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# **Supporting interprofessional collaborative practice through relational orientation**

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## **Abstract**

Relational processes in the context of interprofessional collaboration are understood mainly in terms of individual action. This study argues that focusing on individual action limits our understanding of some of the most successful relationship-based collaborative practices. To shift the focus from individual action to co-action, this study investigated co-action oriented practices in multi-agency teams working with children and young people identified as living with High and Complex Needs (HCN). The methodology used in this study combined a relational research orientation with the principles of narrative theory, in order to engage HCN practitioners in dynamic conversations. Through dialogue, the HCN practitioners investigated their valued collaborative practices. These practices were then further explored in terms of how collaboration could shift from individual to co-action.

The outcomes of the study highlighted a number of successful relationship-based collaborative practices that are often overlooked. These range from simply having small talk, being personal and flexible, to addressing more complex situations that might otherwise be avoided. Appreciative exploration was identified as a way to step outside of one's own beliefs and become curious about how contradictory views might be valid within a community of understanding. Finding a respectful way to approach what we want to avoid holds arguably most potential for positive change.

The study concluded that three aspects were critical to the engagement of practitioners in collaborative co-active practice: (1) paying attention to the process of relating; (2) acknowledging values, interests and concerns of practitioners in their daily practice, and (3) respecting current practices. Engaging with co-active practices in this way energised practitioners and fostered an innovation-seeking attitude and collective learning. As the practitioners in this study demonstrated, relational orientation opens up possibilities to shape co-action, and offers a unique tool for transforming collaborative practices. Put simply, the relational shift shows what we achieve together, we cannot do alone.

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## **Glossary of Māori terms**

**Ako mai ako atu** – reciprocity of learning and teaching

**Mahi ngātahi** – collaboration

**Manaakitanga** – loosely translated as hospitality, manaakitanga means upholding the mana (dignity) of others. In Maori culture, manaakitanga is a value that is central to society and considered to be hugely important

**Mātauranga Māori** – Māori theory/knowledge of education

**Te kotahitanga** – unity of purpose

**Tuakana teina** – refers to the relationship between an older (tuakana) person and a younger (teina) person and is specific to teaching and learning in the Māori context

**Whakawhanaungatanga** – relating

**Whānau** – in Māori society a family is not the nucleus family that western society define. It is the collective of people connected through a common ancestor

# Chapter 1.

## Introduction

### 1.1. Brief Overview

This is a study of relational process in the context of interprofessional collaborative practice. In exploring the literature and research on interprofessional collaboration it became apparent that there is a growing interest in the role that relationships play in successful interprofessional collaboration (Atkinson et al., 2007; Hernandez, 2013; Schot et al., 2020).

The current study investigates how Kenneth Gergen's (2009) relational theory can enrich the practice of interprofessional collaboration. Current interprofessional collaboration models of practice, when looked at from a relational theory perspective, appear to overly focus on individual action. Gergen's relational orientation, which is rooted in social constructionism, shifts this focus to *co-action* to account for relational process (Gergen, 2009; Hosking, 2011; McNamee, 2014). From a wider perspective, this study explores a rather philosophical question of how people become who they are as professionals and as human beings through relational processes. In this study, practitioners in charge of coordinating High and Complex Needs (HCN) teams and I engaged with theory to explore relational orientation in their practice.

The HCN Intersectoral Unit in New Zealand is responsible for providing coordinated health, social and education services to children and young people identified as living with high and complex needs. The unit employs a small group of highly experienced practitioners with community, social work and psychology backgrounds to coordinate local HCN teams. HCN teams are groups of professionals and non-professionals who are significantly involved in the life of the child receiving HCN service. They include the young person and their family/whānau, and may include social workers, teachers, school principals, health professionals, educational psychologists, resource teachers learning and behaviour (RTLb), lawyers, and

others. Teams stay together for the duration of HCN plans or longer. On average, HCN plans last for two years. At any stage in the life of the HCN plan, the teams typically face sudden school exclusions, housing issues, frequent team member changes, unaddressed health problems, funding pressures, lack of agency commitment, and many other issues. Consequently, HCN practitioners manage highly complex, turbulent, continually changing family and social situations. Greenhalgh and Papoutsi (2018) capture that for them:

The world moves quickly; baselines shift; technologies crash; actions are (variously) constrained; and certainty is elusive. The gap between the evidence-based ideal and the political and material realities of the here-and-now may be wide. Decisions must be made on the basis of incomplete or contested data. People use their creativity and generate adaptive solutions that make sense locally. The articulations, workarounds and muddling-through that keep the show on the road are not footnotes in the story, but its central plot. They should be carefully studied and represented in all their richness. (Greenhalgh & Papoutsi, 2018, p. 2)

This study joins recent calls for more research into those daily practices of professionals in effecting change through mundane, everyday solutions (Schot et al., 2020; Sharp, 2018). Additionally, increasing research evidence suggests that the solutions to complexity, similar to that facing HCN practitioners, are more likely to be found in creative local adaptive solutions than in systematically designed and planned interventions (Greenhalgh & Papoutsi, 2018; Madsen, 2016; Schot et al., 2020; Sharp, 2018). In this study I aim to recognise, engage with and further support the existing relational practices in the HCN context. In this process, I aim to address the gap between the evidence-based ideal and material reality. It could be said that this study explores the richness of day-to-day relational articulations as the central plot of the practices of the HCN Intersectoral Unit of the New Zealand government.

One of the basic premises underpinning this study is that some of the HCN practices most valued by practitioners are co-action based. Behaviour is usually defined as the way one acts. This way of defining human behaviour makes our responses individualistic, limits the space for action, invites blame shifting and so on. A growing body of knowledge refers to human behaviour as co-action (Camargo-Borges, 2015; Gill & Thomson, 2020; Hosking, 2011; Mocheta, 2020; Mudry et al., 2019), or action that is relational and inextricably linked with the action of another. Relationally

oriented practices emphasise the process nature of co-action and foster collaboration and joint responsibility (Gergen, 2009; McNamee & Gergen, 1999; Sharp, 2020). But, because they sit outside the mandated evidence-based practice models, co-action based, relationally oriented successful collaboration experiences are 'naturalised' by practitioners, not made visible and not explicitly explored and documented as part of effective practice. One way of making hidden solutions visible comes from narrative theory, which has been adapted as a methodological tool (Combs & Freedman, 2016; Morgan, 2000; White & Epston, 1990). This tool was used in this study to engage HCN practitioners in explicitly exploring everyday practice solutions and highlighting effective relational orientation in their practice. As a result, principle-based HCN collaborative maps were developed (Madsen, 2016) to further guide the HCN practice in a relational direction.

In addition, the societal changes associated with increased poverty, housing issues, and inequality evident in New Zealand and internationally have seen more attention given to exploring innovative ways of working together across cultural, ethnic and socio-economic divides (Madsen, 2016; Sharp, 2018). The shift in relational positioning towards co-action and away from focusing on individual action promotes culturally respectful collaborative partnership (A. H. Macfarlane et al., 2008, 2015). Penetito (2015) explains that effective dialogic relations that can generate ethics of responsibility must be preceded by mutuality. This study argues for practice that is much more accountable to the people with whom human service professionals work (Bodiford & Camargo-Borges, 2014; Sharp, 2020).

Gergen's (2009) relational orientation in practice is inclusive and respectful of human capacity (McNamee, 2014). It offers a lens for exploring potentially new ways to make interprofessional collaboration more inclusive and respectful. Therefore, this study focused on what it means to be relationally responsive and relationally engaged in the context of HCN collaboration.

Following on from this brief introduction to investigating relationally engaged HCN collaboration, the remainder of this chapter will outline the two specific research questions, and then provide a more detailed description of the HCN collaborative practice and the importance of this work within a wider social context. These sections highlight the rationale for considering relational orientation in HCN practice. The next section clarifies the position on language and writing adopted in this study and illustrates what co-action means in the context of academic writing. The final section provides a personal history and the significance of various theories and



theorists on this personal and professional journey, leading ultimately to this PhD study. The chapter concludes with an overview of the rest of the thesis chapters.

## **1.2. Research Questions**

The two research questions that framed this study were:

1. In what ways is relational practice already present in effective HCN interprofessional collaboration?
2. How can relational orientation support collaboration in HCN practice?

To answer the first research question, a qualitative inquiry using a narrative methodology was employed (Gergen & Gergen, 2003; Gergen et al., 2015; Jackson & Mazzei, 2018). Specifically, this involved two one-hour conversations between each participant and myself, structured around the basic principles of narrative theory (White, 1998; White & Epston, 1990). Stage one (the first conversation) addressed the first research question and generated a collection of successful collaboration stories most valued by the practitioners. In stage two (the second conversation), these stories provided rich grounds for narrative conversations which facilitated practitioners' engagement with the relational potential they value in their practice.

The second research question involved inviting HCN practitioners to reflect on the usefulness of a relational perspective for their professional practice. Practitioners' reflections of the ways a relational perspective can open up new possibilities in practice was captured in principle-based collaborative maps.

By introducing the practitioners to specific aspects of Gergen's (2009) relational theory, this study aimed to provide an example of how researchers and practitioners can bring theory and practice closer together in a joint exploration (Bodiford & Camargo-Borges, 2014; Larsen & Willert, 2018). In particular this study explored how HCN practitioners' understanding of Gergen's relational theory and the implications of focusing on co-action can enrich their collaborative practices. Principle-based HCN collaborative maps (Madsen, 2016) were used to capture the local, generative, co-constructive and future-oriented perspective (Bodiford & Camargo-Borges, 2014) and link relational theory and HCN practice. The generated maps may be useful to support a relational orientation in HCN, and potentially other groups engaged in interprofessional collaborative practice.

### **1.3. High and Complex Needs Unit and Collaboration**

The HCN Unit in New Zealand consists of interprofessional teams and is dependent on interprofessional collaboration for successful outcomes. Within this unit, teamwork exists to serve the children and young people assessed to have the highest level and most complex needs in the country. Interprofessional collaboration in these teams is hence complex and challenging.

In 2007, the government of New Zealand started the HCN Unit, made up of representatives from the Ministries of Social Development, Health and Education. Close collaboration is at the heart of the HCN process. HCN practitioners are one of the most experienced professional groups in practising interprofessional collaboration. Their work is based on the understanding that better results are achieved for children and young people when agencies work closely together to focus on the outcomes (HCN Strategy, 2005).

With the recognition that social inclusion is one of the important goals in education, the interconnectedness of issues in human services is increasingly recognised. The problems that young people face frequently need to be addressed outside of single professional and disciplinary boundaries (Thomas & Loxley, 2001). Therefore, effective interprofessional collaboration is necessary to address the interconnections in supporting children and young people living with high and complex needs.

The important role that interprofessional collaboration plays in terms of ensuring successful outcomes for clients is well recognised in the literature (Broadhead et al., 2008; Thomas & Loxley, 2001). Related to this, it has been documented that problems with collaboration of professionals within and across support teams place the children's outcomes at risk (Lips et al., 2011; Rose, 2011; Sands et al., 1990). The problems with interprofessional collaboration are often relationship related (Atkinson et al., 2007; Cooper et al., 2016; Hernandez, 2013; Pfaff et al., 2014). Although the role that relationships play is increasingly recognised, agreement on how to address and improve interprofessional relationships is difficult to find in the literature. Therefore, this study draws on the recent interest in relational ideas evident in the area of human services (Madsen, 2016; Mocheta, 2020; Sermijn, 2020; Sharp, 2018, 2020), education (Dole, 2020; Gergen & Gill, 2020; Gill & Thomson, 2020; Haslebo, 2020), and organisational change (Larsen & Willert, 2018; Raelin, 2006; Sharp, 2020). Relationally oriented collaboration is conceptualised in

this study as a process of co-action, which is different to viewing relationships as a step in the process to achieve successful collaboration.

#### **1.4. Situating the Study in a Wider Social Context**

Around the world and in New Zealand, communities are facing serious and complex issues such as the rise of poverty, inequality and nationalism (Gilroy, 2013; McGarvey, 2017); Sharp, 2018), climate change (Eisenstein, 2018), and unethical use of technological advancements (Harari, 2018), to mention a few. For HCN teams this may manifest as: (1) a lack of basic human necessities such as food, housing, health care; (2) a rise in mental health issues such as depression and suicide; or (3) easy access to dangerous communities and propaganda such as violent internet content. Social and political commentators reflect a sense of growing scepticism towards political leadership's ability to adequately address these issues, and call for creative, local adaptive solutions (Gilroy, 2013; 2015; Sharp, 2018, 2020).

According to contemporary social and political commentators (Eisenstein, 2018; Harari, 2015; Hickel, 2017; McGarvey, 2017), communication technologies have increased global connectivity. As a result, social change is fast, more difficult to understand and predict, increasingly turbulent, and influenced by social media. These challenges seem to call for a fundamentally different approach to how we understand the complexity of social relationships and what we can do to improve them at both local and global levels (Eisenstein, 2018; Hickel, 2017; McGarvey, 2017; Sharp, 2018). For Gergen (2009), the fundamental change needed concerns the very basic unit of our society. He argues that by focusing on co-action rather than individual action, relationship becomes the basic unit of our society.

For relational constructionists, relationships are not conceptualised as an entity that can be observed and studied objectively, from an observer perspective, but as a process in which we are deeply embedded and from which a sense of self arises (Gergen, 2009). This study presents relational constructionist theory as a fundamentally different perspective on understanding and shaping the way we relate to each other. It orients itself around the idea of replacing the individual with relational process and relational self as the basic unit of society (Gergen, 2009; Hosking, 2011, McNamee, 2014).

In the next section I discuss how this conceptual positioning is made possible by the way we conceptualise language and invite the reader to consider the social constructionist view on language and writing.

## **1.5. Social Constructionist View on Language**

This study is primarily concerned with what it looks like to focus on the process of relating and what possibilities this understanding might offer HCN practitioners and other professional groups in the future. One of the main ideas permeating this thesis is that everything worth preserving and nurturing originates in a relational process. This process originates in language and language is reported in writing. Therefore, how language is conceptualised is a critical aspect of this thesis.

The social constructionist position on language will be covered in more detail in the literature review and methodology chapters. In this section, two critical points will be introduced. Firstly, social constructionists adopt a constitutive view of language, which proposes that we live in worlds of meaning and that the words we use construct those worlds, rather than simply representing them. Secondly, social constructionists propose that every time we speak of something, we do so rooted in a community of understanding or tradition. A significant consequence of words always belonging to a certain tradition is that they also carry the values of that tradition. In that sense, there is no value-free language or action (Gergen, 2013, 2015a; Gergen & Gergen, 2003).

Social constructionists suggest that language is constitutive of reality. Thus, “when we can change our patterns of interaction we become something we were not before” (Raboin et al., 2012, p. 8). This view of language opens a space for new identities and new action. This space is captured in the following example, paraphrased from Gergen (2009): as you, the reader, read these words, they become yours. You might even recognise some ideas as yours. I have no insight into the meaning attached to the words on this page at the moment you read them. One might even say it becomes unclear whether they are yours or mine. In this space between your meaning and my meaning attached to the same words, we can see a glimpse of a relational process that will get lost as soon as I push to convince you of the meaning of my ideas and you labour to focus on what I, as the writer, mean. From the relational constructionist perspective, this space of co-acting, this

*space between* is more valuable than my attempts to clearly articulate my own ideas as required in the act of writing a PhD thesis.

Inspired by relational theory (Gergen, 2009), I will argue that in this space between lies much valuable potential for successful HCN interprofessional collaboration and that this potential comes to light in the day-to-day practices of HCN team members.

In the next section I describe my personal journey of being introduced to the ideas that transformed the way I understand my identity, but also inspired and motivated this study. I present how the work of postmodernist, Michel Foucault, social constructionist, Edward Said and relational constructionist, Kenneth Gergen, opened alternative accounts of my own history and with it a space for new possibilities in my life and work. This in turn highlighted a responsibility for action sitting with me, and the urgency then for me to bring my understanding of the value of relational orientation to this research on shaping interprofessional collaboration.

## **1.6. Personal Background**

Survival in fact is about the connections. (Said, 1994, p. 336)

On a personal level, I wish to make a contribution originating from relationships with ideas and people that have inspired me and have opened up new possibilities in my life. Although this study has been influenced by many such relationships, it is first and foremost inspired by the work of social constructionists and, more specifically, rooted in my interest in Kenneth Gergen's (2009) relational constructionism.

In this section, I will briefly introduce the main concepts and authors whose efforts inspired this work. Although this study is situated in an HCN unit in New Zealand, it evolved from deeply personal life experiences. Therefore, I mention those personal life experiences in this introduction as they have steered me towards the postmodern and social constructionist body of knowledge that forms the conceptual orientation of this study.

I was born in Croatia, a republic of Yugoslavia, in the mid 1960s where I lived until the war that ended Yugoslavia started in 1991. Only a couple of years before the war, it would have been inconceivable for me to leave Yugoslavia. As a result of my upbringing and education, I grew up confidently devoted to the Yugoslavian nations' "brotherhood and unity". This was the most ubiquitous and powerful slogan of the

time, that still resounds strongly in my childhood memories. Both my parents, both sets of grandparents and generations before them, were born and lived all their lives in Croatia. As a young adult in the years just before the war, I learnt that my mother's ancestry could be traced to mid 18th century Serbia.

This was when the Austrian Empress, Maria Teresa, to protect the empire from Ottoman invasion, populated poorly inhabited parts of Croatia with Serbian families and promised them land. Upon their arrival, they found destitute land with only rocks in abundance. Even after the settlers dug out the rocks, with backbreaking work, the soil needed constant protection from being washed away by rain. Unknown to me throughout my formative years, this is how my mother's family lived for many generations after moving to Croatia. The only connection her family had with her Serbian ancestry, and the only difference between them and the people they met there, was the Christian Orthodox religion, which under the communist rule didn't really flourish.

So, I grew up thinking I was Croatian, with my cultural and ethnic identity very much tied to Croatia with a strong bond to all Yugoslavian nations. I was in my late teens when I started realising that people outside my family thought differently about who I was. This was when the politics of ethnic identity in Croatia started to lead to the downfall of Yugoslavia. I began to realise that, because of my mother's long-lost ties to Serbian ancestry, I was not seen as being Croatian enough by the politics of the time and consequently, by many people I lived with. This was all unveiling in the context of Croatia's growing wish for political and ethnic independence and a time of intense celebrations of all that was considered purely Croatian: language, history, religion, ethnicity, and so on. It is difficult to describe the depth of loss I felt in this newly discovered sense of otherness.

The political upheaval and war that followed led my family and I to migrant life. New Zealand became our new home. While Yugoslavia disappeared, Croatian history and language books got rewritten, erasing much of the content that made up who I believed I was. New Zealand afforded more than we ever expected to find in a foreign place. Our experiences of humanity, inclusion and respect for diversity overwhelmed us at times. This made the still deepening sense of otherness hard to explain and even harder to attend to. I felt it residing within me and therefore felt incapable of fighting it. While this was undoubtedly derailing my life, it also motivated me to learn.

For a long time, I feared introducing myself. Decisiveness and exclusiveness seemed unavoidable. Where do I start? What do I introduce myself as – a woman, a person who grew up in an ethnically mixed family, an immigrant escaping war, a practitioner in the learning support field? I avoided the murky territories of ethnicity. Am I Croatian, Yugoslavian, or a Kiwi, Northland Dali, Tarara? What does it all mean anyway? Whatever answer I gave, left me with a sense of betraying a part of me. Clearly, I was lacking the tools to understand and deal with the persistent sense of otherness, loss of identity and the accompanying loss of tradition. Even harder to deal with was – what does this mean for my future and the future of my children here in New Zealand?

It is hardly surprising for an immigrant coming from a war-torn country which doesn't exist anymore, to experience a shattered sense of stability often attached to identity. Consequently, I developed an interest in what identity means, who the self is, how we develop and maintain our identities. Trying to find the answers has provided some of the most valuable, life-changing learning opportunities. It led me to question many of the taken-for-granted assumptions around which I used to orient my life. It also gave me the courage to consider some very daring alternatives, which transformed my loss and anger into new potential, a sense of care for relationships and relational responsibility.

The theories I explored included the work of Edward Said (1994, 2003), who introduced me to a growing literary community of theorists celebrating a more inclusive conception of identity. Engaging with this work set me on a learning journey that began with feeling rejected and disheartened but soon moved to feeling relationally attuned and motivated to act from a position of care, culminating in undertaking this doctoral journey.

Said's (1994) term "internationalist counter articulations" (and "hybrid counter energies") lit a spark of hope in positioning myself differently in relation to the feeling of otherness that was there to stay. It led me to question who I was, and who I can, or cannot be. Said wrote about developing and upholding a vision of coexistence with a goal of transforming the self from a unitary identity to an identity that includes the other without suppressing the difference (Said, 1994). Said questions the idea that we can clearly separate ourselves from others and the rest of the world. This was my introduction to the spaces between.

For Said (1994), showing how cultures have always mixed and lived together is the most significant contemporary challenge. Coming from a migrant background, Said noticed that people with migrant life experiences have no choice about embracing the coexistence of different cultures within. Therefore, he maintains, migrants have an ethical obligation to share their learning with the rest of the world. With this, I was motivated to start learning and writing. I had given myself permission to see migrant life experiences as valuable.

By demonstrating that Orientalism, signifying an inferior other, is a social and cultural construct, Said (1994) gave me control over the meaning attached to the events of my past. The historical events (commonly referred to as real events) had not changed, but the meaning I attached to them had. This change in meaning transformed my life. Additionally, I learnt that alternative accounts of who I was in the past also opened up new possibilities of who I could be in the future. This understanding, in turn, transformed the loss and the devastating sense of otherness into committed motivation for exploring this potential in all aspects of my life.

Said's work also introduced me to the world of postmodern literature and specifically the work of Foucault (1982), which inspired steady questioning of other taken-for-granted ideas in my practice. This learning made the current study possible. The appreciation I owe Said for enriching my personal life extends here to Foucault's influence in my practice. More than anything else, he made me wonder what alternative accounts might come to life if we explore the history of psychology and education.

Foucault (1982) was interested in the relationship between power, ways of knowing and institutional practices (Gutting, 2001). He was interested in the way power relations transform human beings into subjects and in how we all become complicit in the face of that power (Foucault, 1982; Jardine, 2005). Foucault's work placed the lessons I learned from Said within a wider social context and helped me understand how we unintentionally shape and are shaped by the social systems and norms we create. His work has provided me with a different lens for understanding the ways psychology becomes a piece of a complex social puzzle.

From the perspective of the current study, it is interesting to note that Foucault (1982) conceptualises power as a process. Rather than viewing power as an object of scientific study, Foucault conceptualised it as a 'capillary form of existence', a network which runs through the whole social body, reaching every individual



(Foucault, 1982). In other words, for him, power is an embodied process, and this has significance for this study as will be elaborated on in later chapters.

Foucault showed that forms of knowledge, such as the field of psychology, serve to discipline and train human beings into subjects to meet the needs of society (De Schauwer et al., 2018). The disciplining action becomes successful when we become compliant in the maintenance of the power inherent in social systems (McMenamin, 2014).

The following is an example of my compliance with the power of the system in which I work. Despite my role as a psychologist in promoting the importance of trusting, stable family relationships, when a five-year-old is being moved to yet another new caregiver, I will rarely stand up against this move. In this act of compliance with the power of the state care system, I have only accepted my role as a tool of that power and made it stronger. Even harder to admit, when another colleague in the same meeting protests, justifiably making everyone uncomfortable, my first reaction is thinking “Why is he doing this, when he knows he won’t achieve anything?” I might even feel a fleeting sense of accomplishment with my act of obedience. However, my recognition of the values associated with my act will dawn on me later and will likely haunt me for much longer.

