosis: shell-shocked*
  - Stanza 1: New diagnosis for the family
  - Stanza 2: Shell-shocked/ lockdown
  - Stanza 3: Needing to prepare for school
- *Strophe 2: Application for EHC Plan*
  - Stanza 4: Finding out how to apply for an EHC Plan
  - Stanza 5: Application turned down

Part 2: Greater understanding/ learning and finding things out
- *Strophe 3: Finding out things for the first time*
  - Stanza 6: Learning on their feet/ finding out the hard way
  - Stanza 7: Hearing about SENDIASS/ the local offer
- *Strophe 4: Deciding to appeal*
  - Stanza 8: Frustration from being batted back
  - Stanza 9: Appealed: chose mediation

Part 3: Experiences of mediation: horrendous
- *Strophe 5: Horrendous experience of mediation*
  - Stanza 10: Going to mediation
  - Stanza 11: Mediation was horrendous
- *Strophe 6: Disappointed with the LA*
  - Stanza 12: Disappointed with other people in mediation
  - Stanza 13: Not buying into LA policies or twisting of the rules
- *Strophe 7: Broken relationships/ not having additional evidence*
  - Stanza 14: Deciding against a formal complaint: wanting cooperation
  - Stanza 15: Declined a second meeting

Part 4: Gathering more evidence for second application: driving the process
- *Strophe 8: Putting together compelling evidence*
  - Stanza 16: Putting together a second application
- *Strophe 9: Nobody taking responsibility*
  - Stanza 17: Caught in the middle
  - Staza 18: SENDIASS support: defining the lines of accountability
- *Strophe 10: Driving the process*
  - Stanza 19: Spending own time driving the process
- *Strophe 11: Getting the evidence together: no national way*
  - Stanza 20: Parental evidence discarded or disregarded
  - Stanza 21: Different forms of documentation
  - Stanza 22: No national way

Part 5: Pushing for updated assessments
- *Strophe 12: EP assessment*
  - Stanza 23: EP assessment: amazing
  - Stanza 24: Nailed it: report strong
- *Strophe 13: Pushing for assessments*
  - Stanza 25: Pushing for an updated speech and language therapy assessment
  - Stanza 26: Pushing for a sensory assessment

Part 6: Second application approved
- *Strophe 14: Submitting the second EHC plan assessment*
  - Stanza 27: Being upfront about playing hard ball
  - Stanza 28: Electronic submission: over to the LA
- *Strophe 15: Assessment approved: making contact with the EHC coordinator*
  - Stanza 29: Assessment approved/ tracking the LA’s movements

        Stanza 30: Finding out about the EHC coordinator
        Stanza 31: Setting expectations to the EHC coordinator

Part 7: The EHC needs assessment: challenges of getting the evidence

- *Strophe 16: Assessment was a damp squib*
    - Stanza 32: Assessment was a damp squib
- *Strophe 17: Overcoming the challenges*
    - Stanza 33: Contacting the nurse for an update
    - Stanza 34: Difficulties getting certain evidence
    - Stanza 35: Making a personal information request

Part 8: EHC plan agreed: putting the plan together/ the sea of silence

- *Strophe 18: EHC plan agreed: statutory deadlines*
    - Stanza 36: No new updates but the clock was ticking
    - Stanza 37: EHC plan agreed: onto next timeline
- *Strophe 19: Putting the plan together*
    - Stanza 38: Putting the plan together: sea of silence
    - Stanza 39: Little work done on the plan/ exhausted
- *Strophe 20: Trying to get a more actionable plan: giving feedback*
    - Stanza 40: Giving feedback on the plan
    - Stanza 41: Plan not to standard
- *Strophe 21: Timelines not met*
    - Stanza 42: Plan approved late
    - Stanza 43: Wall of silence/ school made a difference

Part 9: No partner in the process/ do your own homework

- *Strophe 22: Summarising the journey*
    - Stanza 44: The journey: obstacles, learning and sheer incompetence of the LA
- *Strophe 23: Valuable resources*
    - Stanza 45: Advice for others
    - Stanza 46: SENDIASS as the only partners

Part 10: Becoming your own lawyer: it’s you versus the state

- *Strophe 24: Preparing to challenge the LA*
    - Stanza 47: Finding out how to challenge the LA
    - Stanza 48: Becoming your own lawyer
- *Strophe 25: Boxin’ in emotions*
    - Stanza 49: State not being there when needed/ boxin’ in emotions
    - Stanza 50: Storing away emotions to process later
- *Strophe 26: Complex process that is difficult to navigate*
    - Stanza 51: You versus the state
    - Stanza 52: Additional complexities in the system caused frustration
- *Strophe 27: Bringing back the humanity*
    - Stanza 53: Making the child the focus: bringing the humanity back

Part 11: Being prepared for the hurdles: the need for support

- *Strophe 28: Onto the next hurdle*
    - Stanza 54: Disappointed with the ticket to support: onto the next hurdle
    - Stanza 55: Hurdles will continue forever
- *Strophe 29: Importance of the right support, guidance and information*
    - Stanza 56: Having the right people to help
    - Stanza 57: Language nobody understands
    - Stanza 58: Need for a neutral chaperone or a guide that is neutral

Part 12: Reflections on the EHC plan

- *Strophe 30: Having the vehicle to additional support*
    - Stanza 59: EHC plan provides security and comfort: recognition he needs support

Appendix K: Psychological subject map of Michael’s narrative

Introduction: Thomas
Thomas (=Thomas)

I identify Thomas to be the main psychological subject in Michael’s introduction to his story. To provide me with a visual reference of Thomas, Michael showed me a photograph at the beginning of our interview. He later explained that this was a strategy he would sometimes use when working with practitioners during the EHC needs assessment process with his intentions being to re-humanise the process. Thomas is introduced as being central to Michael’s story (“this is a story about Thomas”) which, to me, captures the interconnectedness of their stories.

Part 1
Stanza 1: we/us (=Michael and his wife)
Stanza 2: we/us (=Michael and his wife)
Stanza 3: we (=Michael and his wife)
Stanza 4: we (=Michael and his wife)
Stanza 5: we/us (=Michael and his wife), they (=the local authority?)

The main psychological subjects in Part 1 of Michael’s story are he and his wife (we/ us). At first, Part 1 describes their feelings in response to their son’s diagnosis. It then captures their lack of knowledge around the EHC process at the time as well as their expectations of the first EHC needs assessment request and their surprise when it was not accepted.

Part 2
Stanza 6: we (=Michael and his wife)
Stanza 7: we/us (=Michael and his wife)
Stanza 8: we (=Michael and his wife)
Stanza 9: we (=Michael and his wife)

The main psychological subjects of part 2 continue to be Michael and his wife (we/us), describing their developing knowledge of the EHC process and growing awareness of support services such as SENDIASS and the Local Offer. It outlines their realisation that the EHC process was not going to be as they expected and states their decision to appeal through mediation.

Part 3
Stanza 10: we (=Michael and his wife), they (=Thomas’ nursery)
Stanza 11: we (=Michael and his wife), I (=Michael)
Stanza 12: the mediator, I (=Michael), they’d (=the mediator)
Stanza 13: they (=the person from the local authority), let’s (=the local authority), we (Michael and his wife
Stanza 14: they(=the mediator?), we (=everyone at mediation?), we (=Michael and his wife)
Stanza 15: we (=Michael and his wife)

This part of the story describes Michael and his wife’s “horrendous” experience of mediation. Whilst I feel they (we/ us) remain the main psychological subjects in this part, Michael also describes the actions of other characters including the mediator, nursery staff and the local authority, all of whom are referred to using the pronoun “they”. Within stanzas 11 and 12, I note the first occasion in which Michael presents aspects of his identity, describing personality traits and skills that allowed him to adopt a leadership role within the mediation session.

Part 4
Stanza 16: we (=Michael and his wife)
Stanza 17: some (=practitioners), I (=Michael), he (=practitioner), I (=Michael)
Stanza 18: we/us (=Michael and his wife), they (=nursery)
Stanza 19: I (=Michael)
Stanza 20: we'd (=Michael and his wife)
Stanza 21: we (=Michael and his wife), nursery, they (=the local authority)
Stanza 22: we (=Michael and his wife OR everyone involved at that point?)

In stanza 16, Michael explains the lengths he and his wife went to in order to gather "evidence" for Thomas' EHC needs assessment request. In stanza 17, however, I note the shift in pronouns as Michael moves between "some", "I" and "he" before returning to the use of "I" again. To me, this represents the back-and-forth interaction between Michael and practitioners from the local authority as he pushes back against their "local boundary politics". In doing so, I sense Michael's frustration. Also of significance to me in this part of Michael's story is his use of the pronoun "I" in stanza 19 where, once again, Michael presents aspects of his identity. Here, Michael emphasises the fact that he had to take control in order to "drive" the EHC process forwards. In stanzas 20-22, the focus of the narrative then shifts back to Michael and his wife's efforts to gather the necessary "evidence".

Part 5
Stanza 23: we/ we'd/ us (=Michael and his wife)
Stanza 24: we (=Michael and his wife), it (=the educational psychologist's report)
Stanza 25: we (=Michael and his wife)
Stanza 26: we (=Michael and his wife), we/we've (Michael, his wife and Thomas?)

The main psychological subjects of part 5 are Michael and his wife ("we/us") and it describes their perceptions of the educational psychologist's assessment as well as outlining their efforts to "push" for assessments from various practitioners.

Part 6
Stanza 27: we (=Michael and his wife), I (=Michael), we (=Michael and his wife), us (=Michael and his wife)
Stanza 28: we/ we'd (=Michael and his wife)
Stanza 29: us (=Michael and his wife), we (=Michael and his wife), I (=Michael)
Stanza 30: I/ I'm/ I'd (=Michael)
Stanza 31: we (=Michael and the EHC coordinator), I (=Michael)

In stanza 27, the initial pronoun Michael uses is "we" (=Michael and his wife). He then shifts to using the pronoun "I" (=Michael) before reverting back again to "we" (=Michael and his wife) again. Here, Michael describes he and his wife's efforts to gather their "evidence" before explaining his own role in organising all the documents: "catalogued everything". A false start in Michael's speech and a shift in the pronoun used ("I also pre'/ we prepared") suggests to me that he found it difficult to separate his own role in the process with the roles he considers himself to have completed jointly with his wife. I observe a similar shift in stanzas 29 and 30 where he and his wife's ("we"/ "us") shared experience of the lack of support and contact from practitioners is described. Michael's use of the pronoun "I" reflects his proactive approach to monitoring the progress of Thomas' assessment and the action he took to contact practitioners himself for reports. Here, I feel Michael presents himself as working on behalf of he and his wife, for example, in the following line: “so I set expectations on our side”.

Part 7
Stanza 32: the assessment
Stanza 33: I (=Michael), we (=Michael and the nurse), I (=Michael)
Stanza 34: we (=Michael and his wife), I (=Michael), we (=Michael and his wife), they (=health service), I (Michael), they (=health service)
Stanza 35: we/us (=Michael and his wife)

In stanza 33, Michael features as the psychological subject and outlines the action he takes to make contact with the nurse himself for an updated report. In stanza 34, I note that Michael shifts back and forth between “we” and “I” when referring to his own role in the EHC process or his shared experiences with his wife. Here, Michael implies that he needed to take a proactive role himself in gathering evidence for Thomas’ EHC needs assessment request due to nobody else being willing to do so: “I need to provide it”. Michael then returns once again to using the pronoun “we” in stanza 35.

Part 8
Stanza 36: we (=Michael and his wife)
Stanza 37: we (=Michael and his wife), they/ them (=the local authority)
Stanza 38: we (=Michael and his wife), I (=Michael)
Stanza 39: the plan/ it, we (=Michael and his wife)
Stanza 40: school/ they, we (=Michael and his wife)
Stanza 41: we (=Michael and his wife), they (=the local authority/the EHC coordinator?), I’d (=Michael), they/they’ve (=the local authority/the EHC coordinator?)
Stanza 42: we (=Michael and his wife), the plan
Stanza 43: I (=Michael), the school, we (=the school), we (=Michael and his wife)

At the beginning of part 8, I identify Michael and his wife to be the main psychological subjects of stanzas 36 and 37. Towards the end of stanza 37, I note a shift in psychological subject to the use of “they” which I infer represents the local authority. Michael describes what I interpret to be his discontent with the local authority’s actions. In stanzas 38, 41 and 43, Michael once again switches between the pronouns “we” and “I” which, to me, emphasises the occasions where Michael took the lead within the EHC needs assessment process on behalf of he and his wife.

Part 9
Stanza 44: the journey, they (=the local authority)
Stanza 45: they (=the local authority), I/ I’ve (=Michael), they’re/ them (=the local authority)
Stanza 46: we (=SENDIASS and Michael?), we (=Michael and his wife), they (=SENDIASS)

In stanza 44, Michael labels his whole experience of the EHC needs assessment process as “the journey”. The psychological subject then shifts to being the local authority as Michael expresses what I perceive to be his discontent over their actions. At the beginning of stanza, 46, I believe the use of the pronoun “we” in the line “we were kinda meeting two three times a month” is intended to represent SENDIASS and Michael, and I sense that he saw SENDIASS as his allies throughout the EHC process.

Part 10
Stanza 47: we (=Michael and his wife), I (=Michael)
Stanza 48: I (=Michael)
Stanza 49: we (=Michael and his wife), the state
Stanza 50: I (=Michael)

Stanza 51: us (=Michael and his wife)
Stanza 52: ours (Michael and his wife's)
Stanza 53: I (=Michael and his wife), you (=everyone? practitioners?)

I identify Michael to be the main psychological subject of stanza 47. Again, the use of "I" as a pronoun reveals aspects of Michael's identity as he describes his actions towards becoming his "own lawyer". In stanzas 48 and 49, Michael shifts between expressing his own opinion ("I") and speaking on behalf of he and his wife ("we"). He returns to using the pronoun "I" in stanzas 49, 50 and 53 where, yet again, he describes the ways in which his skills, qualities and actions supported the EHC process.

Part 11
Stanza 54: we (=Michael and his wife), he (=Thomas), me (=Michael)
Stanza 55: we (=Michael and his wife), journey, these hurdles
Stanza 56: us (=Michael and his wife), we've (Michael and his wife), teacher, us (=Michael and his wife), they're (=teacher from the local authority)
Stanza 57: we/ us (=Michael and his wife), I've/ I (=Michael)
Stanza 58: they (=chaperone), I (=Michael)

Stanza 54 represents Michael's response to my question asking him to compare his expectations of the EHC process to his actual experience. Michael begins by responding on behalf of he and his wife ("we"); however, there is an interesting shift in Michael's use of pronoun towards the end of stanza 54 as he refers to Thomas ("he") now being in possession of an EHC plan ("he has one now"), but then asserts that nobody can take the plan away from him ("nobody can take that away from me"). Here, I wonder if the switch to a first-person pronoun represents the hard work he endured in order to obtain the EHC plan for Thomas.