Foucault (Gutting, 2005) calls for a ‘critical ontology of ourselves’. Before being introduced to the writings of Foucault, I would give in to my powerlessness, thinking “there is nothing I can do about this”. After Foucault, my thinking changed to: “It may be hard to see what one person can do, but I understand why this might be and that must help me find what I can do”. Committing to this study is one way to address what I can do. HCN practitioners and HCN teams deliver a respected, high level social service. They work in collaborative teams where important decisions for children are made. In some ways this study is about the potential of relational positioning to empower practitioners and HCN teams to act more intentionally in the service of social justice and ethical practice.

The work of Foucault opened up exciting possibilities for new directions in the field of psychology. As a result, we are now seeing an increasingly strong call for the profession to critically consider the theoretical foundations of expert, evidence-based practice (J. Moore, 2005). Foucault’s methodologies, historical analysis of struggles, power relations, knowledge and subjectivity offer, as Allan (1996) suggests, a “box of tools”. The tools for better understanding the human

experiences, for moving away from the psychology of difference and problem behaviours and toward better recognition of the social context, equity and diversity (Riley et al., 2016).

Foucault's work suggests practice as a social and ethical endeavour with a central concern for social relationships. I am especially grateful to Foucault for highlighting the need for a more reflective attitude in understanding the social, historical and cultural situatedness of knowledge and practice. However, I had to meet the work of Michael White and David Epston, presented next, to learn a way to practice psychology that embodies that learning well.

White and Epston's narrative therapy (1990) has been used for more than three decades to help people generate new possibilities and ways of removing barriers in their lives (Morgan, 2000; White & Epston, 1990). The theory, on which the therapeutic approach is based, is primarily concerned with how self-narratives are used for meaning making and identity co-construction. As a social constructionist theory, narrative theory contends that this process is historically and socially situated and language centred (Morgan, 2000; White, 1998; White & Epston, 1990). Although it started as a therapeutic approach, narrative practices are now being used in community work, social work, health and education (Madsen, 2016).

I was introduced to narrative therapy in 1999 when I had just started working as an educational psychologist in special education. At the time, narrative therapy was just another training in a popular approach recommended by trusted colleagues. It didn't take long for the idea of narrative as a sense of self that is continually being recreated through interactions with people and the world around me, to become more than just another approach. It became a view of life that I could wholeheartedly embrace. It started explaining my work and my life in a way meaningful to me.

Being a new immigrant in New Zealand had a lot to do with my finding myself within the narrative view of life. This idea that there is no one universal truth, and that history is continually embellished and recreated in the context of the other, rather than remembered, became a remedy for my frustrations of feeling strong connections with the place I was so 'lucky' to have left. For example, the history books after the war in Yugoslavia have been completely rewritten and even though this was not a surprise, I felt a great sense of loss. Foucault helped me see that this also means that my history is not set in concrete. Said taught me that I have control

over the meaning I attribute to those events, while narrative theory offered a way of applying this understanding in real-life situations.

Professionally, I was an educational psychologist without much experience to rely on. My university training was mainly within ecological, cognitive learning theory, and a problem-solving approach with a strong socio-cultural direction. However, when I started working I found myself using a strictly behavioural approach due to the mandatory practice model. I still remember the comforting safety of observation charts and step by step interventions. Narrative theory gave me a tool while Said and Foucault gave me the courage to abandon the illusion that observable behaviour can explain the complexity of the human condition and account for the growing complexity of today's society.

In the early 1980s, Michael White and David Epston worked as therapists. They both independently noticed in their practice that universal approaches, commonly practised at that time, did not work well for indigenous people (Morgan, 2000). From this perspective, they took an interest in the work of Foucault. Therefore, the movement away from universal approaches and expert practices is an important theme in narrative theory.

One of the basic premises of narrative therapy is that the person is not the problem and the person is the expert in their own reality. This premise of separating the person from the problem is put into action through externalising conversations. The practice of externalising conversations is what narrative therapy is most recognised for. This will be discussed in more detail in the methodology chapter.

More importantly, I treasure the value narrative theory attaches to dialogue. Narrative theory suggests that whether intentional or not, whether we are aware of it or not, conversations shape our lives. The language we use, the taken for granted assumptions our life stories are based on, position us in our conversations in a way that opens up new possibilities or restricts the number of options available (Morgan, 2000). Narrative theory embodies the social constructionist view of language, which helped me become conscious of the impact positioning in dialogue has on my life and the lives of the people I work with.

Being introduced to Gergen's account of transforming a unitary identity, in his book *Relational Being* (Gergen, 2009), made me feel at home. Said opened my eyes to the questions Gergen proposes answers to. Gergen offers a pragmatic approach to the questions of: how can a unitary identity be transformed to include the other, and

how can we transform a tradition as ingrained in our way of life as that of an individual, separated identity. I am most grateful to Gergen for teaching me how this can be done from a position of care. Clearly, my interest in these two questions was initially of a very personal nature. However, Gergen's work illuminates ways in which they apply to all aspects of life, especially the practice of interprofessional collaboration.

Relational theory is specifically concerned with questioning the idea of meaning originating within an individual mind and proposing that the self and meaning emerge out of a process of relating. Therefore, imagining a world where relationships come first, where co-action is the basic unit of society, is at the heart of relational theory (Gergen, 2009). I felt drawn to relational theory and research because they are concerned with how we can go on together while being socially responsible within a world of constant change (Gergen, 2009, 2015b; Kirschner & Martin, 2013). Focusing on co-action also means that the responsibility for action is shared. When responsibilities are shared there is less space for blame and a new space opens for respect and appreciation.

Gergen's relational theory offers a major shift in our understanding and practice of collaboration. Rather than focusing on the content and individual action, Gergen (2009) suggests a focus on co-action and relational process. Finally, I found a way to put process at the front and move away from understanding relationships as stable entities. The power of this shift is in understanding and keeping in mind that co-action always occurs within a certain tradition of understanding (set of beliefs, convention or form of life) (Gergen, 2013; Gergen & Gergen, 2017, 2018). According to Gergen (2009), this opens up possibilities for transforming traditions of understanding, but from a position of care. When these positions are adopted in practice, individual action gives way to co-action, individual meaning and knowledge gives way to understanding, individual plans and individual goals give way to emerging collaborative strategies and possibilities.

In my reading of Said, his concern with identity comes from a position of discontent, determination and passion. Of course, my interpretation could also be due to where I was in my personal journey when I came across his work. Gergen's concern comes from a position of appreciation of the past and care for the future. At the time I was introduced to social constructionism, I needed Said's enthusiasm to motivate me. However, I needed Gergen's reflective pragmatism to be able to consider what moving on together might mean for my future. With new accounts of my past, new

possibilities opened of who I can be in the future. This multiplicity of possibilities gave birth to a new sense of inclusion within and outside. Thanks to the authors presented in this section I now see the self as always multiple and in the process of becoming, but most importantly, attentive to the relational process and synchronic coordination of action between people around me.

The recent societal changes in New Zealand and internationally have seen more attention given to exploring innovative ways of working together across cultural, ethnic and socio-economic divides (Madsen, 2016; Sharp, 2020). The shift in relational positioning promotes culturally respectful, collaborative partnership and practice that is much more accountable to the people we work with (Bodiford & Camargo-Borges, 2014). Relational constructionism is inclusive and respectful to human capacity (McNamee, 2014). It does not offer stable ways of working or fixed models of practice. It offers ways to begin a dialogue from a place of respect. This study explores what it means to be relationally engaged in the context of HCN collaboration.

## **1.7. Concluding Comments**

There are a number of themes that come together in the section above. In their own ways, all the theorists presented are concerned with the ongoing process of relating rather than observable, static objects of study. They all question the idea of individual self, whether they talk about identity, history, research or practice. For me, one point stands out. They all embrace otherness as mutually constitutive and embedded in the fabric of social life, something to support, and something that is full of potential for the future. In my life, this enabled an appreciative and caring liberation from the grip of my own history. This turn from liberation as an act of struggle to acting from a position of care is what this study is attempting to do in the context of interprofessional collaboration.

As noted earlier, the core thesis is centred around the call for replacing the individual with relational self. The idea that we are individual, bounded beings, contained in our bodies and separated from each other and the rest of the world, is so integral to the way many of us think of ourselves and our social lives that we find it difficult to imagine alternatives. It isn't surprising then that although the idea of relational self has a long and rich tradition, it is still considered radical (Gaudet &

Robert, 2018; Kirschner & Martin, 2013). This study aimed to bring the rich tradition of exploring relational ideas into the field of interprofessional collaboration.

For the purpose of this study, Gergen's relational theory is captured as co-action attentive practices in the context of HCN interprofessional collaboration and distinct from traditional, individual action-based practices. Sharing this distinction with the practitioners who participated in this study allowed for a curiosity-led dialogue out of which a clear relational orientation in HCN practice emerged, answering both research questions.

The main proposal of this study was that relational ideas can bring a fresh, innovative perspective to the context where successful interprofessional collaboration is critical. This study contributes to the relational and collaboration field of research by illustrating that relational orientation needs to be recognised and explored as a component of successful interprofessional collaboration.

In this introduction I have outlined the aims, motivation, and drivers of the study which are situated in my life experiences. The first section briefly presented the rationale for this study steeped in the guiding bodies of literature and research. The second section outlined the two research questions that underpin the study. The following section delineated the specific context of HCN collaboration, and considered the wider social context and the importance of language from the social constructionist perspective.

In the final section I provided a narrative of my own personal journey and shared my life experiences to explain how they led me to undertake this study. For me, this journey started with a deepening sense of otherness and loss which I was unequipped to address. I have also presented the theories and ideas of researchers and people who gave me the tools I needed to see new potentials in my life and work and resulted in this research.

The last section of this introduction chapter provides a brief outline of the entire thesis.

## **1.8. Outline of the Thesis**

### **Chapter 2 – CONCEPTUAL FRAMEWORK**

In the theoretical framework chapter, I situate the study conceptually in terms of basic research paradigms and guiding principles. It locates social constructionism first within a broader conceptual framework and as the umbrella theory for this study. It then situates relational theory within this broader framework. Relational theory is concerned with ways in which we can move away from an individualistic to a relational view of the world. This is captured in the Theoretical Framework, which was used as an evolving organiser guiding the decision making for each chapter of the thesis.

### **Chapter 3 – LITERATURE REVIEW**

In the literature review chapter, I first provide an overview of the literature on interprofessional collaboration. I argue that although relationships are considered important in the current literature on interprofessional collaboration, relational processes are often taken for granted and implicit. A social constructionist lens offers a way to focus directly and explicitly on the process of relating.

To engage with and understand the relational process, social constructionists challenge the idea of the individual, separated self and are more interested in exploring relational dialogic processes situated between people, rather than in the mind. Within this chapter, I demonstrate evidence of a growing interest in and a pragmatic value of exploring the relational process as situated in the spaces between. I argue that only when we fully suspend the idea of individual self, are we left with a sound view of a relational process (co-action) from which the self (relational being), meaning and knowledge (tradition) emerge (Gergen, 2009). The last section of this chapter offers a theory-based visual representation of what relational orientation might look like in collaborative practice. Rather than focusing on what needs to change, I further argue that with relational theory, based on ontological neutrality and relational responsibility, we can turn to transformation guided by what is valued. I conclude this chapter by proposing that relational interprofessional collaboration offers a view of change as an enrichment of tradition.

## Chapter 4 – RELATIONALLY SUSTAINED NARRATIVE METHODOLOGY

In the methodology chapter I consider ways of transforming interprofessional collaboration as a valued tradition. I propose that relational orientation is already present in the practice of HCN interprofessional collaboration, and that exploring it with practitioners makes it easier to recognise and engage with as useful. I explore how relational constructionist literature invites us to reconsider the assumptions behind positivist/empiricist research and consider new ways of conceptualising research and new ways of generating knowledge (Hosking, 1999, 2011; Hosking & McNamee, 2006; McNamee, 2014). With this foregrounding, I present a research method holding potential to capture and highlight the relational processes explored in relationally oriented research. In this chapter I argue that when meaning originates in co-action, research becomes an active process between relationally responsive co-researchers. This view of research calls for practitioners and researchers to jointly participate in collaborative dialogue to support practice by forming preferred futures through dialogue.

With the view of narrative as creating social realities and as a paradigm and set of analytic tools, I turn to White and Epston (1990) for structure. Narrative theory proposes that stories shape our life experiences and have the power of enacting the principles on which we base our life stories. Therefore, narrative theory was used to organise my engagement with HCN practitioners.

Finally, this chapter outlines how the research process unfolded, describes the Relational Orientation Guide and Narrative Conversations as the research tools used in this study, and outlines the efforts to highlight relational process as the binding vehicle for transformation.

## Chapter 5 – GENERATED OUTCOMES AND DISCUSSION

The outcomes chapter offers a vibrant, rich, real-life view of what it means to relate in the context of interprofessional collaborative practice within the High and Complex Needs service in New Zealand. It delineates what collaborating in the co-construction of understanding looks like. The practitioners in this study created their vision of what it means to focus on the process of relating in their practice and what possibilities this understanding might open in the future. Their view of relational orientation was captured in the HCN Collaborative Maps.



## Chapter 6 – CONCLUDING CHALLENGES

This study highlights what it means to focus on relationships and what actions sustain positive relationships in the context of HCN interprofessional collaboration. It achieved this by suggesting a way of moving away from the individualistic view of relationships towards more inclusive actions in daily practice. This chapter concludes the thesis by summarising the co-ordination of the main components of this study. It is this study's focus on the process of relating, attention to values, interests and concerns of practitioners in their daily practice and its grounding in respect for the current practice that allowed the relational direction in HCN practice to emerge.

## **Chapter 2.**

### **Conceptual Framework**

As professionals, we surely have a duty to be fully aware of the ontological and epistemological basis of our practice, since this will inevitably have implications for both how we understand our practice and, importantly, the nature of the relationships we have to those with whom we work, colleagues and 'clients' alike. (J. Moore, 2005, p. 107)

#### **2.1. Chapter Introduction**

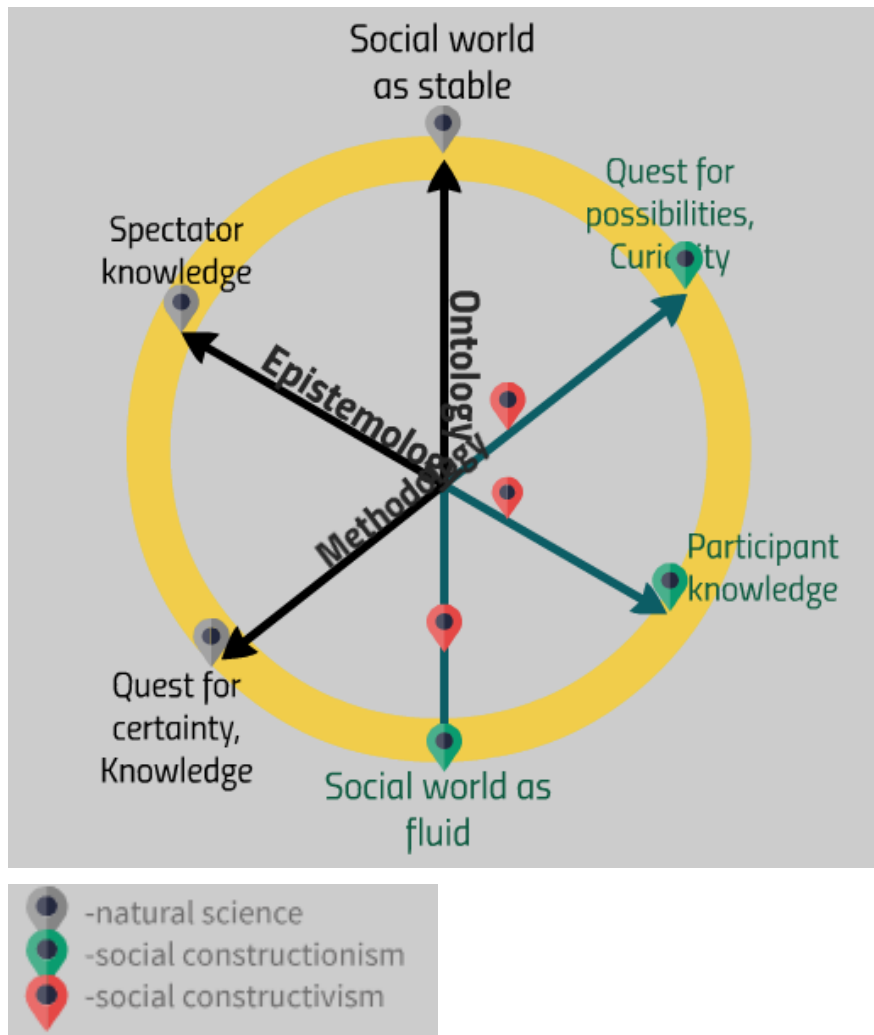
This chapter delineates the basic philosophical positions and theoretical concepts underpinning this study. In the first chapter I introduced relational constructionism as the conceptual grounding for this study. Here, I aim to position relational constructionism as sitting within the broader context of research paradigms. A sailing guide metaphor will be used to visually demonstrate where relational constructionism sits and how it relates to other philosophical positions. I introduce the conceptual framework, situate it within relational constructionism, identify basic concepts and explain how it has informed and shaped each of the sections within the thesis.

#### **2.2. Positioning the Study**

Since the introduction of research paradigms, it has been commonly accepted that all research is embedded in basic conceptual understandings, out of which specific interests or questions and particular ways of approaching answers arise (Kuhn, 1970). Figure 2.1 employs Pearce's (1995) and Fairhurst and Grant's (2010) sailing guide metaphor to visually set out the basic principles of ontology, epistemology and

methodology depicted as three spectral lines. The authors argue that all research positions can be placed somewhere on these lines.

**Figure 2.1.** Adapted sailing guide to social constructionism  
(Pearce, 1995)



### **2.2.1. Ontology**

*Ontological questions* are concerned with the nature of reality. “What is to be researched, the ontology, or the reality of the context of the research problem, needs to be clear and bounded in order to establish a solid foundation for shared meaning and conceptual validity” (Berman & Smyth, 2015, p. 130). In this study these boundaries will be further addressed in the literature review and are outlined here from a basic conceptual position.

Ontological positions define where on the spectrum a study is situated.

- a. On one end of the ontological spectrum, depicted by the black coloured half of the compass needle in Figure 2.1, the world is made up of fixed, objectively knowable physical entities all subject to universal laws (e.g. speed of light, universal principles of human behaviour). This worldview is known as modernism.
- b. On the other end of the ontological spectrum, depicted by the green coloured compass needle in Figure 2.1, the world is fluid, complex and ultimately unknowable. This worldview is known as postmodernism. Social and relational constructionisms sit under the umbrella of the postmodern worldview.

As indicated in the introduction chapter, relational constructionism is rooted in social constructionism. Consequently, both approaches accept the world as unknowable in any objective way. Gergen, as a relational constructionist, believes that whatever physically exists can be viewed as just simply out there, not needing any one particular type of description (Gaudet & Robert, 2018; Gergen, 2009; Gergen & Gergen, 2003). Instead, positioned in this type of ontological neutrality, relational constructionists are concerned with (the world of) coordination of social action as a process situated between people.

The next section will suggest that paying attention to relational processes becomes possible when language is viewed as constitutive rather than representative of reality. Relational constructionists are concerned with a pragmatic approach to social action where the key role of individual action is replaced with relational process and dialogue (Gergen, 2015b; Gergen & Gergen, 2003; Lock & Strong, 2012). These ideas will be explored in the literature review chapter.

### 2.2.2. Epistemology

Epistemological questions are concerned with ways of knowing and generating meaning. They aim to determine the nature of new knowledge that will be generated and the potential for practical and theoretical implications (Berman & Smyth, 2015; Lunt & Majors, 2000; J. Moore, 2005). The introduction chapter presented knowledge as historically and socially situated, value saturated, and having the power to subjectify people and leave them feeling powerless. How we approach knowledge seems important from this perspective and deserves extra attention.

The epistemological spectrum in Figure 2.1 represents the different ways of knowing, understanding, and meaning making. Represented on the black end of the spectrum, natural scientists embark on *discovering* new knowledge of the world to improve our understanding of the world as it *really is* (McNamee, 2014). This position assumes an autonomous human subject capable of understanding the world through the use of scientific research tools.

It may be argued that, for example, by finding out *what* energy or the speed of light *is*, natural scientists have made unparalleled contributions to improving the quality of the human condition. These accomplishments largely explain why the scientific method has dominated the field of research, often presenting a 'single voice' view of research despite a thriving field of qualitative research (Denzin & Lincoln, 2018; Jackson & Mazzei, 2018). Some of the most prominent and celebrated scientists, such as physicists Richard Feynman and Stephen Hawking, have argued in many books, lectures and the media that the physical world is the only world worth knowing and the scientific method is the only way to achieve knowledge.

Consequently, recent years have seen a plethora of public debates in the popular media with prominent scientists, such as Professor Kaku associating the field of psychology with theology (Singularity FM podcast, 2014). This represents a persistent, commonly accepted view of what constitutes legitimate knowledge. This point is significant for the current study because it sheds light on important relational implications of the 'single voice' view of knowledge being presented to the wider society. When research is grounded in social processes, as is the case with a relational research orientation, the 'single voice' view becomes an obstacle requiring attention.

Within the other side of the epistemological spectrum, coloured in green, the world is complex, continually being constructed, contingent and subjective. For relational

constructionists, “the world may exist physically independent of people, but truth and meaning cannot” (J. Moore, 2005, p. 108). Rather than discovering new knowledge, the focus of research is the relational process of co-construction of meaning and the process of jointly exploring new possibilities (Fairhurst & Grant, 2010; Gaudet & Robert, 2018; Pearce, 1995).

The relational constructionist position offers a distinct view of knowledge, not as something some people possess and share with those who do not, but as a process that is born out of a process of relating (Gergen, 2013). From this position, to know something is to risk losing the dialogue. Relational constructionism is conceptualised as a state of open dialogic movement (Hosking, 1999). Therefore, relational constructionists value curiosity over knowing. From this perspective, the key responsibility is relational and focused on preserving the potential for dialogue.

Because dialogue is a key concern for relational constructionists, the ‘single voice’ view of research adopted by the wider society is a serious obstacle. As discussed in the next chapter, a free flow of dialogue ultimately needs to include the wider society. Even more relevant here, wider society includes the practitioners participating in this study. To support dialogue, therefore, practitioners and researchers need to adopt a more inclusive view of knowledge and be more accountable to the wider society rather than adopt universally applicable research methods (Bodiford & Camargo-Borges, 2014; Gergen, 2015b; Jackson & Mazzei, 2018; J. Moore, 2005). Taking up an integrated view of theory, research and practice will be referred to throughout the thesis. It will suffice to state here that the efforts to promote meaningful dialogue in research, theory and practice need to include recognising and challenging the ramifications of a single voice view of knowledge in all its forms.

### **2.2.3. Methodology**

The research methodology logically follows from the decisions made within the earlier described philosophical positioning. The methodological spectrum in Figure 2.1 depicts the space between the role of researcher as an observer, on one end of the spectrum, and as a participant, on the other end of the spectrum.

- a. The black end of the spectrum depicts the quest for certainty. The scientific, modernist worldview assumes a clear separation between facts and values. Therefore, the researcher will adopt the position of positivist, objective detachment and speak of value-free data (Hosking, 2011). The focus here is

on the product – new data and knowledge (Fairhurst & Grant, 2010; Pearce, 1995).