Michael continues to represent he and his wife's views in stanzas 55 and 56, but in stanza 57 he once again shifts to the use of the pronoun "I" as he voices his opinion towards what I understand to be his frustration around the type of information available to parents when they first enter the EHC process.

In stanza 58, the main focus of Michael's narrative is around his description of a "chaperone" who he states could be of benefit to parents navigating the EHC process. Towards the end of stanza 58, Michael switches once again to using the first-person pronoun "I" as he explains his role in providing advice to other parents.

Part 12
Stanza 59: we (=Michael and his wife)

As Michael responds to my final question ("how do things feel for you now?") in stanza 59, he once again uses the pronoun "we". Here, Michael appears to interpret my use of the pronoun "you" to represent he and his wife and, once again, speaks on behalf of them both.

Appendix L: Michael’s presentation of identity

Identity	Quotes from the interview transcript
The calm one	“I'm the extremely calm in a crisis erm” “if I was not able to kinda box my emotions that I am” “I'm able to store it away and bring it back later”
The driver	“really had to basically just call upon all my professional experience to drive something here/ and push meetings in people's calendars” “an’ I was having to drive that right”
The negotiator	“and in my role I do [redacted] negotiation” “so an’ I actually had to step in and take mediation/ take over control of the session myself to be honest with you”
The reader	“I don't know how many hours I spent reading stuff”
The provider	“I catalogued everything erm” “and I also prepared a” “I tried to get evidence” “I need to provide it”
The lawyer	“I even quoted text from legislation back to them” “seriously you have to become your own lawyer right” “you you you have to become solicitor like”
The challenger	“I want them to know that we’re not playing games here” “so I set expectations on our side that you know” “to which I then complained” “I was able to then challenge them back right” “so er I would play the guilt trip on people right” “I was not taking this lying down” “an’ I kept turnin’ around to people an’ sayin’ to ‘em”
The advisor	“so I replied to somebody on social media this morning” “I went/ sorry that’s wrong right” “one piece of advice I will give you is/ do your homework”
The advocate	“I just want support for my child right” “I just want support yeah”

Appendix M : Anna’s narrative poem

Kaylee was struggling
in Year 4,
given a SATs paper
and suffered an anxiety attack,
just froze –
so surprising.
Top set
always had friends,
didn’t know what the problem was.

Sometimes a bit spirited
over excited
really loud,
thought that was normal,
didn’t think.

Well,
possibly dyslexia?
Asked school,
the onus was on the parent,
had her assessed
not dyslexia,
something with her processing.

Started having meltdowns
panic attacks
not being able to go to school,
overnight
so extreme
so regular and common,
in fetal position
on the floor.
From high flyer
to this overnight –
wow!
What is this?
Extreme behaviour!

OCD traits
rituals
overnight controlling rituals,
hair had to be perfect –
worried.
Going to the GP
saying,
“It’s mental health,
can you help us?”
To CAMHS
I said,
“Could it be ADHD?”
“Definitely not,
she wouldn’t sit
and have a conversation.”
Questioned that
and thought
girls mask,
could you mask ADHD?

Put ‘er on the ASD pathway
said, “It’s gonna take a year.”
“I can’t wait a year!”

So,
doing lots of research
and looking at PDA –
it was demand avoidance.
Invited to parties
unable to go.

Meltdowns,
couldn’t get into school,
the cycle…
late
then stared at,
it perpetuated itself
this lateness.
And the anxiety would give her more anxiety.
Late
and didn’t understand the work,
knock-on effect
a downward spiral.

Invited to parties
she couldn’t get out of the house.
Really wanted to
really upset
crying,
“I just can’t!”

Wanted to but couldn’t,
her brain would split in two.
Diagnosis privately
I think it’s PDA,
wanted a specialist.

Amazing!
Gave examples of
taking things literally,
“Oh, right, okay
I get it now!”

An’ got the diagnosis,
she’s clearly
autistic,
came out relieved.
I’m not making it up
one of those mums
really sensitive –
there is some truth.
Validation for me,
validation for Kaylee,
validation for ‘er big sister,
validation for mi husband.

So,
skipped into school
she is autistic
we need measures in place –
severe anxiety.
They said,
“She doesn’t look autistic,
she’s fine in school
(when she’s here).”

Then,
more and more
panic attacks
more severe.
Attendance started droppin’,
issuing me a letter saying
attendance ‘as fallen.
I don’t need reminding
I’m living it,
an I want her in school!

So,
I was looking at EHCs,
possibility
the settings not right –
too big.
Unfortunate for Kaylee
she was being select mute,
she stopped speaking,
the demands
she’d just trigger,
start panicking
if it was linked to school.
Difficult to get the information
how school could help
so I could be her advocate.

So then
Year 5,
an amazing teacher!
Never shouted
really calm,
she understood Kaylee.

So
it masked it again,
the teacher was so good.
Mentioning EHCs to school
they’re saying,
“Looks like she’s coping.”
Had to agree,
she’d got an excellent teacher.

An’ then
SATs year,
down to
eighty percent attendance.
Fallen out with her friends
hiding in the toilets –
measures could have been in place.

So
got her diagnosis
said,
“She needs an EHC.”
“No she doesn’t,
she’s coping well.
See how she gets on.”
Applied myself
I can’t wait for her to fail,
have to do something.
Assessment rejected
so I appealed,
then she was assessed.

Interview with the
educational psychologist
who was lovely,
asked probing questions
what she enjoyed doing.

She thought he were a magician,
he pulled out a pack of cards!
Things like that
got her through,
normally not able to speak.

Rejected –
she was a high flyer,
and
eighty percent isn't that bad
attendance,
attainment and attendance isn't
suffering that much –
school
were backing that up.

So then,
teachers did used to listen me,
"Is it possible you don't
ask her questions direct?"
Used to follow instructions like that,
but then
shout across the classroom,
Kaylee was so embarrassed and
ashamed,
"ARE YOU ALRIGHT KAYLEE?
DO YOU NEED ANY HELP?"
Say she was fine,
didn't have the confidence,
and
teacher shouted it
so was never gonna say, "No, I'm
really struggling."
In panic attack mode
not able to speak
or pull out a card
to say she was struggling,
she just froze.
Really low
definitely depressed.

Not going out with friends –
burnt out.
Doing her SATs
and still in fetal position,
hair up and down
forty times,
on an' off
on an' off
on an' off
then fetal position
in panic attack mode,
constant.

So then
Kaylee used to copy everyone,
slow at processing
said, "I didn't 'ear any warnings,
knew I was in trouble
because the teacher's looking at me.
No-one else got the blame,
just me."
There was shame
she'd get the blame.

She couldn't get into school
embarrassed and distraught.
"You don't have to do your SATs."
"I don't want to stand out."
A high flyer,
bright
competitive
and determined,
"I want to do it!"
But then
major meltdowns,
panic attacks.

Meanwhile,
her understanding was limited
needs simple explanations.

Got SALT involved,
hired her in –
we need help.
Was amazing!
Did Social Stories
found out what she enjoyed
an' strategies
to calm her,
boosting 'er confidence
was really good at that.

So then
loads of meetings
with secondary school.
They kinda said,
"We've got loads of autistic children."
You know,
we can do this,

this is nothing.
Me and my husband doing courses,
learning
training
to get an idea of what
we needed to know.

Loads of meetings,
“Yeah we’ll deal with
transition.”
Kaylee said,
“I’m not comfortable,
don’t want anybody knowing
I’m struggling.”
She was really paranoid
so rejected the
sessions.

I specifically said,
“She needs a buddy system,
one or two friends.”
An then
transition day,
in groups
didn’t know anybody,
highly unusual,
I’d given the information.
Said she’d hated it
she was clueless,
gonna dread September.
I said, “Just give it a go,
I’ve given them the information,
I’m sure they’ll look after ya.”

So then
Year 7
with no-one she knew,
bizarre,
really frustrated!
All the meetings
my main point
my specific thing:
“She’ll be alright if she’s got support.”

So downhill from there!
EHC
rejected
so then mediation,
“Look, she’s on ninety percent,
academically
she’s achieving.
Not going to benefit from an EHC.”
Thought,
gonna have to move ‘er
she needs specialised school
they can’t cope at secondary anymore.

Dropping ‘er
at school,
she did have friends
she could walk with
but so delayed with her OCD traits
or autism rituals
she’d miss meeting up,
have to walk on her own.
Or she’d not communicate
or
say,
“I can’t remember where we were
meeting.”
It was the triggers,
got to think about school
and she didn’t want to go,
just avoid it completely.

Detentions for homework
because when home
she’d be in a trance
trying to process that day.
It’s secondary school
she was struggling,
never gonna be positive.
It’s a long day
if you’re not enjoying it,
remembered the negative
an’ it’d ruin it.

So then,
if late
they take your dinner pass –
she was punished,
have to sit on ‘er own,
Told ‘em,
she’s obviously struggling with anxiety
it’s in your plan.

And messages…
she’s unauthorised attendance,
another reminder –
I know she is!

Constant battling,
it should be authorised
it's mental health.

Pulling everyone together
pastoral
SENCo
CAMHS
SENDIASS,
no-one else doin' it for me,
I need to project manage this.

And pastoral
didn't speak
didn't say anything,
really bizarre
looked shocked,
explaining
she's having panic attacks
OCD traits,
staring blankly at me
no response.
Don't think they know what they're doing,
gonna have to project manage this myself,
they're not gonna do it for me.

So then a new SENCo,
amazing,
just listened to me.

She didn't know about PDA
so I was sending her information,
she was grateful
we worked together
I said,
"Right, it's time now
to apply again,
she needs a different setting."
SENCo
says,
"I will do everything possible,
specialised settings might be intimidating.
Let's have a go
try this EHC."

Prior to Year 6
told
to get [AUTISM TEAM]
expertise in place,
graduated response,
waiting all this time
back of the queue.

And then
did meet up
it was limited,
not a lot of advice
just
an hour's intervention
thought, that's not gonna resolve it
just a session,
not going to help long-term
get her into school,
we need something more intense.
Decision
to apply for an EHC
on my own again.

Then lockdown…
closing the school -
the best thing for Kaylee,
she was so happy!

Online lessons
but slowly
they started going back
and Kaylee said, "I'm not going back to school."

So
waiting a while,
had the [AUTISM TEAM] appointment,
wasn't impressed,
said,
"That's not gonna work
I need an EHC
she needs a different setting,
not gonna work here."

Got help with the application
because
first time I was clueless.
They sent a draft plan,
just copied and pasted
the EP report.
SALT assessment
was amazing

they'd missed
lots,
they didn't put it in.
Under the illusion
the myths, it's private
it's biased
they won't put it in,
not independent.
Seeing the EHC plan now
I know what good looks like.

But
clueless at that point,
not anybody guiding me
just training courses,
knew it was wrong
but you haven't got the strength
and the energy to battle through.

So
got my reports and assessment lined
up
in a better place,
handed it over to [CHARITY]
did an amazing job,
quality application!

Sent it off,
time's ticking.
Chased the EHC team.

Pulling my hair out
because
I had to put it onto the [ONLINE
PORTAL].
Were gonna take days,
a different format!
[CHARITY SAID],
"No,
shouldn't have to,
by law they should accept it."
Thought,
I'll put it on the [ONLINE PORTAL]
go along with the local authority,
they're in a powerful position
in control,
don't want to stop
the process –
nail biting.
do everything right
make sure it goes through.

Then…
accepted,
she got her assessment!

So then,
SENCo had organised
an area she can go,
because Kaylee used to
bolt,
freeze
flight or fight
attack
mode,
just run!
Didn't want to see anybody.
Hiding under tables
hood over her face
coat over her head
like Harry Potter –
just run!
Get told off that as well.

So when in school
in the [HUB]
she still had to walk down corridors,
and she'd bolt
'ave a panic attack
couldn't deal with it.
And online lessons
wasn't great
because
everybody knows,
can see people logged on,
she just wanted to hide.

And then
the EHC went through,
but problems
you know.
She can have an EHC
she needs one,
needs a different setting
it's not working,
but EHC team
saying
we haven't got any places.
Used to phone
weekly

saying,
“What’s happening?
The plan
it’s not finalised,
there’s a deadline
and
we’re over that –
I need to know where she’s going.”

Visiting
loads of schools,
an’ majority said,
“We’re oversubscribed.
Would be detrimental to other children
if your child comes to this school.”
No-one ever wants to be told
that!
Hard hitting
you know?
I wasn’t prepared –
really hard hitting!

So then,
no new update,
can’t leave a voicemail
there’s that many.
A really good EHC coordinator
but
putting a complaint in
‘cause
nothing’s happening.
They can’t find a school
and I couldn’t find a school.

And then
towards the end
things got moving,
and they were saying,
“You know, Kaylee is accessing
school.”
“I know,
an hour a day
accessing a building,
but
she’s not getting any quality
education.”
Sometimes
trying to look at positives,
unrealistic positives
I couldn’t relate to,
the positive slant.
Yes
she’s accessin’ school,
she’s socialising
getting out of the house
‘er bedroom,
but it wasn’t school.

And then
[SPECIALIST PROVISION]
recruited staff,
were able to accept Kaylee.
So they finalised the plan
said, “She starts Friday.”
No transition,
just so desperate to get ‘er in.
“Yes!
I’ll have the place.”
Over the moon
you know?
Wasn’t gonna
argue about transitions.

And Kaylee is there now.
It’s not ideal,
but Kaylee said,
“I’m happy.
Got lovely teachers,
my teachers understand me.

She’s grown up,
she’s developed.
A lot of time out of [SECONDARY],
really good to
help heal.
She’s grown up,
finding ‘er own identity,
autistic identity.
She can relate to the kids
in specialised school.
So err,
that’s our journey.

The local authority
having power and control,
I wondered
as a parent
how that felt?

I was naive and impressionable

not a lot of research.
Thought what they were saying was wrong
the school and the local authority,
didn't have the evidence
didn't know law
what I was entitled to.
Wasn't feeling frustrated
being guided by them,
easier
not hitting a brick wall,
smoother.
Erm
ignorance is bliss,
calmer in a way
because I didn't know the truth.