- b. The green end of the spectrum represents a relational constructionist position on methodology and pictures the quest for possibilities driven by curiosity. From this perspective, researcher and practitioner will not see the benefit of remaining detached spectators. For relational constructionists the focus is on the social process between engaged individuals (Fairhurst & Grant, 2010; Pearce, 1995).

Consequently, methodology will aim to support dialogue, meaningful engagement and knowledge creation capacity. Therefore, in the current study the focus was on practitioners and the researcher jointly generating potential, not on what new knowledge I, as a researcher, could deduce from the participant data. It will be further argued in the methodology chapter that relational constructionists conceptualise both practice and research as action in social space and that this levelling of research and practice in the production of knowledge grounds relational research.

Thus, Figure 2.1 depicts six basic research positions on two diametrically opposed sides: ontologically, epistemologically and methodologically. It needs to be clarified that this is only a learning exercise used to depict a spectrum of views. In presenting it, I have in no way attempted to define the theories or pin them down as Figure 2.1 might suggest. In the research world positioned this way, relational constructionism, with its subjective quest for understanding co-constructed, subjective realities, belongs at the green end of the spectrum marked with green points.

Finally, social constructionism is often mistaken for social constructivism. It can be extrapolated from the literature that social constructivism is different from social constructionism in its focus on personal rather than social construction of reality (McNamee, 2004; Raskin & Bridges, 2002). For social constructivists, the world is built from the internal processes as a starting point. Therefore, they are most interested in each individual's internal construct systems and cognition as a physical entity. Both constructivism and constructionism are interested in constructing processes and concerned with meaning-making. They diverge in where meaning originates. For constructivists, meaning-making is an internal cognitive process. For constructionists, meaning originates in joint activity between people (Gergen, 2015a; McNamee, 2004). Based on that understanding, social constructivism should be

placed closer to the black end of the spectrums, marked with red points in Figure 2.1. This leads to the question explored in the next section.

#### **2.2.4. Are narratives cognitive or relational?**

White and Epston's (1990) narrative theory is based on text analogy. It investigates how people story their lives, explores the effects of story plots which sustain problems in people's lives and supports re-authoring of new stories. The narrative methodology literature recommends the use of text analogy as a research method (Robert & Shenhav, 2014). Both narrative and relational theory are concerned with meaning making, have their roots in the socially and historically situated ideas and constitutive view of language. This prompted me to consider White and Epston-based narrative methodology for this study.

With its prolific use over the years, narrative theory has been established in both constructivist (cognitive) and constructionist (relational) directions. My learning was influenced by Bird's view of language as profoundly relational (Bird, 2000a, 2008; Ness & Strong, 2014). On this basis I developed a relational understanding of narrative theory (Bird, 2008). I was drawn to narrative theory because I understood it as non-individualistic, relational and process oriented.

For many narrative therapists, self is multiple and relational (Bozatzis & Dragonas, 2014; Combs & Freedman, 2016). Combs and Freedman (2016) point out that narrative theory invites us to consider "how are we becoming other than we have already been through our relationship with people around us" (Combs & Freedman, 2016, p. 222). Although the relational view reflects my understanding of narrative theory, there are ways in which this view can be challenged. Table 2.1 is an attempt to illustrate the connections between White and Epston's narrative theory and Gergen's relational theory.



**Table 2.1.** Overview of relational and narrative theories

	Narrative	Relational
Self	A narrative continually recreated in relationship	Relational Originating in relational process
Language	Constitutive view of language	Constitutive view of language
Meaning	Socially negotiated Cognitive for some Dialogic for some	Dialogic – act/supplement
Knowledge	Achieved through curiosity grounded in challenging reified meanings	Achieved through curiosity grounded in respect for tradition
Value	Value conscious	All traditions have value specific to time and space and capacity for transformation
Change	Co-constructing alternative narratives	Generative Moving on together
Problems	Separated from people	Within relational process
Agency	Cognitive Relational for some	Relational responsibility
Worldview	Social constructionist social constructivist for some	Social constructionist

Both theories adopt a constitutive view of language as forming our worlds and are concerned with the worlds of meaning. They both originated from postmodern ideas critical of individualistic conception of self. In narrative theory, self is a narrative that is continually recreated in interactions with the people around us. This can be viewed as primarily a cognitive process, in which case individual cognitive processes will be the focus of attention.

However, self as a narrative can also be viewed as dialogue. This implies a shift from focusing on individual (cognitive) means of constructing meaning to relational process. From the cognitive perspective, change requires ascribing meaning, seeing beyond the boundaries of dominant stories and exploring alternative narratives. For Gergen (2009), meaning is generated in the relational process and maintained through relational responsibility. Gergen's focus on dialogic remaking renders holding a narrative redundant. Thus, the structure that makes narrative a good methodological tool also makes it vulnerable to individualistic interpretations. For that reason, narrative theory was primarily a conceptual positioning providing basic

principles on which a strengths-based, respectful method was developed. This will be detailed in the methodology chapter.

The question of whether narrative theory sits more on the constructivist or constructionist side goes beyond the scope of this thesis. But it needs to be noted that this study adopts the relational view. With the view of language as constitutive and profoundly relational, the storying of life events becomes relational, too (Bird, 2008; Combs & Freedman, 2016.)

This section provided a philosophical grounding of this study within a research paradigm. The next section will consider how this position was used to provide the conceptual framework for the thesis, and how that framework was used as a scaffold in building this study.

### **2.3. Conceptual Framework**

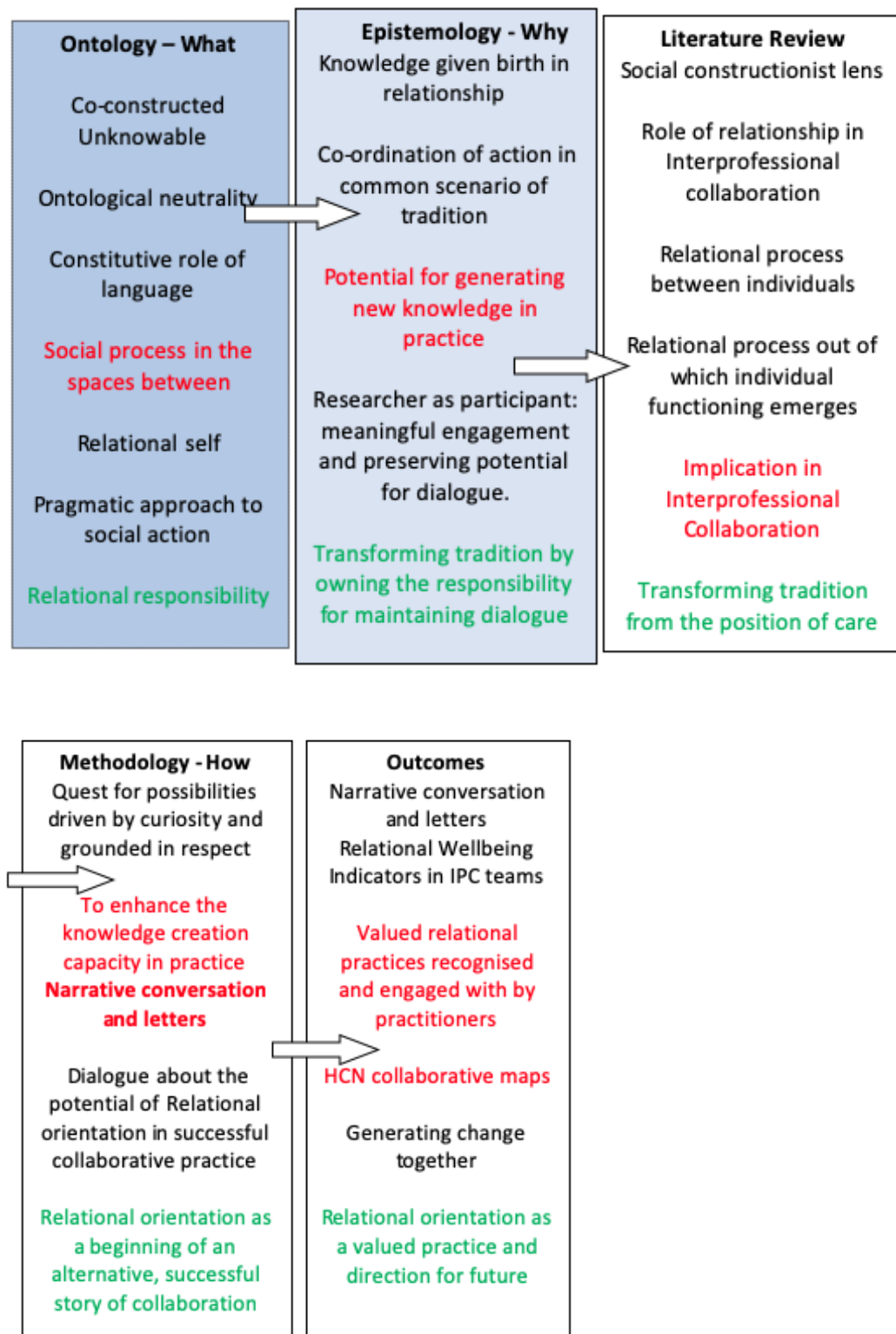
The literature on the role of theory in research in human services is vast. It offers a multitude of perspectives and varies hugely in the importance it places on theory in research (Biesta, 2014). As researchers in human services struggle to embrace complexity, the call for research to be firmly grounded in theory and have flexible methods with pragmatic adaptations to emerging complexity is growing (Denzin & Lincoln, 2018; Greenhalgh & Papoutsis, 2018; Jackson & Mazzei, 2018). This study developed a flexible methodology specifically tailored to the needs of this study and conceptually grounded in social constructionist and relational ideas.

To manage the links between conceptual positioning and methodological adaptations, this study used the conceptual framework as an evolving organiser. Used this way, a conceptual framework “becomes a powerful reference point for the researcher ensuring targeted work and evidence of alignment between epistemology, ontology and methodology” (Berman & Smyth, 2015, p. 127). Thus, the conceptual framework became a core element, requiring its placement early in the thesis. The following section outlines this approach.

Arguably, the three most critical parts of any research are related to the choice of literature that grounds the research questions, the actions taken by researchers and participants, and the outcomes. In this section, I delineate the logic that binds these components. This logic is visually framed in Figure 2.2, explicitly showing the links between the conceptual positions with the three main components of the thesis.

First, it maps how the literature review was conducted, then it depicts the choice of methodological tools, and finally it shows how the outcomes were conceptualised and presented in this thesis.

**Figure 2.2.** Conceptual framework



Social constructionism served as an umbrella theory in developing the theoretical framework for this study. Social constructionism is often described as a set of ideas with multiple origins offering a multiplicity of perspectives (Fairhurst & Grant, 2010; Gaudet & Robert, 2018; Gergen, 2015a; Lock & Strong, 2010; Pearce, 1995). Hosking (1999) uses the term polyphony of constructionism to describe the diversity of voices represented, none of which claims to be *the* social constructionism. From this perspective, it is more important to keep the dialogue flowing and invite new perspectives to enter the dialogue, than to pin down one *right* perspective. As indicated in the epistemological movement away from the single voice view of knowledge, social constructionism is continually inviting of new voices and open to transformation.

The main lines of argument that encapsulate social constructionist thought are communal origin of knowledge, constitutive role of language and ideological saturation of knowledge (Gergen, 2015a, 2016; Gergen & Gergen, 2003). In this sense all knowledge comes from a specific community of understanding and carries the values and concerns of that community. Knowledge originates in curiosity about other voices and other communities of understanding and is given birth in the curiosity driven dialogue. This means that what is considered knowledge is more inclusive and more open to transformation. Social constructionists are also recognised for their efforts in challenging the idea of individual, bounded, independent self (Gaudet & Robert, 2018; Gergen, 2009; Kirschner & Martin, 2013; Sampson, 2003). It will be argued in the literature review chapter that relational constructionism is taking the social constructionist arguments to new and unexplored territories by replacing the individual with relational self as the basic unit of society (Gergen, 2009).

As indicated earlier, the research questions in this study sought to identify relational practices and their effect. In the case of HCN practice, relational practices were recognised as embodied concerns and values of practitioners in their daily practices. Unpacking those practices in dialogue with a strategic focus on respect for the current HCN practice generated a clear relational direction for the future.

### **2.3.1. Framework for literature review**

Figure 2.2 demonstrates how ontological and epistemological positions relate to the choice of literature reviewed and demonstrates the layout of the literature review process. Specifically, it depicts that a social constructionist lens was employed to review the role relationships play within the wider interprofessional collaboration

literature. The review then shifts focus to exploring ways relational process is conceptualised in various literature leading up to a view of relational process as the basic unit of society. This view was then applied to the context of interprofessional collaboration.

### ***2.3.2. Framework for methodology***

Sharp (2020) suggests that a narrow framing of what constitutes evidence, the accompanied hierarchy of evidence and expectation of generalisability act as a barrier to change and to dialogue between research producers and research consumers. A more “interactional framework for evidence that creates environments which encourage engagement with a wide variety of knowledge” (p. 30) is needed. Sharp (2018, 2020) argues for creating more fertile grounds for dialogue between research producers and research consumers. Although the interest in maintaining dialogue between researchers and practitioners is not new, the focus on shared meaning making is relatively new. The literature review set the stage for engaging with the practitioners in a dialogic process to highlight the knowledge creation capacity they hold. Figure 2.2 illustrates the methodology aligned with this.

The current study developed a narrative conversation method based on the principles of narrative theory. This method was used to highlight the dialogic process between the practitioners participating in the study and the researcher. This process evolved into co-research, grounding the methodology in relational ideas explored earlier in the thesis.

### ***2.3.3. Framework for change***

This component of the framework pictures the flow from ontological commitments to relationally generated knowledge to investigating the outcomes within the relational wellbeing framework. This flow depicts connections between joint analysis and jointly generated outcomes. It further binds meaningful engagement in dialogue with transforming tradition through recognising practices already valued by practitioners. Finally, it justifies the focus on valued practices by combining them into locally applicable, principle-based collaborative maps rather than a structured, generic practice model.

## 2.4. Concluding Comments

In this chapter I used the three-dimensional spectrum, depicted in Figure 2.1, as a tool to: understand the worldview that guided this study; position this study within the world of fluid social life; consider where on the spectrum I position myself as a researcher and an observer of another human being; and consider the issues surrounding writing a research report and its audience. Following the philosophical grounding of the study a conceptual framework was developed and used as an evolving organiser.

As Berman and Smyth (2015) suggest, this conceptual framework is the heart of the study. It scaffolds the research goals and questions and frames them within the context of relational constructionist theory. It is the intention of this chapter to prepare the reader for the more detailed and in-depth exploration of the presented concepts in the literature review chapter coming next.

I have used the framework as a structure to identify key concepts and to scaffold research activities at every step of the process. The rationale for making the conceptual positions explicit in research and practice will be expanded further in the literature review chapter in relation to ontological neutrality. The methodology chapter will then take up that argument again as it relates to an integrated view of research and practice grounded in professionals' duty to critically scrutinise the ontological and epistemological basis of their practice and associated methodological implications. Finally, the outcomes chapter will bring the components of the framework together in the presentation of the findings as a locally useful, principle-based guide, co-constructed within practitioners' perspectives.

## **Chapter 3.**

### **Literature Review**

#### **3.1. Chapter Overview**

As indicated in the preceding chapter, the conceptual framework informs and guides this literature review. I start this chapter by placing the literature within the larger conceptual framework (see Figure 2.2), which accounts for the choice of literature reviewed and frames the process undertaken in this chapter. I focus on relational process as the basic unit of society where knowledge is conceptualised as originating in relationship. From this perspective, reviewing the way relational process is conceptualised in various literature is informative. In addition, the framework enables a transformation of interprofessional collaborative practice to a position of care when grounded in relational responsibility.

This chapter has four major sections. The first section provides a brief and broad overview of the literature on interprofessional collaboration in the context of education, health and social services to children and young people with complex needs. Following a broad overview of the interprofessional collaboration literature, the review focuses more specifically on how relationships are considered within this body of knowledge. The section on interprofessional collaboration concludes with a brief introduction of the social constructionist lens and a brief summary of the literature reviewed.

In the second and third sections of this literature review, I use a social constructionist lens to delineate how relational processes are addressed from various perspectives. This is still largely unexplored territory. Therefore, the literature reviewed in these two sections is a collection of diverse perspectives all united in the search for a shift away from the idea of individual self, focusing instead on forming relational pathways to generating new possibilities in practice.

In the concluding section, the literature review specifically explores Gergen's (2009) relational theory. Gergen's relational being is a detailed theory with wide implications that go beyond the scope of this study. Particularly interesting from the perspective of interprofessional collaboration, is the logic binding the concepts of ontological neutrality and curiosity. A considerable part of this section of the review is allocated to unfolding the link between ontological neutrality and curiosity and their role in preserving potential for dialogue. The main focus of this chapter is how these concepts unite to open the possibility for transforming traditions from a position of care. This chapter asks what might transforming the tradition of interprofessional collaborative practice mean and then proposes a tool for exploring the relational perspective in HCN practice.

### **3.2. Interprofessional Collaboration**

Recent practice frameworks, both national such as He Pikorua (Ministry of Education, 2020) and Enabling Good Lives (NZ Government, 2014) and international such as World Health Organisation Practice Guides (WHO, 2019), are calling for practitioners in the human services to focus on interprofessional collaboration. Professionals are increasingly encouraged to work closely together, and the increased number of interprofessional practices has led to a rise in academic interest in the subject of interprofessional collaboration (Schot et al., 2020). Overall, the studies reviewed in this section illustrate trends in the effects of interprofessional collaboration, and identify some enablers and barriers to collaboration and professional relationships.

Interprofessional collaboration is a vast area of literature and research. The importance of interprofessional collaboration for successful outcomes for practitioners working with children and young people with high and complex needs is well-recognised in the literature (Broadhead et al., 2008; Hesjedal, Hetland, & Iversen, 2015; Hesjedal, Hetland, Iversen, et al., 2015; Thomas & Loxley, 2001). Conversely, it has been documented that problems with collaboration in interprofessional service teams place positive outcomes of clients at risk (Lips et al., 2011; Rose, 2011; Sands et al., 1990). However, the concept of interprofessional collaboration is defined in various ways and a number of different methodologies and approaches are employed, making the research findings difficult to review and at times inconsistent (Ogbonnaya & Keeney, 2018; Schot et al., 2020). This section



of the literature review starts with a brief and broad overview of the literature on interprofessional collaboration.

### **3.2.1. Overview of literature**

One way to achieve a broad overview of the literature in a specific area is by reviewing meta-studies and large-scale reviews of the research. Meta-studies and large-scale reviews address the common issues of definitions and methodology in a considered and systematic way, making the results easier to compare. A broad overview of the field of interprofessional collaboration served as an introduction in order to compare the 'rest of the field lens' with the social constructionist lens later in the chapter.

An initial search using the University Library for peer-reviewed journal articles on interprofessional collaboration produced 47,000 articles. The search for meta-studies produced 224 journal articles, while the search for literature and systematic reviews on interprofessional collaboration produced 1,297 journal articles. To further reduce the number of both meta-studies and systematic reviews, the word 'child' was added to both search criteria. This produced 165 systematic reviews and 11 meta-studies, bringing the combined total to 176. The next reduction criteria were related to professional context. To make the review results relevant to the scope of this study, cross-agency, disability and mental health contexts were favoured in the selection. Interprofessional collaboration in the context of the lives of children living with mental health and disability reflected the context of the HCN practice well.

The search process produced 10 articles, which collectively reviewed over 680 peer-reviewed articles and 19 government projects. As shown in Tables 3.2 and 3.3, five of the selected articles were meta-studies with statistical analyses, one was an historical literature review, two focused on reviewing projects and two on reviewing practices. The practices included in the reviewed articles consisted of health, education and social services. These services were represented unevenly in the selected research. Most of the research conducted was in the health context, with education represented to a lesser degree, while the literature on social services was least represented. Interestingly, cross-sectoral collaboration was also poorly presented in the found articles. The majority of the articles were from North America (five from USA and two from Canada), two from the UK and one from the Netherlands. These studies covered a timespan of thirteen years. Although collaboration is a dynamic field of research in New Zealand, the search did not find any New Zealand meta studies or large-scale reviews.

Due to the complexity and diversity of the field, there is no one commonly accepted definition of interprofessional collaboration. In the reviewed articles, interprofessional collaboration is also referred to as inter-agency, interdisciplinary, cross disciplinary or cross-system collaboration, or as multi-agency work, and is often equated with care teams. Schot et al. (2020), found that most definitions include smooth, face-to-face working relationships between workers from different professions who adopt an integrated perspective on working together. Schot et al.'s (2020) definition of interprofessional collaboration focuses on integration of perspectives rather than individual actions and therefore seems somewhat oriented towards relational processes, which reflected the scope of this study well.

The selected reviews and meta-studies provided a comprehensive overview of the field of interprofessional collaboration. From the perspective of this study it was interesting to capture (a) the effects of interprofessional collaboration on child outcomes with identified enablers and barriers to collaboration, and (b) the ways interprofessional relationships are addressed in this body of research. The frequency with which the authors call for methodological advances in reviewing collaboration was also noteworthy. The summary of the data from meta-studies is presented in Table 3.2 and data from large scale reviews in Table 3.3.

**Table 3.2.** Meta analyses data summary

Authors; No of studies And context	Identified outcomes of collaboration	Enablers and barriers to collaboration	Relationships	Synthesis and recommend.
Pfaff et al., 2014 29 studies, CA (nurses and other health professionals)	identified facilitating factors and obstacles rather than outcomes of collaboration.	Knowledge and mentorship important.	Respect/trust included as one of seven factors	The authors recommend more education in collaborative skills and conflict resolution is needed.
Cooper et al., 2016, UK 33 studies (psych, edu. health, soc. work)	Positive feedback from families and professionals. Data questioning quality of service	The study argues for good interagency communication, joint trainings, mutual valuing across agencies among other factors	The authors' key message includes positive individual relationships	All professional groups need to collectively consider facilitating factors and barriers to collaboration
Brandt et al., 2014, USA 496 studies (psych, health, social work)	The authors report inconclusive evidence Inconclusive	This study was concerned with the methodology employed to evaluate collaboration	NA	The authors recommend employing systematic, evidence-based research in this area.
Van Garderen, 2012, USA 19 studies (education)	Inconclusive, but a trend towards positive outcomes reported	When teachers are given direct practical guidelines on what to do collaboration produced better outcomes.	Relationships are largely not addressed.	Strong call for more research to guide the practice of professionals
Ogbonnaya & Keeney, 2018, USA 11 studs (child welfare)	Positive service outcome found overall positive child wellbeing and permanency of care outcomes.	Positive outcomes were consistent across lower (co-ordination) and higher (integration) levels of collaboration.	NA	The authors call for more rigorous methodology

**Table 3.3.** Systematic reviews data summary

Authors; No of studies And context	Identified outcomes of collaboration	Enablers and barriers to collaboration	Relationships	Synthesis and recommendations
Bickman, 1996, USA 4 studies evaluating projects (comm & mental health)	Better clinical outcomes not found. Collaboration is not cost effective but families and professionals worked better.	NA	no reference to relationships.	The author calls for new methodological advances to better review services outside the laboratory settings in the real-world context.
Atkinson et al., 2007, UK 29 studies and 19 projects (ed and child and mental health)	IC rewarding for professionals but likely to increase workload.	A: Positive working relationships; good interagency process, sufficient resourcing, good management support.	Positive working relationships on individual and agency level is the number one factor.	Effective collaboration is not easily achieved and takes time.
Hernandez 2013, USA literature review (special education)	Long-term positive outcome and negative outcomes for students when collaboration is not successful.	Culture of individualism is an obstacle.	The word relationship is used to mean collaboration. Attitude shift is needed.	Clearer shift from whether to how to collaborate.
Schot et al., 2019, Netherlan. 64 studies, systematic review of practitioner role	Most effects were positive but inferred by researchers as opposed to conclusions based on empirical data.	Identified need for professionals to understand the specifics of their contributions.	Creating spaces – negotiating necessary spaces for interaction is a prerequisite for collaboration	It is important to study daily practices of professionals in effecting change.
San Martin Rodrigues et al., 2005, CA, 10 article rev. of determinants of successful coll. (health services)	NA	We need a better understanding of the relationships between the interactional, organizational and systemic determinants affecting collaboration	Collaboration is an interpersonal process which requires willingness, trust in each other, mutual respect and good communication.	There is insufficient empirical information. More evidence needed to understand the environment in which collaboration takes place.