Started gaining knowledge,
very frustrating
because I knew what the law was,
what she was entitled to.
Towards the end
drained.
It's a battle
and you run out of steam,
easier to nod your head
and listen to the professionals,
but
picking up knowledge
it got extremely frustrating.

I wanted to work with these people
wanted a team effort,
but definitely
a constant battle.
My confidence 'ad grown
had more information and knowledge.

An' trained myself
not to get attached.
She's not my child,
I'm fightin'
it's mi job,
I'm fightin'
it's my work,
an advocate
fighting,
try to detach
treat it like
I'm paid to do it,
do not get emotional
see it as black and white –
trained that out of me.
Wasn't as attached as I had been,
used to cry
always crying…
unless I just got bored of crying!

The knowledge you gained
training yourself,
tell me
how that was helpful?

Knowing law
and
having confidence,
advocating for other parents
struggling with EHCs,
givin' them advice
it's repetition, repetition,
you can advise them.
Loads of times
teachers telling me
she doesn't need
to be ont' special needs register.

And SENDIASS
was the child's voice
in meetings
said,
"I think she needs to be ont' register,
you need some sort of plan."
Spoke out for me,
a big movement in my mindset.

Speaking out for me
and for Kaylee,
gave me confidence,
validation.
I knew I should ask
but no confidence,
drained looking after an additional needs kid
on the floor every morning,
didn't have
that fight in me.

But knew
things
were wrong,

teachers were telling me.
I said,
“You do know she’s got funding
for special educational needs
automatically?”
“No, we don’t know about that.”
Having to teach the teachers!

There’s lots of groups
just fabulous
just fabulous,
parents or advocates sharing their knowledge.

Not saying it was gas lighting
but your perception’s changed,
sometimes right
sometimes wrong,
sometimes need that
other point of view,
sharing knowledge.
But sometimes was to
change your point of view
so you didn’t harass them,
or hassle them,
not a burden anymore.

Gaslighting,
what do you mean by that?

Sometimes
you’re in a meeting,
it’s three against one,
and
in a very nice way
they say,
“We don’t see that.”
And that’s it,
not validated.
Never said
you’re lying
or Kaylee’s lying
but,
“We don’t see that.”
You know?
Let’s move on.

So,
appreciated SENDIASS
gathering Kaylee’s thoughts and feelings,
neutral,
equivalent of Kaylee
speaking up,
extremely important,
amazin’!

Sometimes
surprised me
but realistic,
it came from Kaylee.
Sometimes
contradicted me
an’ got to take it onboard
on the chin,
good for everybody,
was lived experience,
important to have.

In mediation
it was
all practitioners on one side
saying,
“You won’t get this EHC.”
In front of an audience
having to
justify why you need this.
You’ve got the facts,
it’s lived experience.
“No,
she’s on eighty percent,
she’s doing well.”

Looking back,
is it possible
to think about
your experience
thoughts and feelings
about the process?

Practitioners
didn’t know
what they were doing,
it’s blind leading the blind!
You’re stressed
looking after an additional needs child
expect
they’re gonna project manage,
they didn’t –

huge learning curve!

I was blessed
I had time off,
there's single parents
that have to work,
I was fortunate,
but even I 'ad to pack in work.

A crash course for me
steep learning curve,
get in
and start understanding it
to do it myself,
no-one else was gonna do it.
Roll up your sleeves and crack on,
so many courses
what's the alternative?

Homeschooling wasn't right,
needed a specialised teacher
what she's got now,
what's working –
I knew that.

Knowing what's best
roll up your sleeves
just work hard at getting there.

Information gathering,
and the right information,
people
unable to give answers
because they didn't know.

No alternative for me,
I'm a mum
there's no route around it
if you want specialised school.
At one point lookin'
for a private school
you know
raise funds somehow –
oversubscribed anyway.
This was the only way,
not another EHC team
if not happy.
This is what you've got!

Compromising on transition
because you were
desperate.

Over the moon,
so excited!
For me to say
we don't need transition
just go for it!
I'd got her onside,
a big growth in herself
and her identity
said,
"I will try anything mum."
So desperate,
knows it's the last chance.

To have an EHC
what does that mean to you?

It's like winning the lottery!
She's talking to family
about school,
never used to –
it's immense!
To somebody else so minor,
but
the difference
how she's grown
as a person,
a tiny example
but just major.
It's huge!
Making positives of everything.

A huge weight off our shoulders.

I'm looking at working again,
I've got options.
Before,
so severe her anxiety
didn't know
where that path was gonna end,
now
it's exciting,
what's gonna happen in the future?
Looking forward,
not firefighting and contingency
planning –
so positive now.

Anything else you want to share?

Schools are in a bubble,
can be the culture that
it's an annoying mum
autism is all the same
an annoying child
and a lot of eye rolling.
Teachers,
they have to have a sense of humour
stress relief,
but
I don't think they realise the impact
on people's lives,
sometimes forget
the on-off remarks
the impact
on a child
on a family,
they forget.
If it happened to their child
you'd hear what they've got to say!

Appendix N: Anna's Narrative Map

Introduction:

Part 1: Towards a diagnosis
- *Strophe 1: Not sure what the problem was*
    - Stanza 1: The first anxiety attack
    - Stanza 2: Not thinking anything about Kaylee's behaviour
    - Stanza 3: Dyslexia assessment
- *Strophe 2: Overnight extreme behaviour*
    - Stanza 4: Meltdowns and panic attacks
    - Stanza 5: OCD traits and rituals
- *Strophe 3: Exploring ADHD/ ASD*
    - Stanza 6: Questioning ADHD
    - Stanza 7: Autism pathway
- *Strophe 4: Impact of demand avoidance*
    - Stanza 8: Researching PDA
    - Stanza 9: Anxiety cycle and lateness: a downwards spiral
    - Stanza 10: Couldn't get to parties
- *Strophe 5: PDA assessment and diagnosis*
    - Stanza 11: Getting a PDA assessment
    - Stanza 12: PDA assessment
    - Stanza 13: Husband's reaction (redacted section)
    - Stanza 14: PDA diagnosis: validation and relief

Part 2: Anxieties in primary school
- *Strophe 6: Telling the school about the diagnosis*
    - Stanza 15: Masking
    - Stanza 16: Asking school for support
- *Strophe 7: School as a trigger for anxiety*
    - Stanza 17: Attendance letters
    - Stanza 18: Selective mutism
- *Strophe 8: Anxieties masked by an amazing teacher*
    - Stanza 19: Amazing teacher
    - Stanza 20: Anxieties masked

Part 3: First parental request for an EHC needs assessment
- *Strophe 9: SATs year*
    - Stanza 21: SATs year
- *Strophe 10: EHC needs assessment*
    - Stanza 22: Applying for an EHC
    - Stanza 23: EP assessment
    - Stanza 24: EHCP rejected

Part 4: Major meltdowns and panic attacks
- *Strophe 11: Panic attack mode*
    - Stanza 25: Teacher's actions/ no confidence to ask for help
    - Stanza 26: Burnt out/ panic attacks
- *Strophe 12: Not wanting to stand out*
    - Stanza 27: Copying others
    - Stanza 28: Wanting to do SATs but not being able to

Part 5: Private speech and language therapy
- *Strophe 13: Language needs*
    - Stanza 29: Limited understanding
    - Stanza 30: Loved simple demonstrations
    - Stanza 31: Help from SALT

Part 6: First experiences of secondary school

- *Strophe 14: Transitions to secondary school: no social support*
  - Stanza 32: Preparation for transition: secondary
  - Stanza 33: Transition day: Kaylee not with her friends
  - Stanza 34: Secondary school: Nobody in Kaylee’s form

Part 7: Negative experiences of school
- *Strophe 15: School as an anxiety trigger*
  - Stanza 35: Mediation: EHCP rejected
  - Stanza 36: Impact of anxiety on friendships
  - Stanza 37: Remembering the negatives
  - Stanza 38: Embarrassment at school (redacted section)
- *Strophe 16: Anxiety and attendance*
  - Stanza 39: Punished for being late
  - Stanza 40: Battling for authorised attendance

Part 8: Working together with school/ support from the autism team
- *Strophe 17: Project managing*
  - Stanza 41: Getting everyone together: Project managing
  - Stanza 42: School’s response to examples of anxiety
- *Strophe 18: Working with the SENCo*
  - Stanza 43: New amazing SENCo
  - Stanza 44: Working together
- *Strophe 19: Support from the autism team*
  - Stanza 45: Back of the queue for autism support
  - Stanza 46: Limited advice from the autism team

Part 9: Lockdown
- *Strophe 20:Lockdown: difficult return to school*
  - Stanza 47: Lockdown: school closures
  - Stanza 48: Getting back into school

Part 10: The second EHC application
- *Strophe 21: Help with the second EHC application*
  - Stanza 49: Going for an EHC
  - Stanza 50: Getting help with the EHC application
  - Stanza 51: Getting help: a quality application
- *Strophe 22: Application sent and accepted*
  - Stanza 52: Sending off the EHC application
  - Stanza 53: Needing to do everything right
  - Stanza 54: EHC application accepted

Part 11: Hiding
- *Strophe 23: Hiding from other people in school*
  - Stanza 55: Running or hiding away from other people
  - Stanza 56: Deemed to be rude
  - Stanza 57: Wanting to hide

Part 12: Getting a specialist provision place
- *Strophe 24: Finding a school place*
  - Stanza 58: EHC plan agreed/ no agreed school places
  - Stanza 59: Oversubscribed schools
- *Strophe 25: No new updates*
  - Stanza 60: Nothing happening/ no new updates
  - Stanza 61: Unrealistic positives
- *Strophe 26: Specialist school placement*
  - Stanza 62: Accepting a specialist provision place
  - Stanza 63: Not ideal but she is happy
- *Strophe 27: Growing up, healing and finding her autistic identity*
  - Stanza 64: Growing up and finding herself

Part 13: Fighting the battle
- *Strophe 28: Feeling frustrated from gaining knowledge*

    - Stanza 65: Ignorance is bliss
    - Stanza 66: Frustrated, feeling drained and running out of steam
  - *Strophe 29: Constant battle*
    - Stanza 67: Wanting to work with the LA
    - Stanza 68: Training self not to get attached
- **Part 14: Not being validated/ importance of having an advocate**
  - *Strophe 30: Confidence from knowing the law and having support from SENDIASS*
    - Stanza 69: Knowing the law/ advocating for others
    - Stanza 70: SENDIASS as advocates
    - Stanza 71: Confidence and validation from SENDIASS
  - *Strophe 31: Having your perception changed/ not being validated*
    - Stanza 72: Teaching the teachers
    - Stanza 73: Fabulous support groups
    - Stanza 74: Having your perception changed
    - Stanza 75: School staff not providing validation
  - *Strophe 32: SENDIASS representing Kaylee's lived experiences*
    - Stanza 76: SENDIASS representing Kaylee's views
    - Stanza 77: Taking onboard Kaylee's lived experiences
  - *Strophe 33: Having to justify the need for an EHC*
    - Stanza 78: Justifying yourself to the practitioners
- **Part 15: No alternative**
  - *Strophe 34: Having no alternative*
    - Stanza 79: Blind leading the blind: huge learning curve
    - Stanza 80: Knowing what she needed
    - Stanza 81: No alternatives
- **Part 16: Seeing the positives**
  - *Strophe 35: Willing to try anything: she's grown as a person*
    - Stanza 82: Desperate to start at new setting
    - Stanza 83: Growth as a person
  - *Strophe 36: Positive about the future*
    - Stanza 84: Huge weight off their shoulders
    - Stanza 85: No longer firefighting and contingency planning
- **Part 17: The school culture**
  - *Strophe 37: School culture*
    - Stanza 86: Schools not realising the impact they have

Appendix O: Psychological subject map of Anna's narrative

Part 1
Stanza 1: Kaylee/ she (=Kaylee), we/ us (=Anna and her husband)
Stanza 2: we (=Anna and her husband)
Stanza 3: we (=Anna and her husband), they (=dyslexia specialist)
Stanza 4: her/ she (=Kaylee)
Stanza 5: she (=Kaylee), I (=Anna), us (=Anna and her husband)
Stanza 6: she (=Kaylee), we (=Anna and her husband), CAMHS/ they (=CAMHS), I (=Anna)
Stanza 7: they/ we're (=CAMHS), we're (=Anna and her husband); I (=Anna)
Stanza 8: I (=Anna), she (=Kaylee)
Stanza 9: she/ her (=Kaylee)
Stanza 10: she (=Kaylee)
Stanza 11: I (=Anna), she/ her (=Kaylee)
Stanza 12: PDA specialist/ they (=PDA specialist), we (=Anna, her husband and Kaylee), I (=Anna)
Stanza 13: husband's reaction - redacted section
Stanza 14: we/ us (=Anna, her husband and Kaylee), I (=Anna)

In Part 1, Anna introduces Kaylee, her daughter, and sets the context of her narrative by describing the overwhelming anxiety Kaylee started to experience in Year 4. Anna captures her and her husband's reaction to Kaylee's "overnight" panic attacks and she describes their attempts to understand the deterioration in their daughter's emotional wellbeing and their search for answers through contacting various services (dyslexia specialist, GP, CAMHS, PDA specialist). I feel that these practitioners/ services are introduced as minor characters and consider the main psychological subjects of Part 1 to be Kaylee (Kaylee/ she/ her) as well as Anna and her husband (we/ us/ we're).

Across this section of the narrative, I observe there to be a repeated switch in the main psychological subject from Anna describing Kaylee's behaviour and emotions to her explaining her and her husband's actions and responses. Where Anna becomes the main psychological subject herself, she is describing her own role in questioning practitioner's responses and being proactive in doing her own research and requesting assessments from specialists.

Part 2
Stanza 15: we (Anna, her husband and Kaylee?), school/ they (=school)
Stanza 16: we (Anna, her husband and Kaylee?), they (=school)
Stanza 17: they/ we've (=school), I (=Anna), she/ 'er (=Kaylee)
Stanza 18: I (=Anna), she/ 'er (=Kaylee)
Stanza 19: she/ Kaylee (=Kaylee), she (= Kaylee's teacher)
Stanza 20: it (=the positive relationship), I (=Anna)

In stanza 15 and 16, I feel that Anna and her husband are the main psychological subjects. Here, Anna speaks about her and her husband's interactions with Kaylee's school and their attempts to persuade them to put "measures in place" for Kaylee. The focus then shifts onto Kaylee's anxieties becoming "more severe", and Anna shares her response to being issued attendance letters by Kaylee's school. Anna then describes her own actions as the main psychological subject in stanza 18 in attempting to be Kaylee's advocate.