The next section expands on the above summary of systematic reviews and meta analyses in terms of outcomes, relational implications and the methodological shortcomings raised by the various studies.

#### *3.2.1.1. Summary of the data captured with methodological considerations*

Overall, practitioners, clients and families positively evaluate collaboration. Bickman (1996), Cooper et al. (2016) and Atkinson et al. (2007) found that interprofessional collaboration is positively evaluated and considered important by professionals and families. Van Garderen et al. (2012) conclude their examination of the effects of collaboration between teachers and students living with a disability by stating that collaboration has the potential for improving student outcomes.

However, positive professional and client evaluations do not always correlate with quality of service and clinical outcomes for children. Bickman (1996) failed to find positive clinical outcomes for children in his review of collaboration, Cooper et al. (2016) found that the quality of service was not consistently correlated with collaboration, while van Garderen et al.'s (2012) results were inconclusive with only a trend towards positive outcomes of teacher collaboration. Both Atkinson et al. (2007) and Brandt et al. (2014) attribute the difficulties in achieving consistently good quality of service and positive outcomes in collaboration to complexity.

The majority of the authors cited in Table 3.2 and 3.3 above argue that inconsistency in evidence of positive effects of collaboration is due to inadequate evaluation methodology. They agree that evaluation methodology needs to change, but disagree on how. Some recommend more rigorous, systematic, evidence-based methodology (Brandt et al., 2014; Ogonnaya & Keeney, 2018), while others call for new methodological advances to better reflect the complexity of the context in which interprofessional collaboration occurs (Atkinson et al., 2007; Bickman, 1996; Hernandez, 2013; San Martín-Rodríguez et al., 2005; Schot et al., 2020), or simply more research in the area of collaboration (van Garderen et al., 2012).

A number of barriers to collaboration were identified. Some are related to internal and external organisational factors such as inadequate resources, lack of knowledge and skills, lack of management and system supports, and lack of understanding across agencies (Cooper et al., 2016; Ogonnaya & Keeney, 2018; van Garderen et al., 2012). Others are related to interpersonal factors such as power imbalance, lack of confidence, lack of communication, and lack of positive

working relationships and understanding within teams (Atkinson et al., 2007; Pfaff et al., 2014; Schot et al., 2020).

Although the reviewed studies demonstrate somewhat inconclusive positive outcomes for clients, collaboration is consistently valued by professionals and families and the authors recommend further emphasis on collaboration. In addition to complexity, these somewhat inconclusive findings are attributed to a number of factors ranging from policy direction to family perceptions and professional work satisfaction (Atkinson et al., 2007; Bickman, 1996; Cooper et al., 2016; Schot et al., 2020). It is interesting to note that quantitatively oriented studies such as Brandt et al. (2014) and Cooper et al. (2016) report struggling more with complexity and with finding evidence of positive outcomes of collaboration.

Relationships are allocated more space in review articles (Table 3.3) than in meta-studies (Table 3.2). However, it must be noted that review articles conceptualise and refer to relationships in a variety of ways. Some define relationships as positive working relations (Atkinson et al., 2007), some as creating spaces for negotiation (Schot et al., 2020), and some as collaboration in general (Hernandez, 2013). In the articles selected for the current study there is a noticeable trend showing more space given to relationships in more recent studies (Atkinson et al., 2007; Bickman, 1996; Hernandez, 2013; San Martín-Rodríguez et al., 2005; Schot et al., 2020).

In summary, the meta-studies and wide-scale reviews outlined above highlight three key aspects of interprofessional collaboration: (a) mixed child outcome with a range of barriers and enablers, (b) growing interest in the role relationships play in interprofessional collaboration, and (c) the need for more research. Most authors call for more and diverse research in the area of interprofessional collaboration. Some recommend more rigorous, systematic, evidence-based methodology (Brandt et al., 2014; Ogbonnaya & Keeney, 2018), while others call for new methodological advances to better reflect the complexity of the context in which interprofessional collaboration occurs (Atkinson et al., 2007; Bickman, 1996; Hernandez, 2013; San Martín-Rodríguez et al., 2005; Schot et al., 2020). The focus on relationships in terms of practitioners' contribution to interprofessional collaboration was relevant to the context of the current study and therefore required more attention. The next section explores this space further.

### *3.2.1.2. Focus on practitioner contribution*

Schot et al. (2020) suggested that in addition to policymakers and managers, interprofessional collaboration requires contributions from professionals themselves. They noticed that research evidence was fragmented on whether, how and why professionals make such contributions. In a systematic review of 64 studies on how healthcare professionals contribute to interprofessional collaboration, they found clear evidence of concerted efforts by professionals. They found that professionals' contribution can be clustered in three categories – bridging gaps, negotiating overlaps and creating spaces. Creating spaces is about purposefully organising the necessary new space for action, as a prerequisite to other activities. It refers to professionals navigating the external and internal organisational obstacles and facilitating new ways of interacting (Schot et al., 2020). The authors call for further research to address these three categories by effecting changes through everyday practice. Their conclusion bears a strong resemblance to the call made in a recent Oxford University study by Greenhalgh and Papoutsi (2018) to pay close attention to the “articulations, workarounds and muddling-through that keep the show on the road” (p. 2). The current study attempted to answer their call for creating new spaces for action by exploring relational practices with practitioners engaged in interprofessional collaboration.

Madsen (2016) is another author who focused on practitioners' daily solutions. He proposed to differentiate between technical and adaptive challenges faced by practitioners. While technical challenges can be addressed by pre-made plans, adaptive challenges are “real-world problems where data are conflicting, or ambiguous, where disputants reasonably disagree about appropriate action to resolve the problem, or where values are in conflict” (p. 266). He concludes that adaptive challenges are best addressed by engaging in reflective dialogue with practitioners. Madsen's (2016) and Schot et al.'s (2020) interest in how practitioners' actions contribute to collaboration is particularly relevant to the current study's focus on practitioner perspective and everyday practices.

From the literature above it is apparent that interprofessional collaboration is a complex subject influenced by numerous factors and needs to be studied from a variety of perspectives. This section has provided a wider context for this study and served as a starting point for a more in depth and concentrated look at the ways professional relationships are accounted for and understood in literature and research. Of particular interest, from the perspective of the current study, are those

recommending further research on the daily actions of professionals with particular interest in generating new practices (Greenhalgh & Papoutsis, 2018; Schot et al., 2020). In concluding their meta-analysis, Schot et al. (2020) note: “our review provides the grounds for an informed research agenda on the ways in which professionals contribute to interprofessional collaboration, why they do so and why it differs, and to gain insights into the effects of these contributions” (p. 339). Their conclusion provides a good rationale for the current study to focus on the gap in understanding practitioners’ daily contributions. Therefore, the research questions in this study were addressed in a dialogue led by the practitioners participating in this study.

### ***3.2.2. Relationships in the literature on interprofessional collaboration***

The overview of meta-studies and large-scale reviews produced largely generic information on the role and perceptions of interprofessional relationships. The section that follows provides a closer look at the topic of relationships in the literature on interprofessional collaboration. As noted in the previous section, practitioners and researchers agree that genuine, meaningful collaboration is difficult to achieve (Broadhead et al., 2008). Some have suggested that one of the biggest challenges for professionals in the field today is to work effectively across different practice silos, isolation within individual practices and blame shifting between practices (Budd, 2014; Hall, 2005; Hernandez, 2013).

In recent years, more attention has been given to the importance of relationships in successful collaboration (Ritzema et al., 2014; Salm, 2014; Schot et al., 2020). What constitutes an effective interprofessional collaborative relationship is complex and what is termed effective varies across contexts. The terms attitude, trust and respect are often used in the literature to describe varying ways interprofessional relationships are conceptualised and addressed (Glennie, 2007). Others have suggested that the core attitudes for effective interprofessional working relationships are empathy, respect and appreciation for others’ contribution (Charles & Horwath, 2009).

In their literature review, Atkinson et al. (2007) found positive working relationships to be the top of four factors that influence interprofessional collaboration. The other three factors include multi-agency process, resources and management. They define relationships as role demarcation, trust and mutual respect, commitment and understanding of other agencies, and conclude that effective collaboration is not easy to achieve and takes time. The impact of relationships on interprofessional



collaboration is addressed by Hall et al. (2013) in the context of feminist relational theory used in health care. The authors present a rationale for the move towards a more relational focus in collaboration, with specific attention given to relational competence. They contend that a 'toolbox' of different research paradigms is needed to adequately address the complexity of interprofessional collaboration. They report "finding exciting potential in new paradigms and qualitative methodologies, particularly narrative and art-based inquiries, to conduct evaluations that may be well suited to the complex human and social experiences comprised in learning and in teamwork" (p. 78).

Attempts to improve interprofessional relationships are diverse. The following paragraphs demonstrate various ways relationships are addressed in the research and literature on interprofessional collaboration.

Transdisciplinary teaming is often recommended over other models of practice (Boyer & Thompson, 2014; Budd, 2014; Hernandez, 2013). Transdisciplinary teaming is characterised by integration of services and intertwining of different disciplines and family focus, whereas interdisciplinary and multidisciplinary teaming are characterised by set hierarchies of power (Hernandez, 2013; Hong & Shaffer, 2014; Ritzema et al., 2014). In the literature on transdisciplinary teaming, L. Moore et al. (2012) and Boyer and Thompson (2014) suggest professionals in early childhood need to be willing to support each other and leave their 'title at the door'. Boyer and Thompson (2014) note that this requires personal and professional maturity which includes understanding the expertise of other professional groups. To support positive interprofessional relationships, Boyer and Thompson (2014) recommend a 9-month peer mentorship programme on role release.

Through the concept of collaborative conversation, Perkins (2003) tackles the importance of relationships in giving feedback within the context of collaborative teamwork. He proposes the feedback to practitioners needs to be both content and relationship focused. In this context relationship is defined as the level of importance we place on the other colleague. Hence, he suggests more focus on protecting the relationship as opposed to exclusively focusing on the content. In the context of school inclusion in Norway, one study (Hesjedal, Hetland, & Iversen, 2015; Hesjedal, Hetland, Iversen, et al., 2015) found personal commitments, creating a positive atmosphere for interprofessional collaboration, and pulling together towards future goals by teachers and social workers, to be important factors for successful collaboration.

Relationships are not static, which makes them difficult to study in evidence-based research. However, as evident in the information presented above, researchers have placed considerable effort on how to conceptualise and understand relationships. Glennie (2007) illuminates how evidence-based literature has struggled to define and study effective interprofessional working relationships. Consequently, professionals are “left vulnerable, working to facilitate relationships that they intuitively ‘know’, but cannot objectively ‘show’, contribute to good outcomes for children. This is an uncomfortable position in an evidence-based practice environment where funding is increasingly tied to demonstrable outcomes” (p. 181). Glennie (2007) joins a growing number of researchers identifying the need to illuminate “the detail, the fine grain, of human behaviour that makes the difference between professionals working effectively across boundaries, and not doing so” (p. 181).

In summary, it seems evident that the issue of relationships is addressed in a variety of ways. Although recognition of the importance of relationships seems to be growing, a big percentage of available research still reflects the individualistic tradition with limited focus on relational process (Hernandez, 2013). A considerable proportion of the research on interprofessional collaboration comes from the evidence-based, empiricist paradigm which emphasises observable data and facts (Greenhouse, 2013; Hernandez, 2013; Pugach & Johnson, 2002). Although there is evidence of growing interest in the role relationships play in interprofessional collaboration, the findings of this review support the view that relational processes are difficult to account for in the evidence-based, data driven context, making them often implicit and taken for granted.

To address the relational processes, we need to find a way to enrich the facts and data. Some have suggested that social constructionist and relational theories offer ways to achieve this (Gergen & Gergen, 2003; A. H. Macfarlane et al., 2015; McNamee et al., 2020; Sampson, 1978).

### **3.2.3. *The social constructionist lens***

Social constructionists made a significant contribution to understanding the role of human relationships in general and in interprofessional collaboration specifically (Hersted & Gergen, 2013). From the social constructionist perspective, interprofessional collaboration is an opportunity for dialogue and the co-construction of reality through language (Anderson, 2014, 2020; Hermans & Salgado, 2013). This perspective is consistent with the request evident in more recent research to study

the everyday practice of interprofessional collaboration (Greenhalgh & Papoutsi, 2018; Madsen, 2016; Schot et al., 2020).

For social constructionists, the term collaborative relationship refers to how we orient ourselves to be, act, and respond so the other person shares the engagement and *joint action* (Anderson, 2020; Hermans & Salgado, 2013). Anderson refers to collaboration as dialogic conversation which involves mutual inquiry: an engaged connection of sharing, exploring, crisscrossing, and weaving of ideas, thoughts, opinions, and feelings through which newness and possibility emerge (Anderson, 2020).

This view has profound implications for many aspects of collaborative practice. It suggests a move away from focusing on individual, even group collaboration, to focusing on *the process of relating* (Gergen, 2009). For Gergen (2009), we understand each other by “coordinating our actions within the common scenarios of our cultures” (p. 165). Individual actions are not as important as the way they contribute to the whole. In the context of culture, S. Macfarlane (2015) notes that “engaging with diversity (in all its forms) requires crafting respectful, reciprocal and responsive interactions in the overlapping and complementary social and cultural phenomena” (p. 29).

Camargo-Borges (2015) observed that when team members look back at their own practice they might notice that the successful groups were those in which there was a sense of belonging, a place where one could be active and participate in achieving something together. Those types of groups are the ones in which people become engaged, committed, relationally responsible and hence desirous of a continued relationship with the group.

The next section aims at exploring these processes and concepts by describing a slow but steady movement away from the idea of individual self.

### 3.3. Exploring the Spaces Between

When we can change our patterns of interaction we become something we were not before. (Raboin et al., 2012, p. 8)

The literature reviewed in the first section of this chapter consolidates the need for collaboration in complex casework typical for HCN practice. It further suggested that relationships play an important role in successful collaboration. However, the literature also suggests that relational processes involved in collaboration are often taken for granted and implicit in both practice (Camargo-Borges, 2015; Glennie, 2007) and research (Wyatt et al., 2018). The following sections explore the ways in which relational processes, and later their effect on collaboration, can become easier to engage with and more visible.

Although there are many theories describing the role of culture and environment play in the development of self, mainstream psychology describes the self (emotions, thoughts and identity) as existing within an individual mind and body (Kirshner & Martin, 2010). This section further explores the literature instigating a movement away from the idea of individual self as separated and bounded. It is oriented towards more relationally sensitive conceptions of the self as a necessary first step in understanding relational process and collaboration. The following sections attend to the relational lens, the issue at the heart of this study. In a nutshell, relational theory proposes that there is an inherent and unavoidable separation built into the idea of individual self. It has and continues to cause problematic separations between human beings on individual, group, community, cultural and other levels. Considering alternatives to the idea of individual self is at the heart of relational theory and this study.

#### ***3.3.1. Exploring the spaces between in developmental theory***

A sense of separation built into the idea of individual self and the harmful potential it carries with it is evident in the recent spike in nationalism across the globe. The ideas challenging the view of personhood as separated from others are not new. Lev Vygotsky, a Russian developmental psychologist, made a significant contribution to our understanding of the relational nature of the processes between the mind, and social and cultural context (Vygotsky, 1986). For him, culture was not an entity that influenced individuals, instead “individual and cultural processes are mutually constituting rather than defined separately from each other” (Rogoff, 2003, p. 51).

Vygotsky's theory of development suggests that all higher-level psychological functions (language, decision making, planned memory, abstract reasoning) are co-constructed in the interactions between people. They exist outside the individual mind, in the space between people (e.g. historical and cultural context), before they get internalised through the use of cultural tools (e.g. activities, language) (Holzman, 1997, 2014; Rogoff, 2003; Vygotsky, 1986). It can be argued therefore, that everything that makes us human first exists outside, in a relationship, before it gets internalised with the use of social and cultural tools. With this, Vygotsky contends that who we are doesn't sit inside our mind, but outside, in our relationships.

For Vygotsky, we learn language because we are accepted into the community of speakers before we can speak or even understand language. This acceptance into the community of speakers is evident in the act of speaking to babies from the day they are born, well before they can speak or even understand language. It is that acceptance into the community of speakers that makes us speakers, as much as biological predispositions (Holzman, 2014; Rogoff, 2003; Vygotsky, 1986). So, it follows that I am (arguably) a good learner, a valued friend, a productive member of society, not because of what is inside my body and mind, but because people around me accepted me into the community of learners, friends, good citizens before I became one. Here, the self is much less separate. Instead of feeling alone, biologically determined and dependent, I feel grateful, indebted and included.

### ***3.3.2. Exploring the spaces between in cultural theory***

The social, cultural and historical situatedness of the human condition is increasingly recognised among educationalists and psychologists internationally (Gaudet & Robert, 2018; Gergen, 1991, 2001, 2016; Kennedy, 2006; J. Moore, 2005) and in New Zealand (Annan et al., 2006; Lock & Strong, 2012; A. H. Macfarlane et al., 2015). Since the postmodern era, which preceded sociocultural approaches, the notion of an autonomous knower, independent from the objects of study, has been seriously questioned. The work of Foucault, Derrida and other postmodern scholars amplified a distrust in the Enlightenment legacy in social sciences (Erickson, 2018). As Erickson (2018) explained, postmodernism questioned the authority of master narratives which were developed based on a natural science notion of evidence and presumed universally applicable. In doing so they opened up lines of alternative epistemologies evident in increasing numbers of researchers adopting a stance of advocating, collaborating, co-authoring and co-writing with people who are studied.

The sociocultural theory has specific relevance for education in Aotearoa New Zealand as privileging the sharing of power and knowledge (A.H. Macfarlane et al., 2015). The examples of its connections and relevance to mātauranga Māori have been described by many Māori researchers and theorists (Bishop, 2003; Bishop & Berryman, 2006; Bishop et al., 2011). Some examples of parallels with the sociocultural approach adopted in this study and Māori research can be found in Bishop's explanation of power relations and in the importance of relationships described by Glynn and Bevan-Brown (2007) and Berryman and Togo (2007).

Further parallels can be found in 'culturally responsive pedagogies of relations', as described in Te Kotahitanga<sup>1</sup> with its focus on student-teacher relationships. This involves shared knowledge and co-construction of knowledge, centrality of relationships and constitutive power of culture and society (Bishop & Berryman, 2006; Bishop et al., 2011). The concept of *ako mai ako atu* (reciprocity of learning and teaching) describes the communal ownership of knowledge and centrality of relationships. Bishop (2003) further explains how narrative pedagogy supports culturally situated meaning making through power sharing and moving away from deficit thinking (Bishop, 2003). Māori research in education and health supports some of the basic premises underpinning this study, namely, social, cultural and historical situatedness of the human condition and human relationships. Ritchie (2015) suggests that all education in Aotearoa New Zealand should be evaluated from a sociocultural theoretical perspective. Research has demonstrated benefits of sociocultural, dialogic, relational approaches in education to the growing immigrant population in New Zealand (Chan & Ritchie, 2016).

In the introduction chapter, I briefly outlined Said's (1994) proposal to challenge the separation built into the idea of the individual self with the concept of *hybrid counter articulations*. With the term hybrid counter articulations, Said refers to the need to voice the human existence *in between* accepted norms (of culture, identities, sexuality and so on). With this, Said aims to achieve a critical consciousness about the separations built into the idea of individual self. Specifically, he calls for social sciences to do more to influence this change by teaching and exploring how cultures have always mixed and lived together, rather than how one culture fought to protect itself from others. He recognises the value in lived experiences of people living between cultural and other norms. This spoke to me as an immigrant and as a

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<sup>1</sup> Project to support the development of more effective classroom relationships and interactions with Māori students.

practitioner because the complexities of relating on a cultural level must have some shared features and attributes with the complexities of relating in interprofessional teams. Collaborative teams are microcosms of our society and the larger world. Said leads me to wonder how we can work to recognise the spaces between the norms in interprofessional teams and how to engage with them.

Appiah (2007) considers the critique of individual self in the context of growing multiculturalism and he constructs somewhat different alternatives. In introducing his definition of cosmopolitanism, Appiah uses a similar term, contemporary hybridity. However, some years after Said, Appiah noticed how people in multicultural societies tend to enforce diversity by trapping people into a single identity, a kind of identity they want to escape. Appiah is interested in being able to retain connections with certain forms of identity without feeling trapped in them. He is looking for a way to care about each other, but in a way that doesn't expect us all to be the same. He contends that people are entitled to shape their lives in a way they need and in partnership with others.

For Appiah (2007), this partnership is rooted in the obligation we all have to value each other's differences. This reminds me of my own experiences of being in teams where team coordinators work hard to ensure equal participation that is expected to take place within predefined roles and responsibilities. For example, when a psychologist voices her opinion as a parent or a woman, or when a teacher aide voices her opinion as an educator, they may be seen as overstepping their roles. I needed to learn about the work presented in this section to understand that this kind of enforced egalitarianism can only be successfully challenged by challenging the idea of separated self.

Appiah (2007) further illustrates how mutual exclusivity is built into the structure of many kinds of identities – racial, gender, sexuality, religion, and so on. He explains how there is nothing about identity that prevents the overlap of different identities. Indeed, the best way I can find to describe my professional identity and cultural tradition is overlapping, but without hierarchies. However, this view is often followed by the commonly accepted view – if you are more than one thing you are not really anything. With cosmopolitanism, Appiah proposes a notion of global citizenship. I am grateful to Appiah for illuminating the single identity trap hiding in multiculturalism. It is my understanding that cosmopolitanism is Appiah's attempt to open up and engage with the spaces between identities, but I struggle to see how cosmopolitanism is not vulnerable to the traps of single identities.

Aotearoa/New Zealand provides unique and rich grounds for exploring these ideas for a number of reasons. First, are the lessons from mātauranga Māori (Māori knowledge). Mātauranga Māori is understood in this thesis as a relational theory and will be further explored in the next section of this literature review. Some of the concepts for exploring relational views are ako mai ako atu and tuakana teina (learning-teaching reciprocity), and insights from Te Kotahitanga (unity) research. They all emphasise the importance of relationships and conceptualise the self as not only embedded in, but mutually emerging with the cultural and relational processes (A.H. Macfarlane et al., 2015). Secondly, Te Tiriti o Waitangi (the Treaty of Waitangi) is a commitment of the people of New Zealand that demonstrates how it is ethically, historically and politically not only justified but necessary to jointly coordinate action to protect and nurture an identity at risk of being lost.

Lastly, in New Zealand many people live hybrid life experiences, as articulated by Said (1994) and Appiah (2007). Many of my friends would agree that we orient ourselves in relation to otherness as constituting of who we are and can become. In that sense, the question of relational identity might be of interest to them, too.

### ***3.3.3. Spaces between built into the way we use language***

After having explored the literature pointing out reasons why we should be concerned with the way we conceptualise the individual self as bounded and separated from others, this section explores the literature concerned with how separations are built into the language we use. As indicated earlier, the social constructionist position on language offers a way to better understand and address this separation. They propose that separation is built into how we conceptualise and use language. The constitutive view of language, adopted by social constructionists, proposes that we live in worlds of meaning and that the language we use constructs, rather than simply represents, these worlds. This view also proposes that rather than simply conveying information, language use is a responsive process in which meaning is constructed through dialogue. In other words, language is profoundly relational (Ness & Strong, 2014).

Wittgenstein (1953) made arguably the most critical contribution to the understanding of language in this way. Rather than possessing inherent meaning, he proposed that words (and consequently human action) attain meaning from their use. He pointed out that it is the everyday conventions or language games within which words are used that grant them meaning (Wittgenstein, 1953). As simple example is in the word 'love', which has one meaning in the game of romantic



relationships and another in a game of tennis. In a more complex and culturally significant example, it is recognised in Aotearoa/New Zealand that the words 'family' and 'whānau', although they translate into one another, possess very different meanings. The word whānau also includes physical, emotional and spiritual dimensions (*Te Ara, The Encyclopedia of New Zealand*, 2021).

Words attain meaning from specific ways of acting, thinking and relating, and cannot be directly translated into any context. In the context of collaborative teaming, 'needing safety' may be understood in a variety of ways. For a psychologist, safety may mean 'needing predictability and consistency', for a social worker 'food and home', for a teacher 'peaceful space without distractions', for an occupational therapist 'freedom to move my body', and so on. When we assume that shared understanding exists without taking the time to negotiate the meaning of key words with other professionals and, indeed, the young person and their whānau, collaboration loses its grounding. We go on in our different worlds of meaning expecting everyone to act in accordance with our own understanding.

Derrida (1988) takes this argument further. For him, individual words and individual acts, on their own, possess no meaning at all. Meaning making is a reciprocal process. This is described in the literature as an act–supplement relationship, and a process by which all human action becomes relationally co-constructed (Hosking, 1999, 2011). Gergen (2009) illuminates that if I nod my head, your nodding back makes it a greeting. But if you run away in fear, it is no longer that. So, it follows that I do not control whether I am a polite greeter or a threat. With giving up control, however, we give primacy to the process of relating. Further in this chapter, I explore a world of possibilities hiding in these seemingly simple examples. Since the meaning of a word depends on its use in context, it follows that individual words (act) need the context of other words (supplement) to attain meaning. Wittgenstein (1953) contends that our thinking is never complete without the act of speaking. The act of sharing our thoughts with others, even if they are imaginary, completes our thoughts, he claims.

This logic provides a rationale for, and underpins the need for, a culturally responsive worldview. S. Macfarlane et al. (2015) illuminate how from a sociocultural perspective, western knowledge is culturally bound and cannot be translated directly into Māori culture. In a 'braided rivers' approach, the authors propose a confluence of Western (individualistic) and Indigenous knowledge for a culturally responsive education system (A.H. Macfarlane, 2015). In New Zealand,

practitioners working with Māori whānau have an ethical obligation to know the difference between the words 'whānau' and 'family'. In a similar way, from the perspective of this study, we will soon explore the difference between the terms 'collaboration' and 'mahi ngātahi'. First, I turn to creative ways therapists explore the relational potential in language.

### **3.4. Engaging with the Spaces Between**

The human subject can actively crack open its own boundaries, welcoming its own vulnerability as that which makes it much larger than itself, creatively evolving, capable of taking itself beyond itself, and also capable of recognizing its own limiting practices, and modifying them.  
(De Schauwer et al., 2018, p. 17)

The preceding section highlighted the need to understand relational processes as necessary from a social, cultural and ethical perspective. The following paragraphs illustrate a slow movement in understanding the self as inhibiting more than just the mind. In varying degrees for the following authors, relationships are no longer conceptualised as a process between already formed and separated individuals. They are interested in relationship as a process of becoming. The authors presented here attempt to articulate the process by which the self becomes relational. They are looking for ways to make the implicit and taken-for-granted relational processes more visible in order to engage better with them. This section concludes with a somewhat radical idea of self-originating and existing entirely in the process of relating, as Gergen (2009) takes the next step in challenging the idea of individual self.

#### ***3.4.1 Recognising the spaces between in therapy***

This section begins with exploring relational process to grasp what it means to be relationally responsive and looks at the way a New Zealand therapist, Johnella Bird, unpacks and engages with relational spaces. This is relevant to this study because both therapy and interprofessional collaboration have a common interest in language.

The field of therapy has made rich contributions to our understanding of the process of transforming and co-creating worlds through language (Anderson, 2012b, 2020; Lock & Strong, 2010; White & Epston, 1990). With a background in narrative therapy

and a specific focus on relational processes, Bird's work is grounded in a specific conceptual stance. For her, the self is known and experienced in relationship with people and the world around us (Bird, 2008; Ness & Strong, 2014).

As noted earlier, for social constructionists, language is constitutive rather than representative of our life. Ness and Strong (2014) note that for Bird, language is also profoundly relational. Bird makes two important points: change in action is underpinned by a meaningful change in language and change is always negotiated in a relationship. Bird describes this orientation in the use of language as relational language making, which "implies a space where individuality disappears" (Ness & Strong, 2014, p. 92).

This view of language encourages participants in therapy to be mindful of the language they use in relating to each other. Narrative therapists work hard to give away their language to adopt the client's language (Morgan, 2000). For example, when talking to their clients, therapists listen carefully for the client's naming of the problem. This isn't mere politeness nor just an engaging technique. This is a philosophical stance firmly grounded in the social constructionist view of language and its transformative potential (White, 1998, 2007; White & Epston, 1990). Bird (2008) adds to this idea by suggesting that relational language requires a clearer sense of negotiability and openness about what words mean. This negotiability needs to be attuned to, developed and nurtured. Bird suggests that therapists in the area of relationship counselling need to work on developing an environment where language use is explored and couples find the language they deem better for their relationship. In the shift from what is better for individual partners to what is better for their relationship, a new relational space opens and new actions become possible (Ness & Strong, 2014). This requires relational consciousness. In the context of family therapy, it refers to paying attention to how people over time *negotiate meanings into words* (Bird, 2008).

To say that language is relational is to acknowledge that the same words may have different meanings to different people. For partners in a relationship, for example, 'closeness' might carry different meaning for each partner. When language is conceptualised as reflecting the world (as opposed to constructing it), the difference in meaning is not conscious nor is it reflected upon. When a statement such as "he's ADHD" is made in a meeting, professionals are likely to mean "At some point he was diagnosed with ADHD and may or may not be on medication". The child, on the other hand, may think "I am ADHD. That is who I am, and there is nothing I can do

about it". When statements are made as representing a fact of life, we are not likely to stop to check on their consequences in our or other people's lives.

Family therapists have long been interested in how this can lead to unhelpful patterns of communicating. To reiterate, when people are in a relationship (personal or professional), the same word attains another *meaning between people*, meaning relevant for their relationship. Being willing to explore and understand how this meaning originated, how it is maintained and how it influences the relationship requires *relational consciousness*. In this process, Bird (2008) shifts from individual to relational questions and uses *deconstruction* and *externalization* by moving from the individual to phenomena located outside the person and in the relationship. By moving away from a private to a relational construction of meaning, she offers a rare insight into the spaces between.

Ness and Strong (2014) argue that "relational consciousness is an enacted sensitivity to the way in which one's use of language performs in terms of how others respond to that use. Such reflections enable partners to better understand the relational effects of individually contextualised words as part of a search for words that can better serve their relationship" (p. 89). It makes me wonder what difference it would make for collaborative teams to negotiate what some key concepts, such as learning, behaving, socialising and so on, mean for individual professionals and what they could mean for their teamwork. Does learning mean sitting, listening and following instructions, or does it mean moving, challenging, taking risks and making mistakes? In my experience, professionals in interprofessional meetings typically assume that everyone holds the same understanding of professional terms.

Just as is the case with relationships between couples, linguistic meanings can stabilise into unhelpful patterns of understanding in teamwork. When taken for granted and not reflected upon, those patterns can have paralysing effects on interprofessional collaboration. Take for example the word 'safe'. If an HCN plan specifies a client's goal is to feel "safe", the constructionist view on language requires us to reflect on and jointly negotiate the meaning of the word for the whole team and indeed the client. This is in contrast to goals being defined by generic observable and measurable terms with little or no space for relational meaning making. Thus, it can be argued that the work presented in this section translates easily and significantly into the context of interprofessional collaboration. Next, I look

at a form of research attempting to move beyond the individual self with the aim to further explore relational engagement.

### **3.4.2. *Recognising the spaces between in research***

Influenced by Foucault's work, De Schauwer et al. (2018) interest in exploring the spaces between has produced a notable attempt to challenge the notion of difference as natural and neatly boxed in categories of normativity and disability and the related notion of generic ideal. The authors' collective biography has been recognised as an innovative and exciting approach to research methodology (Denzin & Lincoln, 2018). In light of the conceptual framework adopted in the current study, it is interesting to note that collective biography as a methodology aims to remove the boundaries associated with the theory/practice, subject/object and research/participant divides. Davies and her colleagues propose new ways of thinking and being that are open to ambiguity (Davies, 2017; De Schauwer et al., 2018)

In a well-known collective biography, De Schauwer et al. (2018) and their participants collectively explored their memories of the spaces in between *normativity* and *disability*. Their work is grounded in an understanding that the idea of the individual self is a precondition for the normativity/difference binary. For them however, the self is made through possibilities opened up in relationships – multiple, mobile and always open to joint remaking. Specifically, in their study the participants explored what it might mean to be open to ambiguity in the conception of the self and other discursively imposed categories of difference. When collectively explored, memories can become a way to open up a space for “mutual becoming where we are each bound together in a mutual entanglement of becoming each other” (De Schauwer et al., 2018, p. 8). In a process where participants and researchers affect and are affected by each other at the same time, collective knowledge emerges that cannot be divided into individual possessions.

Davies (2017) examines the self as discursively constituted and having permeable boundaries. For Davies, any boundaries the self-possesses are temporary and problematic. Similar to Bird (2008), De Schauwer et al. (2018) take up a philosophical position of negotiability of meaning. They illuminate how ambiguity can open alternative ways of thinking and therefore acting about disability. Importantly, the agency for action is not situated in individual minds, it is situated in relational potential. For them:

Agency lies in the memories themselves that are generated in the collective biography, it lies in the others in those memories, in the workshop itself, in the place where the workshop is held, in the written memories and in the drawings of those memories – all of these agencies or intensities (human and non-human, material and non-material) are entangled with each other, affecting each other. It is a diffractive, rather than a reflexive process; not peering into a mirror to see what is reflected back from an imagined real and stable world, but an exploration of the complex mo(ve)ments through which we come to exist. (De Schauwer et al., 2018, p. 8)

In reaching beyond the self in the process of becoming, a deeper, relational potential opens. Davies and her colleagues explore the self as discursive while opening up to, and engaging with, the relational spaces. One might say that they creatively and powerfully challenge and redefine the idea of individual self. This work makes me wonder what classrooms would look like without the normativity/disability binary. What difference would it make to see learners as teachers, antisocial behaviour as socialising, and so on?

What stands out from the literature on relational engagement reviewed so far is the growing interest in beginning to engage with it. Whether the authors refer to it as hybrid counter articulations (Said, 1994), relational language making (Bird, 2008), dialogic process, intracorporeal multiplicity or collective agency (Davies, 2017; De Schauwer et al., 2018), they are all concerned with moving into relational spaces while maintaining the self as existing in the individual mind. Gergen (2009) however, gives up the idea of individual self altogether. This concept is reviewed next.

### **3.5. Inhabiting the Spaces Between: Relational Orientation**

Kenneth Gergen is an influential and prolific author in the field of psychology with transformative influence on education (Dole, 2020; Dragonas, 2020; Dragonas et al., 2013; Gill & Thomson, 2020; Lund & Winslade, 2018), therapy (Anderson, 2020; McNamee, 2015; Mocheta, 2020; Mudry et al., 2019), community (Bodiford & Camargo-Borges, 2014; Bozatzis & Dragonas, 2014; Dragonas, 2020; Newbury & Hoskins, 2016), organisational psychology (Camargo-Borges, 2019; Haslebo, 2020; Larsen & Willert, 2018; Madsen, 2016; Raelin, 2006), and many other areas of academic and social life. He argues that the western world should move beyond the

conception of the person brought about by the enlightenment of the seventeenth and eighteenth centuries (Gergen, 2013). The idea of individual self, the very basic idea underpinning the humanist movement brought about by the enlightenment, is challenged by Gergen.

### ***3.5.1. Relational positioning***

The idea that we are individual, bounded beings and contained in our bodies, separated from each other and the rest of the world, is integral to the way we think of ourselves and our social lives. It is so fundamental to our way of living that we find talking about it difficult (Gergen, 2009; Sampson, 2003). Gergen (1991, 2000, 2001, 2015b) explains that thinking about myself as ‘my own person’ with my own needs, ideas, aspirations, plans for the future and so on, inevitably leads to getting caught up in the ‘me first’ pattern of thinking and all the divisions and separations characterising our society today.

When thinking about a team of professionals, it is safe to assume we will first think about the individuals making up the team. The individual person with her/his characteristics is the basic unit, the starting point. Next, we will want to divide the team into roles, each contributing specific skills and knowledge, e.g. a coordinator and team members, or leader and followers, and so on. The resulting hierarchies seem inherent and unavoidable. Gergen (2009) vividly demonstrates how this also means that we need to take care of our position, role, and contribution before taking care of relationships. This kind of thinking provides a justification for celebrating the leader, the originator of the idea, and so on. The collective capacity and the process of relating seem less important. However, most of us intrinsically know that this is not the whole story.

Gergen (2009) proposes an alternative where relationships come first. He starts by asking if it is necessary to separate our world into units (e.g. things and individual selves), or is it that way because our language is made up of units (separate words). He suggests that it is not individual minds who come together to form relationships, it is out of relationship that individual functioning emerges. Slife (2011) “consider[s] it a benchmark contribution to social psychology, if not psychology generally” (p. 227). More precisely, it is out of the relational process that everything we value emerges.

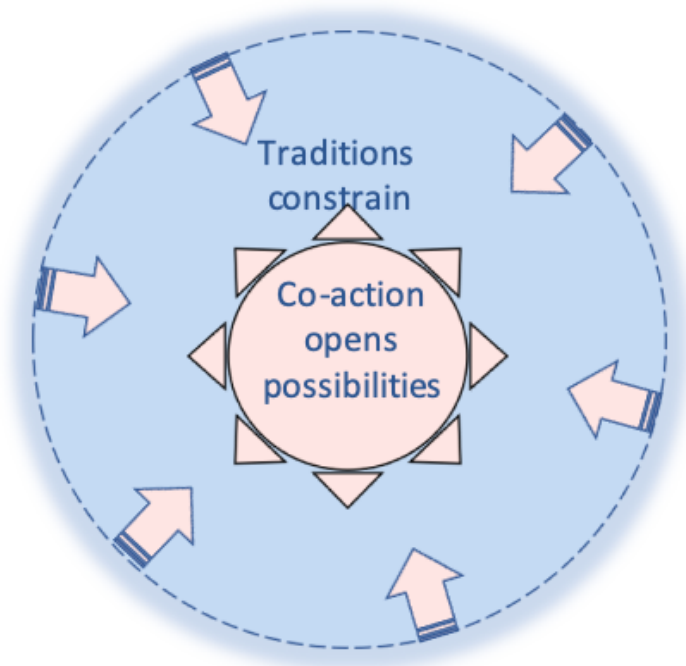
#### ***3.5.1.1. Self-emerging in joint action***

The attention so far in this chapter has been on recognising and exploring the spaces between co-constructed but still separated individual selves. In this section

we make a more radical move and consider giving up the conception of the self as contained in the body and firmly separated from others and the environment. This is the main concern of the relational orientation (Gergen, 2009). For relational constructionists, self is emerging within the relational space in joint action (Gergen, 2009, 2015a; Kirshner & Martin, 2014). Hosking (2011) explains that a separated “subject constitutes only one possible view of personhood [...] other views emphasize socially constituted identities, power relations and leave the individual only as one structuring possibility” (p. 51).

Gergen’s *Relational Being* (2009) is an invitation to temporarily suspend the idea of individual self and to consider relationship first. He proposes to shift the focus from individual action to *joint action* instead. He refers to joint action as *co-action*. For Gergen, co-action has two main attributes. It implies limitless possibilities for action and it always occurs within the constraints of a given tradition of understanding. As discussed later in this section, Gergen refers to all knowledge as traditions of understanding to emphasise its socially constructed and value saturated character. As illustrated in Figure 3.3, co-action is nested in the tension between the push of the possibilities to expand the space for action and the pull of the constraints of the given tradition.

**Figure 3.3.** Co-action





Gergen (2009) refers to the process of jointly coordinating the unavoidable constraints of a given tradition and the unlimited potential inherent in co-action as *relational coordination*, as well as relational dance or choreography. Considering the world in these terms offers a glimpse into a world where self gradually grows faint and relating replaces separating. Thus, the world of *relational being* promises new ways of going on together. For interprofessional collaboration this would mean that instead of focusing on what individual team members do, we focus on the process of jointly coordinating individual acts. The dance metaphor brings to mind a number of experiences related to different interprofessional teams. One can argue that every team over time develops its own choreography. I can distinctly remember a team where fun and laughter were often present, a team where personal stories were often shared, a strongly ethically conscious team, a studious team, and so on. Each related to how individual actions were jointly coordinated.

Hosking (2011) describes ways in which relational constructionism differs from other social constructionist approaches by pointing out that relational constructionism centres on relational process, not on already socially constructed (or real) subjects. While Gergen (2009) challenges the idea of individual self and invites us to temporarily suspend it in order to consider alternatives, it is important to note that he does not reject it. Doing that would undermine the relational constructionist commitment to ontological neutrality, which is discussed later in this chapter. The dialogue between Churchill (2011a, 2011b) and Gergen (2011a, 2011b) further clarifies that Gergen does not “deny the place of the individual but, rather, shift[s] the centre of gravity from the individual psyche to its relational matrix” (Churchill, 2011a, p. 298). Churchill (2011a, 2011b) describes relational being as an irreducible sum, a relational matrix which includes the individual as “always already existing within a network of significations” (Churchill, 2011a, p. 298). Churchill’s description lends itself well to the context of interprofessional collaborative teams. His terms ‘relational matrix’ and ‘existing within the network of significations’ gave me words to explain how I imagine collective capacity – not as professionals contributing with individual action, but as a relational matrix that emerges beyond any one action.

#### *3.5.1.2. Meaning is emerging from relational language*

Co-action largely relies on language. Because “people act from what is meaningful to them” (Raboin et al., 2012, p. 8) relational orientation is interested in the process of jointly coordinating meaning. From this perspective, meaning-making is not a monologic act completed in the individual mind. Since co-action is required for any

meaning to emerge, language and dialogue are central in exploring meaning-making (Hosking, 1999, 2011; Hosking & McNamee, 2006; McNamee, 2014; Raboin et al., 2012). Therefore, meaning is bound by the relationships we are embedded in and by the language we use.

The emphasis here is on language as an ongoing process of *acting and supplementing*. Lock and Strong (2012) shine light on the social coordination of meaning and understanding as the main concern for social constructionists. The first change when this view is adopted is that talk and action become the same (talking is doing). Action becomes any act that it might be coordinated with, such as spoken word, company logo, or a piece of jewellery (Hosking, 1999). They invite supplements. For example, saying 'hello' invites a greeting, jewellery invites art appreciation, and so on.

#### *3.5.1.3. Self-emerging from multiple relationships*

As indicated earlier, relational process is always in relation to a particular tradition. At any one point in time, the traditions (bodies of knowledge) we bring to co-action contain many past relationships and many others. We are always embedded in multiple relationships. Therefore, just as relational selves are dialogic, not monologic, relational selves must also be multiple and not singular. It then follows from the notion of multiple selves that co-action inevitably contains many possibilities for action. Clearly defining specific goals and outcomes early is an important aspect of interprofessional collaboration teamwork for HCN practitioners. From the relational position, however, identifying specific outcomes early in the process seriously limits what can be achieved. Therefore, curiosity and quest for possibilities will serve the team better than a quest for certainty (Gergen, 2009; Hosking, 2011, McNamee, 2014). The challenge then, seems to be how to stay open to possibilities while meeting the accountability requirements in the evidence-based practice context.

#### *3.5.1.4. Knowledge as tradition*

From the relational perspective, knowledge is a tradition emerging from a relational process within communities of understanding. It has already been discussed earlier that communal origins of knowledge, centrality of language and value saturation of knowledge are the three main lines of argument encapsulating social constructionist thought (Gergen & Gergen, 2003). From this position, all knowledge is recognised as traditions of communal understanding. All action and meaning derive their intelligibility from specific communities of relational understanding or traditions.

Consequently, traditions are always local, temporary and carry specific values (Gergen, 2009).

As Gergen (TAOS Institute, 2010) explains, a solid object made of plastic and filled with water, which we call a water bottle, will be described in terms of atomic structure by a physicist, in terms of molecular connections by a chemist, in terms of style by an art historian, in terms of environmental degradation by an environmentalist, and so on. No one here is right or wrong. All statements are meaningful within their traditions of intelligibility and they all bring a different set of concerns and values. In order for action to be intelligible to us, it needs to be embedded in a tradition of understanding in which we participate (Gergen, 2009).

Each professional in the above example brings a rich and valuable tradition with specific concerns and values to the topic of the water bottle. It seems obvious that when professionals are also genuinely curious about the other traditions and what brings them together rather than what sets them apart, more possibilities for action would open. Situations spring to mind of experiences of interprofessional collaboration teams where a tradition was presented as “the best practice” or “supported by best evidence”, closing any possibility for conversation and exploration of other possibilities. For interprofessional collaboration teams, this view of knowledge requires professionals to be aware of the values their skills and tools bring to collaboration and is more open to change. More importantly, it requires a specific type of curiosity. What this means and how genuine curiosity might be achieved will be discussed in the next section.

As Hosking (1999, 2011) summarises, relating is a joint action constructed in language and other forms of action. Co-ordinating involves act-and-supplement, text-and-context relationships. Acts invite possible supplements; some become conventions but other supplements are always possible. Coordinating starts with text-context relations already in place; coordinating limits how a process is likely to go on. Processes remake the self in relation to particular (in time and space) others; they are standpoint dependent. Processes are local – social and historical (Hosking, 2011).

The next section outlines the main argument of this study. This is where I delineate ways in which social and relational constructionism offer a unique resource for transforming tradition from the position of care.

### **3.5.2. Transforming tradition through enrichment**

Some might argue that the preceding section makes a number of simple, even obvious statements – that relationships are important, that our experience of the world is socially constructed, and that curiosity opens more possibilities than certainty. To separate the relational constructionist position from this criticism of simplicity, we need to turn to the conceptual framework again. I will argue next that accepting ontological neutrality and starting with co-action opens new possibilities for how we work and live together. When traditions arise from this position, relational responsibility can flourish.

#### *3.5.2.1. Ontological neutrality*

Gergen (2009) proposes that it is not individual minds who come together to form relationships, it is out of relationship that individual functioning emerges. This position opens a possibility of a world where co-action, rather than individual action, is the unit that makes up our societies. Although Gergen exposes the limits and detrimental consequences of the tradition of individual self and individual agency, it is critical to note that he does not suggest to erase or eliminate these traditions. He acknowledges them as useful ways around which we organise our lives.