In stanza 19, Kaylee's Year 5 teacher is introduced as a minor character, but I interpret Kaylee to be the main psychological subject here as Anna's focus is on the positive impact of Kaylee's relationship with her teacher on her attendance and emotional response to school. In stanza 20, Anna becomes the main psychological subject once again, as she describes her actions in “mentioning EHCs to the school.”

Part 3
Stanza 21: she (=Kaylee)
Stanza 22: I (=Anna)
Stanza 23: we (=Kaylee and Anna, and her husband?), he (=educational psychologist), she/ her (=Kaylee)
Stanza 24: she (=Kaylee), they (=local authority), they/ school (=Kaylee’s school)

In stanza 21, Anna describes the presentation of Kaylee’s anxieties in school. Anna becomes the main psychological subject in stanza 22 as she describes her action as a consequence to apply for an EHC herself. In stanza 23, the educational psychologist is introduced as Anna describes the positive impact he had on Kaylee’s engagement with the assessment. Here, I consider Kaylee to be the main psychological subject. Stanza 24 concludes this part of the narrative with Anna explaining that her EHC application was rejected.

Part 4
Stanza 25: I (=Anna), they (=teachers), she (=Kaylee)
Stanza 26: she/her (=Kaylee)
Stanza 27: she/her (=Kaylee)
Staza 28: she/her (=Kaylee)

Part 4 of the narrative begins with Anna explaining her role in advocating for Kaylee in school. Across stanzas 26 to 28, the main psychological subject shifts to being Kaylee as Anna describes the debilitating impact of her anxiety on her educational and social experiences.

Part 5
Stanza 29: I (=Anna), she (=Kaylee)
Stanza 30: she (=Kaylee)
Stanza 31: I (=Anna), we’ve (Anna, Kayle and her husband), she (=SALT worker)

In stanza 29, I interpret Anna to be the main psychological subject. Here, she explains the action she took to request a private SALT assessment for Kaylee. Anna then follows this with an example of an observation she made in relation to Kaylee’s understanding of language which prompted her to take such action. I, therefore, consider Kaylee to be the main psychological subject in stanza 30.

There is a shift in psychological subject in stanza 31 from Anna voicing that she took action to hire in the SALT practitioner, to her description of the “amazing” work the SALT practitioner did and the positive impact this had on Kaylee’s confidence.

Part 6
Stanza 32: I (=Anna), me and my husband/ we (=Anna and her husband), she (=Kaylee)
Stanza 33: I (=Anna), she (=Kaylee)
Stanza 34: she’d/ Kaylee/ she’ll (=Kaylee)

Part 6 begins with Anna as the main psychological subject as she explains her actions in meeting with the secondary school regarding Kaylee’s transition. Anna then speaks about the courses her and her husband attended in order to learn more about how to support Kaylee themselves. Anna then continues as the main psychological subject in stanza 33 as she returns to explaining her advocacy role once again.

In stanza 34, Kaylee becomes the main psychological subject as Anna describes Kaylee not receiving the support Anna had emphasised she needed in all her meetings.

Part 7
Stanza 35: we (=Anna and her husband), I (=Anna)
Stanza 36: she (=Kaylee)
Stanza 37: she (=Kaylee)
Stanza 39: she/ she's/ she'd (=Kaylee)
Stanza 40: I (=Anna)

Stanza 35 captures Anna and her husband's experience of meditation and this event appears to have been the catalyst to Anna making the decision to move Kaylee to a different school. Kaylee becomes the main psychological subject in stanzas 36 to 39 as Anna provides examples of the impact of her anxieties on her social relationships and school experiences. Anna then focuses her narrative on herself as she describes her battle to have Kaylee's absences from school coded as "authorised".

Part 8:
Stanza 41: I (=Anna)
Stanza 42: I/ I'm (=Anna), they/ them (=pastoral staff)
Stanza 43: I/ I'm/ me (=Anna)
Stanza 44: we/ let's (=Anna and the new SENCo), I (=Anna), she (=SENCo)
Stanza 45: I (=Anna)
Stanza 46: I (=Anna), they/ them (=autism team)

Anna remains the main psychological subject in stanza 41, explaining her efforts to "project manage" the EHC process and pull practitioners into meetings. In stanza 42, I feel that the pastoral staff in Kaylee's school become the psychological subject as Anna describes their reaction to her telling them about Kaylee's anxieties.

In stanza 43, I interpret there to be a shift in the psychological subject back to Anna as she again speaks about her advocacy role in raising awareness of Kaylee's needs in school. I find it difficult to establish the main psychological subject in stanza 44 as Anna switches between herself (I), the new SENCo (she) at Kaylee's school and them both (we/ let's). I feel this could reflect the partnership working Anna describes in this stanza.

In stanza 45 and 46, Anna describes her disappointment towards the type of support she received from the autism team and this appears to have been the deciding factor in Anna re-applying for an EHC needs assessment for Kaylee.

Part 9
Stanza 47: I (=Anna), Kaylee/ she (=Kaylee)
Stanza 48: she/ 'er (=Kaylee)

Part 9 begins with Anna stating that she did take action to apply for her second EHC needs assessment. It then switches to Kaylee's response to being told that school would be closed because of lockdown and, in stanza 48, focuses on her anxieties around transitioning back into school once they had reopened.

Part 10
Stanza 49: I (=Anna)
Stanza 50: I (=Anna)
Stanza 51: I/ I'd/ I'm (=Anna), they (=charitable organisation)

Stanza 52: I (=Anna)
Stanza 53: I/ I'll/ you (=Anna)
Stanza 54: she/ she'd (=Kaylee)

In stanza 49 Anna reiterates her decision to re-apply for an EHC needs assessment for Kaylee and in stanza 50 she enlists support from a charity. She remains the main psychological subject as she reflects on the first EHC needs assessment that was carried out, but there is a switch to her talking positively about the help she received from the charity in stanza 51.

In stanza 52 and 53, Anna returns to being the main psychological subject as she describes the barriers she experienced when trying to submit the application for the EHC needs assessment.

Part 11
Stanza 55: she (=SENCo), she/ 'er (=Kaylee)
Stanza 56: she (=Kaylee)
Stanza 57: she (=Kaylee)

Kaylee features as the main psychological subject in each stanza in Part 11 which provides further insight into Kaylee's anxiety responses in school and her desire to hide away from other people. It also states that certain anxiety responses were misunderstood by other people.

Part 12
Stanza 58: we (=Kaylee, Anna and her husband?), I (=Anna), they/ they're/ they'd (=the local authority)
Stanza 59: I/ you (=Anna)
Stanza 60: I (=Anna)
Stanza 61: she/ she's (=EHC team manager)
Stanza 62: they'd/ they (= local authority/EHC team), they (=specialist school), I (=Anna)
Stanza 63: Kaylee/ I'm/ I've/ she (=Kaylee)
Stanza 64: she's/ her/ 'er (=Kaylee)

I consider Anna to be the main psychological subject in stanza 58 and 59 and it describes the barriers she faced in finding a school place for Kaylee. Anna presents herself as being proactive in trying to obtain updates and in visiting different schools to find a place herself. Anna states that she submitted a complaint to the local authority regarding timescales in the hopes it would get things moving.