Gergen's (2009) seeing and acknowledging of the value in the tradition which he is labouring to reshape is a significant point, not a superficial politeness. The reason Gergen can aim to transform that which he values, has its origin in the social constructionist ontological position. This is the point where social constructionists move beyond merely stating the obvious when saying that our understanding of the world is socially constructed. Gaudet and Robert (2018) point out that social constructionists are not interested in ontology. Although this remains problematic for those who contend that ontological neutrality is not possible (Clegg, 2011a, 2011b), Gergen (2011a, 2011b) maintains that relational orientation is ontologically uncommitted. Churchill (2011b) further explains that Gergen's work has clear ontological implications while maintaining the social constructionist position of being ontologically mute.

Social constructionists are not interested in describing and understanding the real and true account of reality. For them, whatever exists is just simply out there, not requesting any one, particular type of description (Churchill, 2011a, 2011b; Gergen, 2011a, 2011b). This positioning allows social constructionists to be equally curious about all descriptions of the water bottle, for example. Consequently, social constructionists shift their concerns to a pragmatic approach to social action

(Gaudet & Robert, 2018). It isn't what is right or the case, but what we do with it in order to go on together that matters (Gergen, 2009). Gergen (2015b) refers to this orientation as *reflective pragmatism*.

The ontologically uncommitted stance is important as it allows social constructionists to say: "Our traditions do have value; they are worth respecting. However, such traditions should be treated as optional, as opposed to defining the limits of our world" (Gergen, 2009, p. xvi). In other words, we have constructed them, and therefore, we can understand their value for specific space and time, but we can also construct alternatives when the relational coordination calls for it (Gergen, 2011a, 2011b). When laid out this way, it is not difficult to see that commitment to any one ontological position would imply potential for antagonism towards other possible positions.

Therefore, from an ontologically uncommitted stance, there are no opposing positions. This is the point where transforming tradition from the position of care becomes possible and even implied in the logic of not pinning down the single 'right and true'. When a diagnosis such as ADHD is recognised as a way to understand the child's behaviour, rather than *the only* way, a space opens for exploring alternative ways of understanding to find creative day to day solutions. In this way the diagnosis is positioned as something that affects the child's life, not as something he/she is.

The context of interprofessional collaborative teaming lends itself well to exploring relational orientation because it brings together professionals from different organisations, services and backgrounds. Many clashes of traditions similar to the 'best practice' example spring to mind. However, this study was more interested in valued experiences of successful collaboration from the perspective of HCN practitioners. This study was interested in what they had to tell us about relational orientation in their practice.

When conversations go in a degenerative direction due to the clash of different perspectives, professionals are expected to acknowledge all views as potentially valuable, even if different from theirs. However, when this positioning is conceptually grounded in ontological neutrality and multiplicity, professionals can become interested in potential rather than finding the right answer. Curiosity replaces the need to differentiate right from wrong. Then, validating another perspective becomes genuine and curiosity to explore what is valuable about that particular tradition of

understanding can be trusted. This is the step required to move beyond superficial politeness and towards relational being.

However, ontological neutrality is necessary, but not sufficient. It is the argument of this study that relational orientation adds a significant level of care and respect to the neutrality afforded by social constructionists. This is achieved in the form of relational responsibility (Gergen, 2009). This brings us to the question of the resources we have for transforming traditions. To reiterate, the main concern of relational constructionists is how do the physicist and the art historian go on together, for example, after having accepted that all traditions, including theirs, have value which is local in time and space.

#### *3.5.2.2. Transformation as enrichment of tradition*

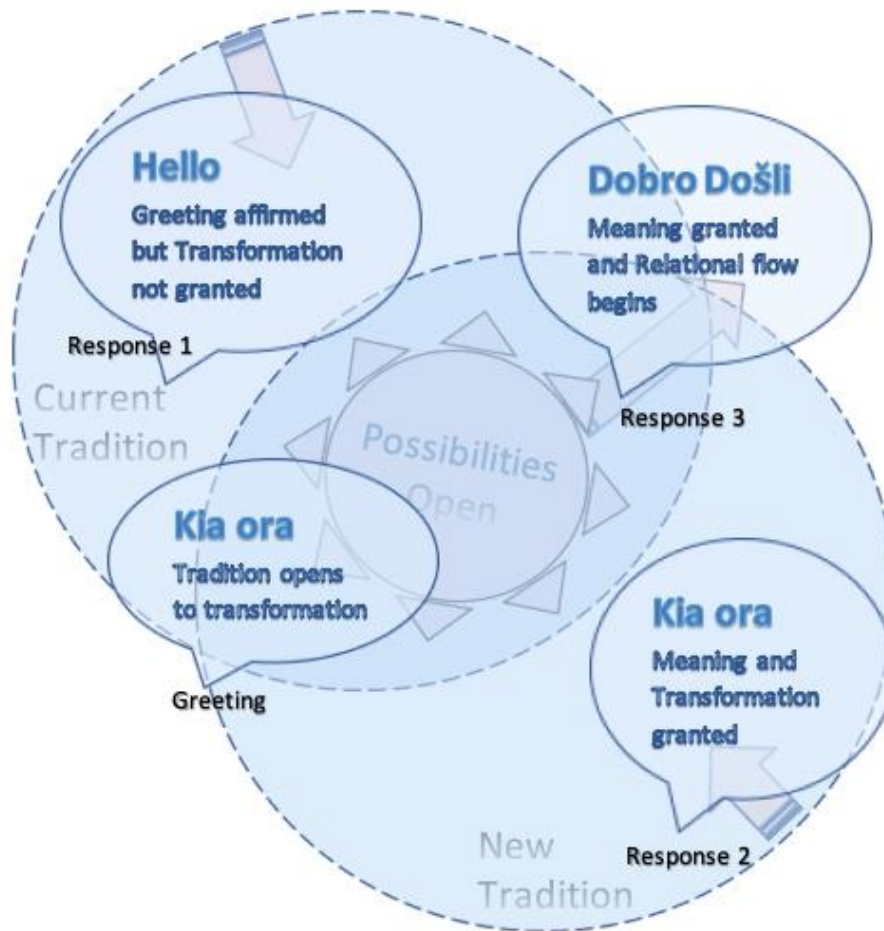
Relational orientation suggests that coordination offers a way to transform traditions through enrichment, rather than rejection and replacement. In important ways, rejection is not even possible. To use Churchill's (2011b) words, both the physicist and the art historian, for example, will always remain a part of the relational matrix in which they are embedded. So, it follows that co-action within a tradition new to us is likely to increase our consciousness of the limits provided by the traditions we participate in and expose to us the value of the possibilities that open in co-action.

This process can be explained in a more detailed example familiar to practitioners in education in Aotearoa New Zealand, where responsiveness to Māori culture is a key practice principle. It is well understood and accepted that being culturally responsive is not possible by simply following a rule book. It requires participation or, from the relational perspective, co-action. When I say *kia ora* (Māori language greeting) to a Māori colleague, my actions can only be judged as culturally appropriate, or not, by the person my actions are directed towards. Therefore, my actions require a supplement of that other person to gain meaning as appropriate or otherwise (e.g. offensive). It follows that without the other person my actions are meaningless. In that process of acting and supplementing, meaning is *granted* to my actions.

This example is extended and illustrated in Figure 3.4. At the start, my actions are constrained within the limits of my current language/culture traditions. In recognising that other greetings available to me (e.g. English hello and Croatian *dobro došli*) are not the appropriate options, I open up my tradition to transformation. Through co-action in the Māori language tradition, when I receive *kia ora* as a response, my

utterances become a greeting. It is this answer to my greeting that allowed the transformation to start.

**Figure 3.4.** Relational coordination



That is, when I say *kia ora* to my Māori colleague, in addition to offering a greeting, I open my cultural tradition for transformation. When I receive *kia ora* back I am invited to a new world of meaning (action and identity).

When I receive *dobro došli* (a Croatian greeting familiar to many Northland New Zealanders) as a response to my *kia ora*, both traditions are granted a new world of possibilities. Through the process of coordination, possibilities for action have now expanded beyond the cultural traditions the process started with. This means that now new possibilities have opened up for action and our actions can carry meaning in two contexts. This transformation is only possible when I am aware of the limits of the tradition I bring to the process of co-action. This is a critical point acknowledging all traditions we bring with us as containing boundaries, but valuable and necessary

in the flow of transformation. Had I done the opposite and considered my cultural tradition not important, transformation would not have been possible. From this perspective transforming tradition is simply, but significantly, a way of going on together.

To use an example from interprofessional collaboration, as a practitioner I bring to collaboration the educational psychology tradition. I need to be fully aware of the values and concerns attached to that tradition in order to see the possibilities for transformation which might open in collaboration by engaging with other traditions (e.g. parent, social worker, psychiatrist). The position of ontological neutrality and resulting genuine curiosity about other traditions will guide me to see that what I do next will always depend on the process of co-action. Not to be polite, but to transform the tradition I bring to collaboration from the position of respect and care. Relational constructionists value tradition, not because it is true (e.g. best evidence) but for its potential for transformation. This is because transformation is a way of going on together. From this perspective transformation also becomes a way to respect and care for traditions.

#### *3.5.2.3. Relational flow begins*

I can go on to say that living within other New Zealand cultures further enriched my understanding of the different ways cultural traditions come into being and are sustained. In other words, even more possibilities have opened up for new meaning of my actions and enrichment of my traditions. According to Gergen (2009), if there were no impediments to this way of going on together, we would have relational flow, where there would be a full and creative sharing of meaning from the immediate face-to-face relationship, to the local community, to the surrounding society, and ultimately to the world at large. However, for that enrichment to occur, the context of my culture alone is insufficient. In this process, the way I view my tradition has transformed because of my embracing the possibilities arising from the coordination described. Most importantly, transformation implies enrichment, not suppression. This is where I found the answer to Said's (1994, 2003) challenge for cultures to live together without suppressing difference.

The same process applies to transforming the tradition of interprofessional collaboration. Gergen suggests that:

Even as we listen to alien arguments, we acquire the capacity to repeat them. They are now features of our own vocabulary. Thus, the routes to



crossing boundaries are more numerous than the highways we have allowed to divide us. (Gergen, 2009, p. 371)

### **3.5.3. Relational responsibility**

The following section aims to bring together the proposals made in the preceding sections. From the relational perspective, participating in a way of life is participating in a communal tradition and embracing the values of that tradition (Gergen, 2009). Therefore, coordination is always concerned with what is valued and what we ought to do. What we consider good and not good originates from the same relational process. With his term first-order morality, Gergen (2009) illuminates how when societies decide on what is just, valued, and acceptable; the unjust, repugnant and unacceptable arise from the same process. They are all one thing, inseparable, dialogic and relational. Gergen (2009) refers to it as multiplicity of goods. As he states,

Struggles of conscience are not struggles between good and evil but between competing goods. (p. 359)

Gergen (2009) proposes relational responsibility as “collective responsibility for sustaining the potential of coordinated action” (p. 364). With this, he invites a mutual exploration of what is valued in any tradition. In this way, relational theory offers an alternative vision of the future. Moving between different traditions – cultures, histories, practices and so on – can no longer be seen as a deficit, which is implied in the hierarchies of us/them positions. In my experience there is a similar inescapable level of competitiveness and judgement tied to individual action focused collaborative teaming. When the aim is to sustain the potential of coordinated action, that competitiveness can dissipate.

From a relational perspective, to move between traditions does not amount to being deficient. Rather, it is seen as an enrichment of meaning with the potential for transforming tradition. From this perspective, I am allowed to see myself as contributing to this enrichment in the process of infinite transformation. The concept of relational being is the first vision of social construction of the self I want to apply to my life and practice. Here, traditions derive their value not as they stand alone but from the way they enrich (or not) each other. In co-action, we decide what is important, what we care about most out of the possibilities that open in the process. In some cases, it will mean protecting a tradition (e.g. identity) under threat of being lost. But those of us who feel chained by their identities will find other available

possibilities more inviting. From this perspective, mutual exploration through dialogue becomes the most valuable resource. The aim is to see conversation, not as a way to make a point, but as an extension of self (Gergen, 2009).

#### *3.5.3.1. Relational coordination in action in Aotearoa New Zealand*

Aotearoa New Zealand is unique in many ways, including the way bicultural living is understood and practiced. Te Tiriti o Waitangi (The Treaty of Waitangi) is a partnership agreement originally signed by Māori Chiefs and the British Crown in 1840. Te Tiriti has a turbulent history and continues to evolve. Te Tiriti is often used as an example of agreement without a shared understanding, with grave ramifications for many Māori and indeed Māori culture and language. Relational orientation postulates a significant difference between having an agreement and having an understanding. Unlike agreement, understanding is grounded in dialogic relations. From the relational perspective, understanding is synchrony in action (Gergen, 2009). Gergen (2009) describes synchrony in action as coming to know how to go on together, where dialogic processes, how we coordinate our actions, rather than an agreement on specified actions, is the focus.

Today, Te Tiriti is becoming a mediating structure between cultures and peoples by being in constant co-construction through dialogic relations (Penetito, 2015). In the context of exploring the dialogue between Māori and mainstream perspectives on knowledge in the education system, Penetito (2015) argues for the social constructionist propositions such as situated knowledge as worthwhile knowledge, primacy of action, and dialogic relations embedded in mutuality. He argues for an ethics of responsibility for each other that arises from dialogic relations and sits outside the 'middle ground', which remains an elusive concept for Māori. Importantly, he notes that the ethics of responsibility must be preceded by mutuality. Transformative change is only possible when there is mutuality. In this context, mutuality calls for Māori and the mainstream to adopt a shared responsibility for protecting that which is at risk of being lost, the indigenous view of knowledge. It is my understanding that Penetito's concept of mutuality aligns well with Gergen's (2009) concept of coordinated action when integrated with relational responsibility. Both concepts are dialogic in essence and therefore relational. Māori worldview is well-recognised as deeply relational with embodied responsibility to the wider society (A. H. Macfarlane et al., 2008; Sampson, 1988). This conception of mutuality stands out as valued for many immigrants (Holley-Boen, 2018).

As an immigrant, I can appreciate the transformative potential of the aspirations towards the ethics of responsibility. For me the mutual responsibility for co-action in the context of Māori culture offers one possible answer to the question both Said (2003) and Appiah(2007) ask: how is coexistence possible without suppressing difference? Penetito's (2015) words inspire me to wonder how I fit in the process. Much like earlier outlined, I feel invited, valued and motivated to take part in the possibility of relational flow. As a practitioner, I feel invited to explore the potential of relational orientation in the context of HCN collaborative teaming jointly with HCN practitioners.

#### **3.5.4. Concluding comments and critical perspective**

It is the proposed position of this study that Gergen's relational theory offers a shift in understanding and practising collaboration (Gergen, 2009; Kirschner & Martin, 2013). Rather than focusing on content and individual action, Gergen suggests a focus on process and co-action. For Gergen, tradition is rooted in relationships and transforming tradition implies enrichment in both. Relational orientation can be described as relating to each other in a way that is open to transforming tradition. Relational theory and research strive to be future-forming and socially responsible to fit the world of constant change (Gergen, 1991, 2015b; Gergen & Gergen, 2003; McNamee, 2014).

Relational constructionism also postulates that research should pay significantly more attention to jointly coordinated action. Relational constructionism has gone further than any other approach in conceptualising and understanding joint action (Kirschner & Martin, 2013). It is primarily concerned with *how* we jointly coordinate our actions and move on together towards the goals emerging from the process (Gergen, 2015b; Hosking, 1999, 2011; Hosking & McNamee, 2006; McNamee, 2014; McNamee & Gergen, 1999). From this perspective, the current study is a study of co-action (dialogic processes) in the practice of interprofessional collaborative practice, rather than a study of interprofessional collaboration. It is the main proposal for this study that engaging with HCN practitioners in this process will positively contribute to transformation.

From a relational perspective, multiplicity is grounded in ontological neutrality, not relativism. Gergen (2009) further suggests that co-action is a balance between the constraints of a given tradition of understanding and unlimited possibilities for co-action. At the start of any relational process, as outlined in the preceding sections, co-action is always limited by the constraints of the tradition in which it is embedded.

This point is important in social constructionists' response (Gergen, 2011a, 2011b) to critics' accusations of relativism (Slife & Richardson, 2011a, 2011b). Social constructionists maintain that not everything goes. In an act of curiosity about what is valued in different traditions, the limits of traditions become open.

Although, getting to the bottom of the ontological neutrality argument is not within the scope of this study, it was interesting to hear the critics' voice. In my reading of the arguments, the critics seem to be concerned with the right way to refer to the theoretical constituent parts, such as entities for Sugarman and Martin (2011), relational matrix for Churchill (2011b) or individual psyche for Clegg (2011a). For Gergen (2009), the *process* is the key concern, not how we refer to constituent parts. Gergen suggests that in this process, spaces open for both generative and degenerative outcomes with potential for transformation. This potential for transformation of a given tradition is the space most interesting from the perspective of this study. In this space, transforming tradition from the position of respect and care is possible. Positioned this way, it isn't you; it isn't me; it isn't your or my tradition; it is the coordination, the dance in which we and our traditions are inseparably interlinked and embedded (Gergen, 2009).

### **3.6. Relational Interprofessional Collaboration**

After having allocated considerable time to exploring Gergen's (2009) relational ideas, this section brings together the literature and concepts discussed in this chapter and considers their application in the context of HCN interprofessional collaboration. Here, I propose a framework for exploring relational orientation with HCN practitioners.

To reiterate, according to Gergen (2009), relational coordination is a process of moving through and co-existing in different traditions in a way that is open to transformation. Or in other words, relational coordination is a process of balancing infinite possibilities for co-action with the constraints built into the traditions in which we participate (Gergen, 2009). The context of interprofessional collaboration implies bringing together different ways of working or traditions. Therefore, exploring relational potential in the context of supporting children and young people with high and complex needs is expected to provide rich and exciting possibilities for ongoing transformation.

Māori academics and researchers have suggested that social constructionism “aligns with the worldview of many indigenous cultures globally and provides hope for theoreticians and practitioners” in their efforts to promote power sharing and culturally responsive approaches (A. H. Macfarlane, 2015, p.19). Specifically, relational orientation is reflected in many Māori concepts and values aiming to support people working in partnership. Berryman (2014) explains the difference between the English term ‘collaboration’ and the Māori term ‘mahi ngātahi’. Mahi ngātahi refers to the unity of people coming together in a hands-on task in a way that engenders solidarity. Berryman also emphasises the relational aspect of mahi ngātahi by pointing out that, unlike collaboration, mahi ngātahi is known to sustain the relationships formed well past the time when the task has been accomplished.

Diverting our attention to relational ideas in the context of interprofessional collaboration brings up a number of concerns: what does it mean and look like to make the shift in viewing conversations not as a way to prove a point, but as an extension of one’s potential; to challenge ourselves to pay attention to the actions that show respect, curiosity, presence? Every statement in a conversation creates a new potential, but how do we do good conversations?

Relational practitioners explore possibilities such as generative movement in co-presence (Anderson, 2012a, 2012b). Gergen is interested in what movement looks like: what you do; body posture, curiosity; how we give it validity, recognise it as valuable (Gergen & Gergen, 2017, 2018). These authors remind us that once the story has been shared, what we do next is important. Creating a new narrative is a sensitive move. Often words like ‘curiosity’, ‘compassion’, ‘being present’ are raised.

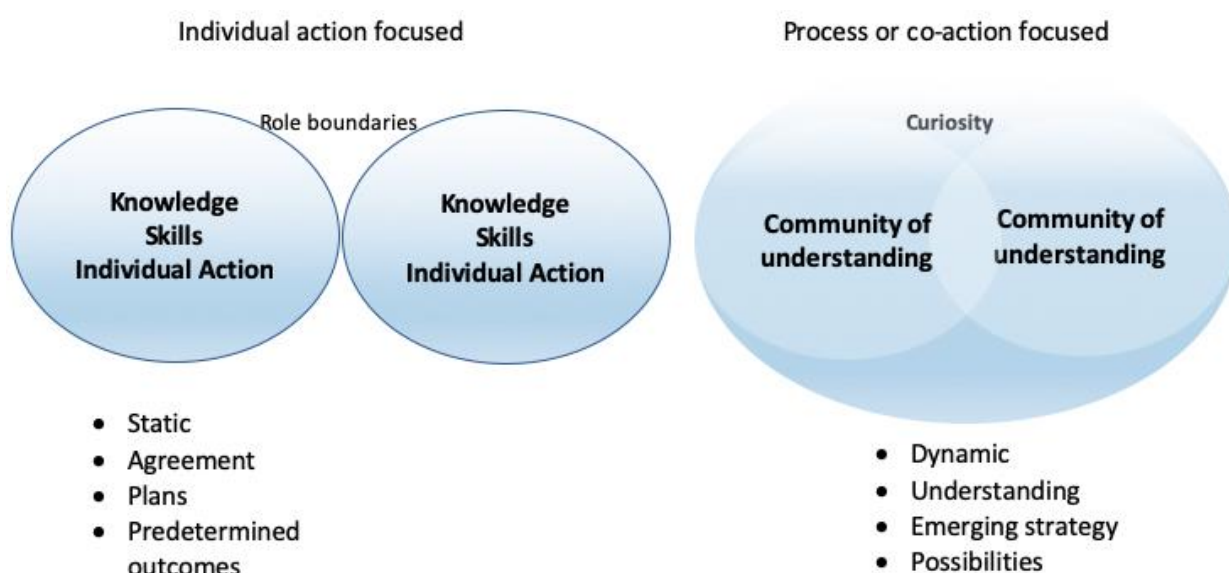
Relational orientation suggests that we have to change our efforts from trying to ‘get it straight’ to how we can move with the flow of shifting patterns of life and emerging life forms (Gergen & Gergen, 2017, 2018). Because social constructionists conceptualise the world as fluid and focus on culturally and historically situated worlds, as Pearce (1995) points out, it follows that polyphony of voices is celebrated. This is why practitioners, like me, feel invited to join in the dialogue and explore the relational space in interprofessional collaboration.

Embracing the concept of relational orientation, as described earlier in this chapter, can offer professionals in interprofessional teams a way to move away from hierarchies and boundaries implied in focusing on individual action related to individual professional roles. It offers a way for interprofessional teams to enrich

individual professional traditions and interprofessional practice as a whole. I was interested to explore this potential in the context of HCN interprofessional collaboration as a highly valued practice, with the aim of exploring how the process of transforming tradition can provide a new direction for interprofessional collaboration.

Next, I present a diagram illustrating how the information presented so far translates into the context of interprofessional collaboration. Figure 3.5 illustrates a relational orientation in interprofessional collaboration as a shift from an individual action focused way of working to a co-action or process focused collaboration.

**Figure 3.5.** Relational orientation in collaborative practice



Consistent with relational stance practice is referred to in terms of principle-based ways of working, not a new model to replace current practice. This study invited HCN practitioners into a dialogue on exploring possibilities for potentially enriching, not replacing or rejecting their current practice. In the context of this study, it also needs to be considered that HCN practitioners are a group of highly experienced practitioners who are passionate about their work and that HCN practice is highly respected in the field. Therefore, approaching the current HCN practice with respect was paramount. For the reasons presented in the preceding sections, relational orientation aims to do just that.

However, for the purpose of illustrating the shift in focus, the diagram in Figure 3.5 positions the two ways of practicing interprofessional collaboration as separate. If we imagine a group of professionals around a table working to develop an HCN plan for a young person, the figure depicts two possible orientations in practice. They are individual action focused collaboration and co-action attentive interprofessional collaboration.

### ***3.6.1. Individual action focused interprofessional collaboration***

The left side of the relational, co-action attentive collaboration diagram (Figure 3.5) depicts an individual action focused way of working. Here, each practitioner brings to the table a set of specific knowledge and skills. That area of knowledge or a specific skill is their contribution to the teamwork. A psychologist, for example, brings their knowledge of neuroscience, brain development, experience in complex trauma, and so on. A speech language therapist contributes their knowledge of language development, speech impediments, and communication difficulties. This way of working implies a specific definition of knowledge with implied hierarchies in any one situation and with clear consequences for teamwork. For example, a teacher might be seen as an expert in curriculum, but not in understanding behaviour. So, when the teacher has a different understanding of the child's behaviour to the psychologist in the team, they might be reluctant to voice their disagreement. Additionally, if knowledge is what I bring in my head, and that is also the value of my contribution, I will tend to protect it. Therefore, protecting and respecting role boundaries is important in this way of working.

Typically, the teamwork starts with an agreement on the priorities and specific goals for the intervention. This is followed by clear step-by-step intervention procedures to achieve predetermined outcomes.

### ***3.6.2. Co-action attentive interprofessional collaboration***

The right side of the co-action attentive collaboration in Figure 3.5 is based on the review of relational literature and continuous dialogue with the Taos Institute<sup>2</sup> practitioners. Co-action is grounded on a different concept of knowledge. Gergen (2009) refers to knowledge as tradition for very specific reasons. Social constructionists view all knowledge as arising from communities of understanding. Even the scientific method produces knowledge which carries the interests, values

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<sup>2</sup> The Institute brings together scholars and practitioners concerned with the social processes essential for the construction of reason, knowledge, and human value, and their application in relational, collaborative and appreciative practices around the world.

and concerns of that community. The term tradition implies openness and multiplicity without hierarchies. When conceptualised as tradition, knowledge becomes more complex, but also more inclusive and inviting. There is a difference in saying: “Rigorous research evidence clearly identified xyz as the best intervention” and “The behavioural research recommends xyz”. The latter is much more open to other possibilities for interventions and therefore for dialogue. From this position, dialogue is valued above judgement. Arriving at alternative narratives will extend this argument later in the narrative theory section of the methodology chapter.

Consequently, curiosity about other possibilities is valued above knowing. Another characteristic of knowledge conceptualised as tradition is communality. Knowledge is no longer situated in the individual mind, but dialogically co-ordinated. Therefore, what one brings to the table, although important, is less significant to what the team as a group can co-construct.

When knowledge is co-constructed between professionals curious about what brings them together rather than what sets them apart (i.e. professional boundaries), a professional understanding replaces the need for agreement. When teamwork is grounded in understanding, rather than agreement, strategies begin to emerge and possibilities begin to open. This may add other possibilities to the predetermined goals and extend step by step interventions in previously unnoticed directions.

### **3.7. Concluding Comments**

In summary, Figure 3.5 outlines a way in which relational ideas (Gergen, 2009) may differ from mainstream practices of collaboration. As a practitioner in human services I have attended many HCN meetings and have seen these ideas play out in practice. I became interested in what might the perspective of experienced HCN practitioners uncover about the orientation in their practice. I wondered how much of their practice is relationally oriented given the accountability pressures they face as a highly funded government service. Would the practices they value be more individual action or more co-action attentive? What kind of understanding is important to them? Do emerging collaborative strategies and possibilities take priority over individual plans and individual goals? Would entering a dialogue about co-action make a difference in the way they practice? This study is interested in exploring these ideas with practitioners with the aim of jointly exploring new



possibilities in practice. With this in mind, next I outline the specific research questions and briefly introduce the research steps, leading up to a detailed discussion on the research method employed.

These questions are all concerned with ways of approaching the importance of and the effects of relationships in interprofessional collaboration. Particularly exciting for me, as a practitioner, is the prospect of entering the dialogue about highly complex day-to-day practice with experienced practitioners.

I have argued that although relationships are considered important in the current literature, relational processes are often taken for granted and implicit. They are difficult to account for in a data driven, evidence-based context and consequently not well represented in the current research and practice models. In order to re-author and engage with the concept of relationship, social constructionists challenge the idea of an individual, separated self and are more interested in exploring relational dialogic processes situated between people, rather than in the mind.

The literature review chapter offered evidence of a growing interest in the pragmatic value of exploring the relational process as situated in the spaces between. All the authors quoted in the introduction and literature review chapters explore identity, human development, practice and research as co-action. They all recognise the potential of focusing on co-action, leading up to the following two research questions.

The two research questions that framed this study were:

1. In what ways is relational practice already present in effective HCN interprofessional collaboration?
2. How can relational orientation support collaboration in HCN practice?

To answer the first research question, I had two one-hour conversations with each practitioner<sup>3</sup> structured around the basic principles of narrative theory (White, 1998; White & Epston, 1990) and grounded in relational process (Gergen, 2009). Stage one (the first conversation) addressed the first research question and generated a collection of successful collaboration stories most valued by the practitioners. Before the second stage, the practitioners had a brief introduction to relational orientation in

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<sup>3</sup> It is important to clarify that young people and their families are significantly involved in all HCN teamwork. However, for the reasons described in the methodology chapter, they were not included in this study.

collaborative practice. In stage two (the second conversation), these stories provided rich grounds for narrative conversations which facilitated practitioners' engagement with relational potential they value in their practice.

By introducing the practitioners to specific aspects of Gergen's (2009) relational orientation, this study aimed to provide an example of how researchers and practitioners can bring research and practice closer together in a joint exploration (Larsen & Willert, 2018). In particular, this study explored how the exploration of relational orientation can enrich HCN collaborative practices.

The second research question involved inviting HCN practitioners to reflect on the usefulness of relational positioning in their professional practice. Their evaluation of the ways relational perspectives can open up new ways of working was highlighted in principle-based collaborative maps. Principle-based HCN collaborative maps (Madsen, 2016) were chosen as a way to capture the local, generative, co-constructive and future-oriented perspective (Bodiford & Camargo-Borges, 2014). These maps could be useful to continually support the ongoing relational orientation in HCN, and potentially other groups' interprofessional collaborative practice.

## **Chapter 4.**

### **Relationally Sustained Narrative Methodology**

We replace the captivating gaze on the world as it is with value-based explorations into what it could be. (Gergen, 2015b, p. 287)

#### **4.1. Chapter Introduction**

In keeping with the conceptual framework outlined in Chapter 2 and illustrated in Figure 2.2, and the literature discussed in the previous chapter, the methodology that best fits this study will be found outside the methods normally associated with objective, independent, generalizable facts. With roots in ontological neutrality and primacy of language, relational constructionists argue for a shift in focus towards the process of socially co-constructed worlds. Relational constructionism's concern with relational process is expressed in this chapter with the specific attention given to the relationship between research and practice and researcher and practitioner.

Earlier chapters have painted a broader theoretical context providing the rationale for this study. Here I aim to bring this conceptual understanding into the context of doing research. I start this chapter with its links to the conceptual framework. Next, I outline the process of engaging the participants with attention to specific ethical considerations. This chapter consists of two main sections, methodology and method. The methodology section in essence provides the 'why' of the methodological tools selected for the study. It starts with providing an overview of the field of narrative methodology. Next, I outline how dramatic changes in the field of methodology gave rise to White and Epston's (1990) narrative theory and therapy. I complete the methodology section by outlining the rationale for combining White and Epston's narrative theory with relational positioning in this research.

The method section is concerned with 'how' this research was carried out and depicts specific methodological tools (Gergen, 2016; McNamee, 2014). Social constructionism, within which relational constructionism sits, offers a profusion of

choice of methodological tools. The focus on constructing social worlds through dialogue makes relational constructionism inherently narrative. In the sections that follow, I provide a more detailed account of how relational research orientation has been used as the method for this study and discuss how the specific practices of narrative therapy (White & Epston, 1990) provided guidance for the conversational process.

## **4.2. Links to Conceptual Framework**

As outlined in the conceptual framework chapter, relational research with its ontological neutrality is first and foremost a philosophical stance from which methodological tools arise (McNamee, 2014). Relational research is a distinct philosophy that aims to demonstrate a distinct shift in the worldview. This shift was introduced in earlier chapters as grounded in a constitutive view of language, ontological neutrality and achieved in relational process.

Although the basic orienting positions and concerns were addressed in the conceptual framework chapter, here I look at their relevance for the dialogue which integrates research, theory and practice as inextricably linked. Because of the importance of dialogue for relational constructionists, this chapter is concerned with supporting the dialogue between research and practice and, by extension, the researcher and practitioners in this study.

Relational perspective is concerned with how research can generate and nurture new ways of relating to each other. It recognises that we are relational beings; we make sense of the world and develop meaning through co-action in relationships with others (Gergen, 2015a, 2015b; Gergen et al., 2015). It could be summarised that social constructionism argues for doing research collaboratively, with joint accountability to and with practitioners, and with the aim of achieving a mutual understanding as the basis of going on together. Co-construction of knowledge in this way offers means to connect research with participants' daily practice (Bodiford & Camargo-Borges, 2014).

With his notion of reflective pragmatism, Gergen (2015b) suggests that both practice and research need to be grounded in their social validity and utility. In other words, he suggests we try ideas out as actions in social space first. Gergen proposes that social sciences can derive their success from their contribution to people's everyday

lives. Relational theory should ultimately gain its meaning from our ways of going on together or, in the context of the current study, the way collaboration is practiced. He suggests that we “undertake research as a form of social action, with the words following after” (Gergen, 2015b, p. 307).

One way to explore this is through giving attention and space for action to practitioners. Gergen’s suggestion aligns well with the proposals presented earlier from the complexity and collaboration literature to focus on practitioners’ daily solutions (Greenhalgh & Papoutsi, 2018; Schot et al., 2020; Sharp, 2018). In this way, practitioners become knowledge producers.

To support dialogue, relational theory suggests that the conception of knowledge needs to expand to include practice-based evidence (Camargo-Borges, 2019; Lund & Winslade, 2018; Sharp, 2020). Additionally, the ontological and epistemological positions need to be transparent in research and practice to support understanding. It is paramount to note that being transparent about how practice or research are conceptualised is not serving the purpose of identifying the most appropriate or the best way to do so. On the contrary, this is needed as a precondition for allowing curiosity about different conceptions to be the driving force behind dialogue.

The focus in the current study was the process of exploring the possibilities relational ideas can open in the context of HCN collaborative practice. Positioning researcher and practitioner knowledge as equally valuable in the process was the first precondition of the dialogue. In this way research design can offer ways of bridging research and practice (Bodiford & Camargo-Borges, 2014). In one example, Larsen and Willert (2018) were interested in how managers and researchers can jointly participate in collaborative dialogue to support practice related to organisational meaning making. In a joint exploration, managers and the researcher found that the “meaning people co-construct in their everyday unique interactions constitutes how organisational life unfolds and what people view as true and meaningful” (Larsen & Willert, 2017, p. 248). The dialogue between the researcher and managers generated new knowledge and, in the process, afforded validity to day-to-day practice.

Before I start describing the methodology in more detail, it will be useful for the reader to be introduced to the participants in the study. I will do this by describing the recruitment process and addressing ethical considerations. Next, I turn to narrative methodology in general before I look at Michael White and David Epston’s

work on narrative therapy for guidance on method structure and addressing the dialogue between research and practice.

Designing research offers ways of 'being' in research that brings a sense of attentiveness, relationality and connection to research that are useful and productive as a daily practice. (Bodiford & Camargo-Borges, 2014, p. 4)

### **4.3. Recruitment of Practitioners**

Due to its focus on interprofessional collaboration, only professionals participated in this study. As discussed in the introduction chapter, the practitioners providing HCN service came from the Intersectoral unit of the New Zealand Government. They coordinate an additional service to children with the highest level of need in the country.

The first steps in the recruitment process included sharing an information sheet and a consent form (Appendices 1 and 2) with the HCN national manager. The information sheet detailed the process and briefly described relational theory as a new approach explored in the study. Following that, the manager invited me to meet with her. Following the meeting we exchanged email correspondence (Appendix 2). In addition to ascertaining permission to approach HCN practitioners, this communication intended to present the study as aiming to genuinely engage the practitioners and represent their perspective on collaborative practice. The manager confirmed her support for the study by returning a signed consent form. She also expressed an interest in the study's potential for HCN practice, offered her support in communicating with all HCN practitioners, and provided access to HCN collaboration surveys.

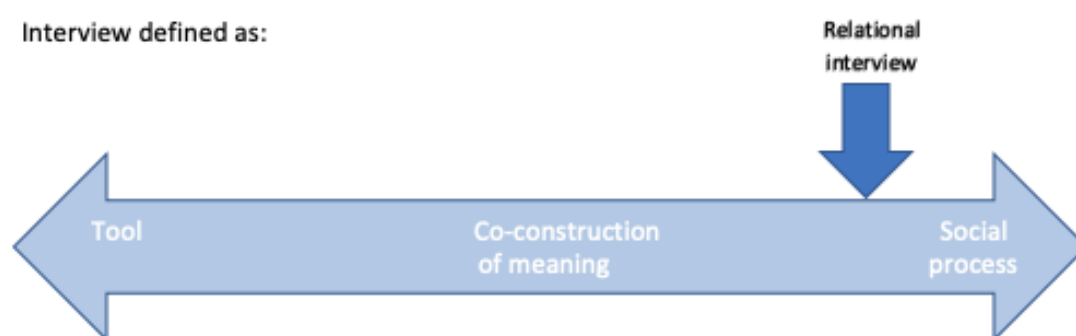
Next, the HCN manager distributed the participant information sheets (Appendix 3) by email to all 10 practitioners. The information sheet placed the study in the context of interprofessional collaboration and Gergen's (2009) relational theory, explained the participation process, and invited the practitioners to opt into voluntary and confidential participation. Five practitioners responded and they all signed the consent forms consenting to their participation.

The information sheets explained that all practitioners were invited to take part in three one-hour conversations. The main data collection methods in this study were

individual interviews conceptualised as conversations. In the current methodological diversity, qualitative interviews are valued for the richness of material they generate and are widely used in a variety of ways (Gaudet & Robert, 2018). Figure 4.6 shows Gaudet and Robert's (2018) typology which divides all interviews based on where on the scale they sit between being (a) a systematic, controlled tool for collecting data; (b) a communication process with two individuals constructing meaning; and (c) a conversation as a social process with the researcher abandoning the idea of being in control.

The interview method used in this study is concerned with co-construction of meaning, which should place it at the middle, constructivist position on the Gaudet and Robert scale (2018). However, within the relational conceptual framework meaning making is relational, that is, a social rather than cognitive process. Therefore, the type of interview used in this study belongs much closer to the social process point on the Gaudet and Robert (2018) scale. This is illustrated in Figure 4.6. For that reason, I refer to individual interviews as conversations. Another reason the term conversation was a good way to describe the type of interview used here is related to the use of White and Epston's (1990) narrative theory to structure the method employed in this study. Narrative theory is centred on a specific conversational language making. This will further explain later in this chapter.

**Figure 4.6.** Interview definitions



Each practitioner had two one-hour conversations with me and they all received a narrative letter after each conversation which summarised their contributions and also contained further questions. The questions intended to support further engagement with the ideas discussed in the previous conversations. The number of one to one conversation was reduced from three to two to better manage practitioners' time. An additional time for reflection on the last letter and evaluation

questions required at least additional two hours of their time, bringing the total minimum contact time to 4 hours for each practitioner, or a total of 20 hours of collective research participation by HCN practitioners to answer Research Question 1. It is difficult to estimate the time spent on Research Question 2 due to the uncontrolled nature of practitioner engagement, as will be explained later in this chapter.

Each narrative conversation was planned to take place no more than four weeks apart. This time frame reflects my intent to have a tight process structure in order to require as little of practitioners' time as possible. However, the reality of time management meant that the interviews were four months apart.

The method of data collection took the form of videoconference (Zoom) conversations. The use of videoconferencing technology as a mode of conducting interviews for qualitative research data collection has been validated in research. The research evidence suggests videoconferencing is time effective, flexible, financially viable and generally valuable (Deakin & Wakefield, 2013; Sullivan, 2012; Weller, 2015). Deakin and Wakefield (2013) also found that rapport can be established just as well as in face-to-face interviews.

The consensus on the appropriate number of participants in qualitative research is not easy to find in the literature. There is an agreement, however, on the differences between qualitative and quantitative research on how numbers are considered. Qualitative research requires less participants because it is concerned with subjective understanding of how and why people interact in specific cultural and social contexts. Numbers are more important in quantitative research which seeks to understand correlations and predict or influence what people do (Baker et al., 2012). Bryman (2012) identifies a number of factors to consider when deciding the number of participants. The factors that most related to this study were saturation of data, theoretical underpinnings, and the breadth and scope of research questions.

The relational research methodology involves a fine-grained analysis. The two one-hour conversations to answer the first research question, plus a minimum of two-hour reflection time for evaluations with five practitioners, generated a large pool of relevant information. Furthermore, the point where no further insight was likely to be achieved was reached with the second letter which clarified and summarised two conversations. At that point the practitioners were invited to ask or comment on the second letter to ensure that their views were well presented. Lastly, the focus of this



study is specifically on HCN practitioner perspective on relational direction in their practice, dictating a fairly narrow breadth and scope of the research questions in this study. For those reasons, having five practitioners in this study was considered appropriate (Baker et al., 2012). More specific ethical considerations are addressed next.

#### **4.3.1. Ethical considerations**

The intent of the Massey University Code of Ethics (2017) is to provide protection for all participants in research as well as to protect researchers and institutions. The Code is an expression of the basic human rights of respect for persons, autonomy, privacy and justice. This research aligns with the first criterion of the Code of Ethics where all research involves either the participation of humans or where the research impacts on individuals, groups or communities. An application was submitted to the Massey University Human Ethics and approval granted (Ethics Notification - SOA 16/58) in November 2016 (Appendix 4).

The principle concerning respect for persons was upheld by ensuring that all prospective practitioners had sufficient information to make an informed decision on whether or not they wished to participate in this research. This was achieved by developing an information sheet (Appendix 3) for prospective practitioners with sufficient information about the research and their role.

Although no practitioner identified as Māori, choosing a culturally appropriate theoretical framework and methodology was important for a number of reasons. Firstly, every New Zealander has an ethical obligation to uphold the principles of Te Tiriti o Waitangi (Treaty of Waitangi). Furthermore, many immigrants feel drawn to Te Ao Māori emphasis on mutuality (Holley-Boen, 2018). Therefore, careful consideration was placed on adopting a methodology that upheld Te Tiriti obligations, in respect for Māori views on research (Bishop, 1996, 1997) and Te Ao Māori (Pihama, 2012). This was specifically related to well-recognised critical power issues related to research benefits, representation and accountability (Bishop, 1996). Cultural supervision and advice were sought through the Ministry of Education's cultural supervision network.

Various sections of the thesis detail the ways in which the theoretical framework and methodology acknowledge and proactively uphold the principles of Te Tiriti. It has been recognised that social constructionist and narrative approaches both uphold the manaakitanga of participants and are consistent with the principle of

whakawhanaungatanga (Bishop, 1997; A. H. Macfarlane et al., 2015). Social constructionist and relational approaches are grounded in dialogic relations which imply power sharing, shared responsibility and accountability (Bishop, 2003; A. H. Macfarlane et al., 2015).

The information sheet further stated practitioners' right to withdraw from participation, refuse to answer any question, and to review the recordings and a summary of the information collected at the end of the study (Appendix 3). The practitioners were given an opportunity to agree to the way information was presented by approving a summary shared with them. Informed and voluntary consent was ensured by developing information sheets for all potential participants and a separate information sheet for the manager to gain their approval for the study.

When approaching the practitioners, my main concern was around how best to support engagement to open space for dialogue. So, when introducing myself and the research at the beginning of first conversations, I made the following points. Firstly, I reassured the practitioners that their practice was not going to be evaluated so that they could feel safe from being judged. I achieved that by explaining that relational research is interested in joint exploration of practice rather than proving or disproving ways of working. Next, I made the point that centrality of dialogue in relational research makes them co-researchers. In relational research practitioners are the explorers rather than just providers of information. Lastly, addressing the ethical considerations further intended to reassure the practitioners of their rights and present the research process in a transparent and engaging way.

The practitioners were given permission by their manager to participate during work time. While I appreciated this support, I was aware that this also placed additional strain on their already high work demands. I was very conscious of this additional demand and used every opportunity in emails, letters and conversations, to express my gratitude and show respect for their time. It is fair to say that respect was evident in both directions. Practitioners never missed a Zoom appointment and all the conversations were vibrant, engaging and could have lasted longer than the hour allocated to them.

The assumption underpinning the narrative approach adopted in this study is that every person possesses the solutions to problems in their own unique ways. This makes narrative conversations strength-based with the conversations centred on

exploring solutions rather than problems. Therefore, the risk of emotional distress is expected to be minimal.

To address the concern related to minimisation of harm to participants, researchers, institutions and groups, the following steps were undertaken. Firstly, permission was sought and given by the HCN national manager for the HCN service to be identified in the research report. The HCN service is a highly valued and respected community resource. In all my communications during the research process and in the thesis writing, it was paramount to uphold and respect their standing in the community.

Although the focus of this project was on positive experiences, obstacles to collaboration could also have been identified. From the narrative approach perspective, when obstacles to collaboration are identified, finding solutions does not involve analysing past negative experiences. It was very unlikely, but still possible, that some negative experiences with potential for emotional distress would be brought up by practitioners in the conversations.

The HCN practitioners are experienced professionals who are used to having supervision discussions and used to problem solving obstacles they encounter in practice. That is an important part of every professional's role. Unexpected distress situations would have been addressed by advising the participant to seek support from her/his supervisor, Employee Assistance Programme and/or manager depending on the issue.

Open lines of communication between management structure, practitioners and researcher/supervisors were established by providing email addresses and inviting all practitioners to ask any questions and seek clarification to any concerns they might have. Updates were emailed to the national manager on the research progress while maintaining confidentiality. Each update specified the current stage and the next planned steps in the research process.

Respect for privacy and confidentiality is a critical consideration in any research. This is even more so when methodological tools are aiming for meaningful engagement and dialogue. Therefore, transparency about the ways in which privacy and confidentiality were addressed was important. The information sheet (Appendix 3) specified that "All information, video conference calls and your feedback, will be treated as highly confidential and will be kept in a password protected computer in my home. No identifying information will be recorded post the Consent Form

procedure, unless you choose otherwise. [...] all data will be safely destroyed by my supervisors after five years” (Appendix 3).

To avoid conflict of interest, only practitioners outside the region I work in were invited to participate. I endeavoured to be transparent about my role as an involved researcher. Because the consent procedure involved management, the information sheet clarified that participation was voluntary and non-participation would not affect employees in any way.

Formulation and publication of results is a significant consideration and I was transparent that the research summary would be shared with the practitioners in an appropriate form and that they were informed regarding the dissemination of outcomes. Participating in relational research required a higher level of engagement. Consequently, it was reasonable to provide HCN practitioners with a higher level of input at this level of the process. This is outlined in the following chapters.

#### **4.3.2. Timetable**

Table 4.4 depicts the key points in the research process and the time span required to complete them. The recruitment process started in January 2017. The preparations for Zoom meetings took five months. To answer Research Question 1, narrative conversations were conducted between June 2017 and November 2018. In this time, I met with each practitioner in a Zoom meeting twice and I sent each practitioner two narrative letters intended to summarise our conversations and continue the dialogue. To address Research Question 2, a group meeting was held, practitioners provided evaluation feedback, and a joint presentation of the study was delivered in February 2020 at the Educational Psychologist Forum in Palmerston North.