In stanza 61, the psychological subject shifts to the EHC team manager and Anna speaks about the "unrealistic positives" that she would try to emphasise. I feel the local authority EHC team is the main psychological subject of 62 as Anna explains the solution they found to the lack of school places. I interpret the psychological subject to then shift to Anna as she describes her reaction to receiving the offer of a school place for Kaylee.

Anna then captures Kaylee's reflections of her new school place as she becomes the main psychological subject of stanza 63. Anna then shares her own thoughts towards the positive impact of the school place on Kaylee's personal growth.

Part 13
Stanza 65: I (=Anna)
Stana 66: I (=Anna)
Stanza 67: I (=Anna)

Stanza 68: I (=Anna)

In this part of her narrative, Anna expands on her experience of going through the EHC process and feeling the local authority had power and control. Her response is in answer to my question and she remains the main psychological subject across all stanzas as she reflects on her naivety at the beginning of the process, her growing confidence in her knowledge and understanding, her frustrations around having to battle for support and having to detach from being a mother so that she could fight and advocate for her child.

Part 14
Stanza 69: I/ you/ me (=Anna)
Stanza 70: SENDIASS/ she (=SENDIASS worker), I (=Anna)
Stanza 71: I/ me (=Anna)
Stanza 72: I (=Anna), teachers (=teachers)
Stanza 73: groups/ them (=support groups)
Stanza 74: your/ you (=Anna)
Stanza 75: your/ you're (=Anna)
Stanza 76: she (=SENDIASS worker), it (=views shared by SENDIASS worker)
Stanza 77: she (=SENDIASS worker), it (= Kaylee's voice being shared)
Stanza 78: gaslighting/ it' (=gaslighting), you (=Anna)

At the beginning of part 14, I ask Anna to consider how gaining knowledge of the EHC process was helpful. In stanza 69, Anna reflects on her growing confidence from knowing the law which supported her in an advocacy role; however, in stanza 70, I observe a shift as the SENDIASS worker becomes the main psychological subject and Anna shares her role in sharing Kaylee's voice in meetings. In stanza 71, there is a shift back to Anna as the main psychological subject as she reflects on the impact that SENDIASS had on her confidence to request the support for Kaylee. I sense this feeling of confidence is conveyed again in stanza 72 as Anna states that she was having to "teach the teachers".

I observe there to be a shift in the way Anna narrates her experience in stanza 74 as she uses the pronoun "you" when providing further explanation around feeling as though her perception had been changed in meetings. Anna continues to use the pronoun "you" in stanzas 74 and 75 in response to me asking her to expand on what she meant by the term "gaslighting". Prior to her interview, Anna had shared that she had created a timeline of the events that had occurred during the EHC process. I wonder, therefore, whether her shift in pronoun use is due to her trying to provide general illustrations of her point without having much thinking time, as opposed to the personal examples she shared in first-person earlier in her interview that perhaps she had thought about in advance of the interview.

In stanza 76 and 77, the SENDIASS worker becomes the psychological subject as Anna once again focuses her narrative on her appreciation for the support she received from this practitioner. I then consider "gaslighting" to be the psychological subject of stanza 78 as Anna summarises her conceptualisation of this term.

Part 15
Stanza 79: you (=parents/ carers), I (=Anna)
Stanza 80: I (=Anna), people/ they/ them (=practitioners in the EHC process)
Stanza 81: I/ you (=Anna)

In stanza 79, Anna shifts between using the pronoun "you" and the pronoun "I". Here, Anna appears to be speaking hypothetically about what might happen to some parents or carers during the EHC process and I sense that Anna is not relating such experiences to her own situation. Anna remains the psychological subject in stanza 80 as she explains how “fortunate” she was to not have to work as this allowed her to “get in/ and start understanding” the EHC process.

In stanza 80, Anna presents as being confident in her knowledge of what support Kaylee needed as opposed to the practitioners who she appears to feel did not know the answers. I once again observe a shift in pronoun in stanza 81 as Anna uses the pronoun “you” to describe her experiences. I wonder if perhaps Anna felt her experience here would be shared by any mum going through the same process.

Part 16
Stanza 82: me/ I (=Anna), she/ her (=Kaylee)
Stanza 83: she/ ‘er (=Kaylee)
Stanza 84: I/ my (=Anna)
Stanza 85: I (Anna), we (Kaylee, Anna and her husband)

In stanza 82, I consider the main psychological subject to be Kaylee as Anna explains their desperation to get her started in her new school. Kaylee remains the psychological subject of stanza 83 as Anna describes the positive impact of the new setting on Kaylee. I interpret Anna to be the psychological subject of stanza 84 as she shares what she told Kaylee when attempting to encourage her to give the new setting a go. At the beginning of stanza 85, I consider Anna to be the main psychological subject as she describes the relief she feels from Kaylee’s positive experiences of her new setting; however, I feel this shifts towards the end of this stanza as Anna changes to the use of we, which I interpret as representing Kayee, Anna and her husband.

Part 17
Stanza 86: schools/ them/ teachers/ they (=staff in schools)

In stanza 86, staff in schools become the main psychological subject as Anna describes what she perceives to be the culture in schools and explains its impact on families.

Appendix P: Anna’s presentation of identity

Researcher	“I was doing lots of research” “I was looking at PDA” “I was looking at EHCs” “I was looking at SALT”
Teacher	“I’d given them the information” “I was going to other members of staff/ saying have you heard of PDA?” “...I was sending ‘er lots of information” “so I was having to teach the teachers”
Project manager	“I tried pulling everyone together” “I’m gonna have to project manage this myself” “...I’d got all my assessments and reports lined up”
Team player	“I wanted to work with these people” “I wanted it to be a team effort”
Applicant	“I applied for one myself” “I’ve got to apply for an EHC again” “I applied for one again” “I had to get this”
Chaser	“I chased it up again” “I chased the EHC team again” “I used to phone them/ you know like weekly”
Challenger	“I appealed” “I kinda had to argue with them” “I put in a complaint” “I questioned that” “...asking these probing questions”
Fighter	“I’m fightin’” “an’ I’m fightin’ for” “an’ I’m fighting for somebody”
Parent	“because I’m a mum”
Advocate	“so I could be her advocate” “I was mentioning EHCs to the school” “I used to go in all the time” “I ‘ad loads of meetings with…” “I was telling them she shouldn't get unauthorised attendance” “When I was explaining to ‘em what she was going through” “I’m an advocate” “I do a lot of advocat-/ advocating for other parents now”
Clueless	“the first time I was clueless…” “because I was clueless at that point” “I was naive and impressionable” “I’d not done a lot of research into it” “I didn’t know law”

	"I was like being guided by them" "I didn't know the truth" "...I had no confidence"
Knowledgeable	"I started gaining knowledge" "because then I knew what er the law was" "I knew what she was entitled to" "I started picking up knowledge" "but I suppose my confidence 'ad grown as well" "because I had more information and knowledge" "...I went on so many courses…" "I knew that's what she needed"
Detached	"I was always crying at meetings" "an' I trained myself as well/ personally not to get attached" "It's mi job" "I'm paid to do it and er" "so I like kinda trained that out of me" "I wasn't as attached as I had been before"
Worker	"I had time off with Kaylee" "...I 'ad to pack in work" "I was working before then" "I've got options now" "I'm looking at work again"