**Table 4.4.** Timetable

Main points		Preparations	January 2017
Research question 1		Information sheets	March 2017
		Consents	April 2017
	Conversation 1		June, July 2017
		Letter 1	July, August 2017
		Email correspondence	Rest of 2017
	Conversation 2		April, May 2018
		Letter 2	November 2018
		Email correspondence	2019
Research question 2	Group meeting		January 2020
		Practitioner feedback	January 2020

		Forum presentation	February 2020
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Having introduced the research process, in the next section I locate White and Epston's (1990) narrative theory within the wider narrative methodology field. In the section that follows, I position it more specifically as relationally sustained.

#### **4.4. Narrative Methodology**

It is commonly accepted that we live our life in stories. Storytelling is humanity's first significant technology for recording vital cultural information (Gottschall, 2012). Neuroscientists have noted that the human brain processes stories very differently to the way other types of information are processed. When we are engrossed in a story we are able to pay much more attention, focus better and remember more information than in any other human activity (Gottschall, 2012). However, according to neuroscience, stories also place the human brain in a state of high suggestibility (Phillips, 2015). It isn't surprising then that Gergen reminds us that "Once the story has been shared, what we do next is a sensitive move" (Gergen & Gergen, 2017, 2018). Furthermore, it has been suggested that we evolved to enjoy stories because they gave us a significant evolutionary advantage (Harari, 2015, 2016). Whatever explanation we prefer, it is hard to imagine human society without stories. Stories communicate messages, meaning, values, belonging as much today as they did throughout human evolution. These are just some of the reasons behind the widespread use of narrative methodology.

Part of the appeal of narrative methodology is in the diversity of methods available to researchers. That same diversity, however, makes the field difficult to navigate. Scholars have created a number of typologies based on different methods, applications and views on narrative (Elliott, 2005; Franzosi, 2010). For that reason, Robert and Shenhav (2014) set out to develop a map that can help organise the large variations associated with the use of the terms 'narrative' and 'narrative analysis'. They also noticed a need for a categorisation of narrative studies to transcend disciplinary boundaries because narrative analysis is used across disciplines. Therefore, their typology is based on the fundamental assumptions underlying all narrative studies that self-report using narrative methodology and on the key elements present in all of these studies.

Robert and Shenhav's typology (2014) divides all narrative studies based on how they answer the following two questions. The first question pertains to the status attributed to narrative. The question of the status attributed to narrative is concerned with the relationship between narrative and reality. They ask: "Is narrative the very fabric of human existence or a representational device among others?" (p. 2). Answering this question requires addressing ontological and epistemological concerns which have been addressed in the earlier chapters. Specifically, this question is related to the view of language as either constitutive or representational of social lives.

The second question is concerned with the perspective on narrative. Here Robert and Shenhav (2014) question whether narrative is mainly a quality of an approach, an object of investigation or both? This question points out the difference between narrative as a researcher's point of view and narrative as a property of the object of study.

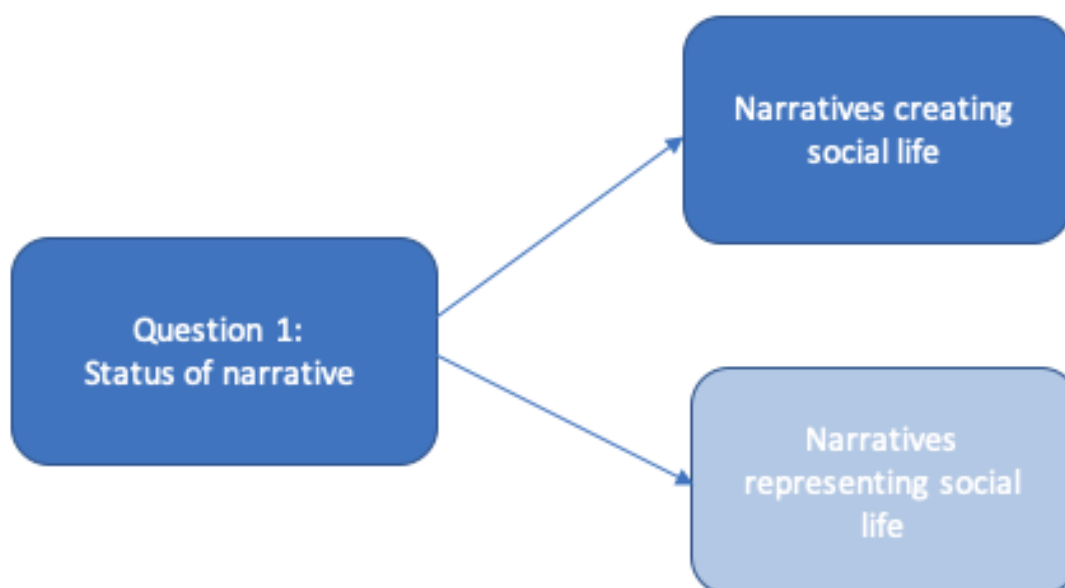
#### **4.4.1. Status of narrative**

Is narrative a representational device among others or the very fabric of human existence?

Narrative as a representational device assumes a separation between narratives and what they represent: reality. In this case, narrative becomes a tool to access reality or a bridge to reality. The design of the methodological tools used in this process depends on the theory of representation adopted. Some representational theories conceive narratives as a pathway to understanding reality, or as a deforming mirror of real-life events. Others, however, are interested in interpreting the truth of the narrative rather than comparing it to the truth 'out there'.

Conceptualising narrative as a bridge to reality requires considerable effort from the researcher on triangulating and verifying the data to 'get to' the reality behind the narrative. Typically for this category, the researcher has the last word.

**Figure 4.7.** Status of narrative in self-identified narrative studies  
(Robert & Shenhav, 2014, p. 4)<sup>4</sup>



The social constructionist orientation attributes constitutive status to narratives in the current study. As discussed earlier, social constructionists contend that language is constitutive, not representative of reality. It follows that narratives bring our realities into being. In that sense, they are the very fabric of our existence. In Gergen's (2009) words: "Whenever we talk we contribute to a relational process from which the sense of the real and the good are derived" (p. 60). However, not everyone agrees. A philosopher, Sartwell (2006), finds this belief ethnocentric. He points out that most daily experience is not expressed in words. For example, we hear, smell, feel. Therefore, he contends that these other expressive acts, situated outside narrative expressions, also need to be analysed to fully understand human experience (Sartwell, 2006).

From a relational perspective, all expressive acts, e.g. what we agree to call feelings, are negotiated and constructed in relationship (Gergen, 2009). In this study, practitioners' narratives are considered formative of human reality and human action. They are not devices practitioners use to communicate their ideas to the

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researcher, who will then analyse, make sense of and compare them to reality out there.

In this study, the researcher has the role to provide the context supportive of generating new possibilities in practice. We used relational constructionists' and narrative tools to mine the transformative power of practitioners' narratives. The goal was not to discover or get to understand them better, but to generate new valued narratives and practices. In Figures 4.7 and 4.8, darker coloured spaces mark the positions taken up in the current study. Thus, in terms of status, narratives are considered to create, not just represent social lives in this study.

#### **4.4.2. *Perspective on narrative***

Is narrative mostly the quality of an approach or an object of investigation?

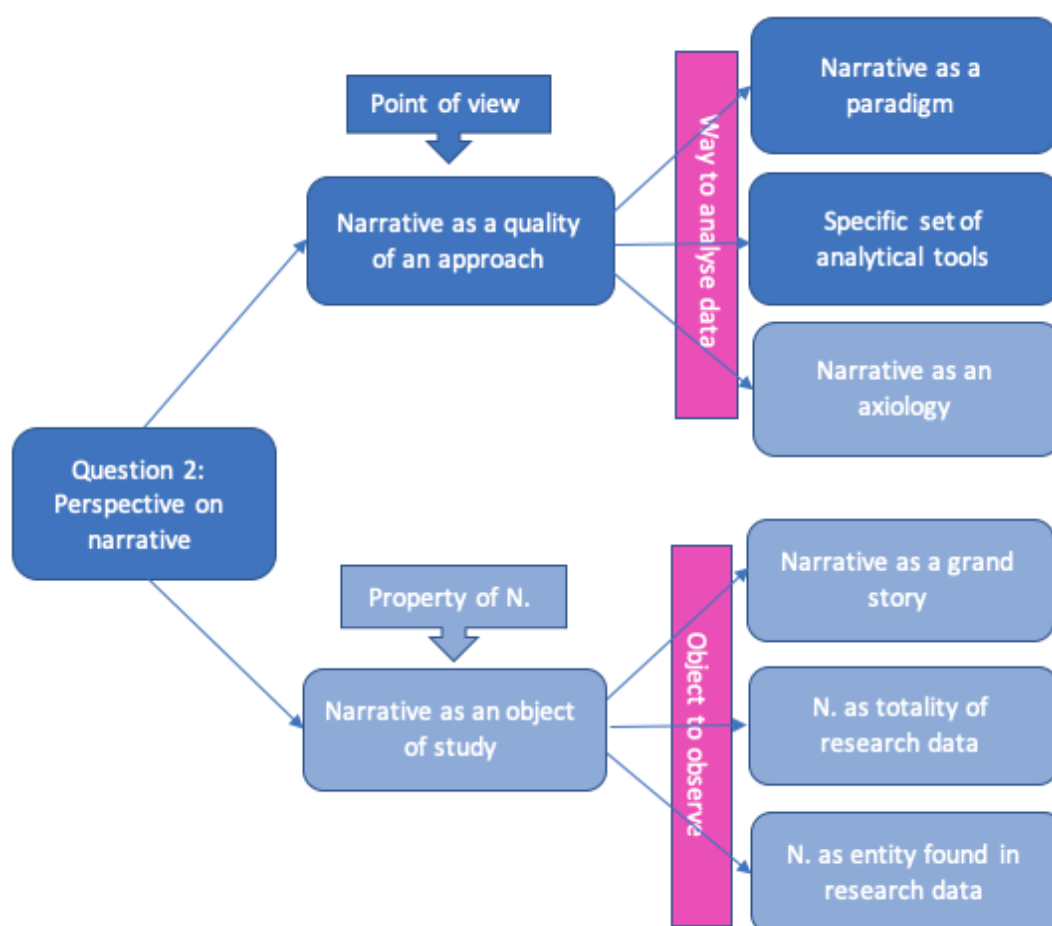
This question is concerned with whether narrative is primarily the researcher's point of view or primarily a property of the material examined, that is, an object of study. Just like in the case of the status attributed to narrative, most studies answer this question in terms of degree. However, Robert and Shenhav (2014) stress the importance of knowing whether a methodological tool is designed by the method of study or by the content or object of study. This helps understand the boundaries of the tool and has implications for the validity of research outcomes. To ensure valid research conclusions, researchers need to understand the boundaries of the method and object of study (Robert & Shenhav, 2014).

What constitutes narrative as an object of study varies widely. Some studies define it as a major narrative or grand story. Said (1994) often mentions 'diaspora narrative' when referring to Palestinians around the world. Other studies define narrative as a synonym for data under scrutiny. Any data presented in words could be called narrative. For example, any interview with Ann could be called Ann's narrative, although many disagree with the use of the term narrative in this way. Robert and Shenhav (2014) also found that some studies use semi- or non-directive interviews to provide context for participants to express their experiences in uninterrupted manner and define it as narrative interview. They contend that this alone does not make a study narrative because of the loss of any specificity. They propose that this unspecified use of the term is the cause of much of the confusion in the field. The last group of studies and most widely used are those that define narrative as an entity within the data showing structural characteristics (Robert & Shenhav, 2014).



Based on Robert and Shenhav's (2014) taxonomy, the current study relies on narrative as an approach, an adopted perspective, a philosophical stance, as opposed to an object of study. To avoid the objectification of people and the topic of study, this study adopted narrative as a specific ontological and epistemological position with the attention on the co-construction of reality. In conventional, positivist research the researchers' voices dominate. Among other reasons, narrative research methodology has been chosen for this study because of the extent to which it respects participants' knowledge (Gergen, 2015b). However, Robert and Shenhav (2014) contend that this type of narrative study may lack specificity and structure. Therefore, this study employed White and Epston's (1990) narrative theory for specificity and structure.

**Figure 4.8.** Perspectives on narrative in self-identified narrative studies  
(Robert & Shenhav, 2014, p. 7)<sup>5</sup>



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Based on the information presented here, if narrative is defined as mainly an approach or point of view, the main question to answer is: What are the distinguishing features of this approach? This is a particularly difficult question to answer if narrative is defined as a paradigm, as is the case in this study. The social constructionist theoretical perspective this study is nested in, steered the development of methodology towards a narrative conceptual paradigm. However, that alone may leave the methodology unspecified (Franzosi, 2010; Gaudet & Robert, 2018; Robert & Shenhav, 2014).

Narrative analysis is a research tool that is growing in popularity and increasingly becoming a dynamic and rich field. Consequently, a growing number of researchers choose to explore the way we story our lives to gain an insight into human meaning-making and human action (Gergen, 2001; Hosking, 1999, 2011; Robert & Shenhav, 2014). In an example relevant from the relational perspective, “in narrative analysis meaning is relational, it is not a property of an event or character. Therefore, in narrative terms, the material under study here needs to be considered in its entirety. A part is only meaningful in relation to the other parts of the story” (Gaudet & Robert, 2018, p. 86). From the point of view of this study, fragmenting the material, through detailed coding, for example, would restrict the analysis.

The narrative methodology literature further explains that “the specificity of narrative analysis for those who associate it with tools and concepts borrowed from literary studies (e.g. stories, plots, events, character, points of view) is easier to assert. Indeed, in this case, narrative analysis really adds a new option beyond the widespread analytical traditions in the social sciences” (Robert & Shenhav, 2014, p. 10). For that reason, in this study White and Epston’s (1990) narrative theory, grounded in text analogy, was utilised as a methodological tool. The text analogy affords White and Epston’s narrative theory the structure and specificity recommended by Robert and Shenhav (2014). Next, I explain this in more detail.

#### ***4.4.3. Roots of White and Epston’s narrative methodology***

White and Epston’s (1990) narrative theory provides a framework for making sense of our life experiences and offers ways to move beyond problem saturated life stories. New Zealand literature has recognised the potential of narrative theory for enriching the practice of educational psychology (Annan et al., 2006) and education in general (Bishop et al., 2011; Kecskemeti, 2011; McMenamin, 2014). This simple but profound way of interpreting our life experiences can be applied to every aspect of our lives, including how we collaborate.

White and Epston's narrative therapy was introduced in the first chapter as a tool for implementing social constructionist and postmodern ideas in practice (Freeman et al., 1997; Morgan, 2000; White, 1998; White & Epston, 1990). The literature reviewed so far in the methodology chapter suggests that the structure and specificity of text analogy characteristic of White and Epston's narrative therapy would make it a promising methodological tool. Next, I elaborate on other reasons for adapting a therapeutic approach as a methodology in this study. Specifically, I pay attention to where ideas have originated and trace their development in practice to highlight their connections with and relevance to research.

The link between White and Epston's narrative theory and research can be traced to its beginnings, which are associated with the dramatic development of cultural anthropology in the 1970s and 1980s (Denborough, 2001; Dulwich Centre, 2004; Epston, 2001). At the time, Kuhn's (1970) ideas, as mentioned in the theoretical framework chapter, set the stage for questioning the possibility of an objective perspective in research. Kuhn was among the first to demonstrate how researchers influence and shape what they research. This new thinking about research gave rise to ethno-methodology and cultural anthropology. They invited people to interpret their own lives and make research accountable to participants and their local communities (Dulwich Centre, 2004). It is on this background that narrative therapy and theory developed.

David Epston was one of the anthropologists inspired by the possibilities of conceptualising research in this way. Epston (2001) explains:

I have always thought of myself as doing research, but on problems and the relationships that people have with problems, rather than on the people themselves. The structuring of narrative questions and interviews allowed me and others to co-research problems and the alternative knowledges that are developed to address them. (p. 178)

This very point of shifting the focus from people (with problems) to the relationship people have with problems is the very essence of narrative therapy. This externalising of problems also marks a shift to relational process. Epston's (2001) quote explains how narrative theory is relational and also inherently a research method. The realisation of what cultural ethnography offered to the family therapy context occurred to Epston while working in an Auckland hospital with children with life threatening illnesses. Epston noticed that children often possess valuable

solutions to their suffering. He noticed that those solutions were ignored by everyone, including the children themselves, because of the commonly accepted expectation that solutions can only come from experts. The commonly accepted practice of family therapy of that time meant resorting to expert perspectives. In those practices, Epston recognised the risk of family blaming and further ignoring the voices that were already 'rigorously excluded' and ignored by all.

Epston (1999) wrote:

I decided to take ethnography as my means of operating. Rather than thinking of myself as possessing some 'expert knowledges' that I might apply to those who were consulting me, I made seeking out fellow-feeling as my primary concern. (p. 141)

The two questions Epston (cited in Denborough, 2004, p.31) asked himself were very relevant to this study:

1. How could I request people in peril to stop seeking rescue but rather turn to themselves and each other?
2. How could we all take up different relationships with each other and the problem?

It is important to note that in asking these questions, Epston was in no way undermining the role of medical expertise. He saw the potential in the normally ignored knowledges that could be valuable over and above the expert knowledge. The same logic can be applied to the practice of interprofessional collaboration. My own experience suggests that practitioners tend to turn to their management structure, practice rule books and research to solve relational problems, rather than looking for the resources in their own experiences.

The second question invites researchers and participants to be equally engaged in the process and become co-authors of new narratives. The current study is attempting to achieve this by inviting practitioners experienced in collaboration to explore their experiences and knowledge as the driving force for change useful in their practice. This approach urges professions in human services, such as the participants in this study, to reconsider the theoretical and especially meta-theoretical basis of their practice (Lunt & Majors, 2000; J. Moore, 2005).

In the method section I specifically outline how narrative theory was used to guide my conversations with HCN practitioners. I start the method section by describing the process of moving from the ideas presented so far to considering their effect on doing research. Next I build on the ideas introduced in the conceptual framework on how narrative theory can be relationally situated. In that sense this study is shifting away from more cognitive, individualistic interpretations of narrative approaches. Finally, the research process unfolds from there.

## **4.5. Relationally Sustained Narrative Method**

### ***4.5.1. Introduction***

All professionals working in human services have conversations with children and adults with whom they work. Based on its grounding in the constitutive role of language, White and Epston's (1990) narrative theory suggests that whether we intend it or not, whether we are aware of it or not, those conversations shape our lives. They have the power to transform or perpetuate forms of life. Morgan (2000) explains how the language we use comes with taken-for-granted assumptions our life stories are based on. Those assumptions position us in our conversations in a way that either opens up new possibilities or restricts the number of options available (Morgan, 2000). When someone in a meeting says "He has ADHD, he cannot stay still", the team become participants in a story with clear boundaries beyond which the child is not expected to go. In an HCN team meeting, this positioning has a powerful implication on what can be discussed and what is ignored.

Narrative theory offers ways to become conscious of the impact this positioning has on us and the lives of people with whom we work. Exploring professional narratives can open ways to push the limits of what may and may not be spoken about and responded to in collaborative practice. In the current study, narrative theory provided a way to bring forth this type of positioning and explore the way practitioners talk about and act in their practice. My conversations with practitioners focused on expanding the limits of what is spoken about as valued practice. I achieved this focus by orienting the conversations with practitioners based on two principles of White and Epston's (1990) narrative theory, which I explain next.

#### **4.5.2. *White and Epston's narrative principles as a method***

As detailed in earlier chapters, one of the basic premises in this study is that some of the HCN practices most valued by practitioners are co-action based. However, because they sit outside the mandated, evidence-based practice models, they are not made visible and not explicitly explored and documented in practice. White and Epston's narrative theory is well recognised as a way of making already existing hidden solutions visible (Combs & Freedman, 2016; Morgan, 2000; White & Epston, 1990). Their ideas were used in this study as a tool for engaging HCN practitioners in explicitly exploring everyday practice solutions and highlighting effective relational orientation in their practice. This study achieved that by employing a principle-based narrative conversation method.

The two selected basic principles of narrative theory are related to how meaning is attributed to our lived experiences (Morgan, 2000; White & Epston, 1990) and illustrated in Figure 4.9. In a constructivist sense, narrative theory suggests that narratives we carry about our lives seem to be arranged in hierarchies with the power of opening up or limiting our potential (Freeman et al., 1997; Morgan, 2000; White & Epston, 1990). In the literature review chapter, Figure 3.5, Relational Orientation in Collaborative Practice, presented the differences between individual and co-action attentive collaboration. It could be argued that individual action-focused collaboration is an example of a dominant story preventing practitioners from seeing the full potential of co-action focus in their practice.

More specifically, to have knowledge of the world, people interpret their everyday experiences. The act of interpreting the world requires ascription of meaning to those lived experiences (White, 1998). White explains how this happens in two main ways. These two ways of interpreting day to day life experiences guided how I approached each conversation with practitioners. To reiterate, here I used the ideas sitting within a constructivist view of narrative theory. But, because it is principle-based, this method does not involve a structure in terms of pre-planned process or questions. This method required an in-depth understanding of narrative ideas and a curiosity about their application in collaborative practice.

Before detailing the principles, it is important to remind the reader of the decision to employ White and Epston's (1990) narrative theory in a way that highlights the shift from a cognitive and individualistic view of narrative to one that is more dialogic and relational. The shift in focus from individual action to co-action is achieved in this

study in a dialogic method that relationally grounds the narrative ideas. I pay more attention to this later in this chapter.

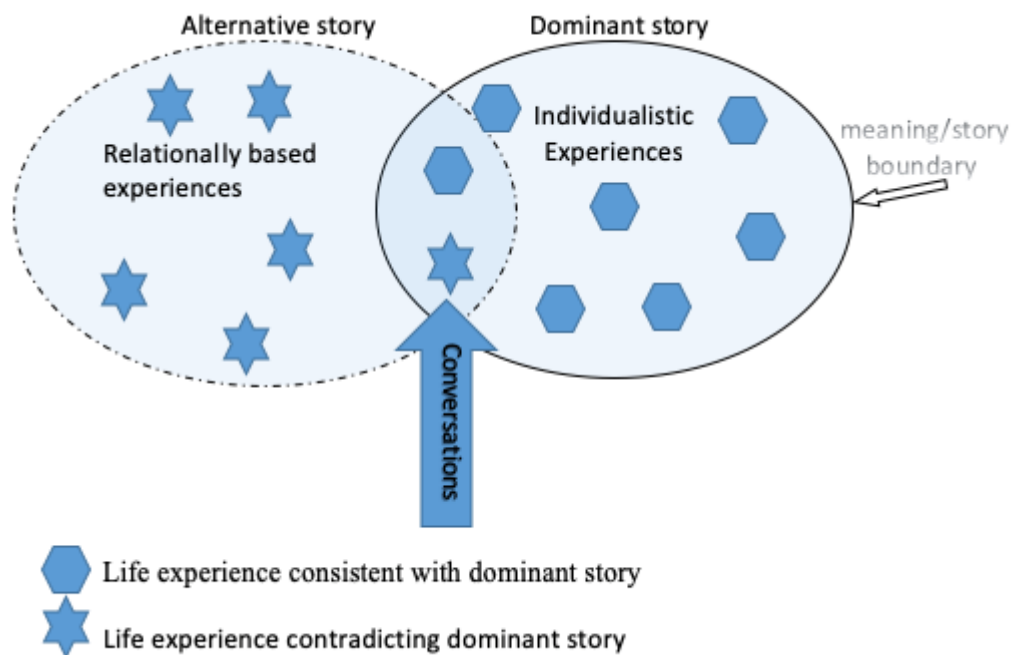
#### *4.5.2.1. Meaning making is shaped by the narratives we carry*

Firstly, White and Epston's narrative theory (Freeman et al., 1997; Morgan, 2000; White & Epston, 1990) suggests that the meaning that gets ascribed to practitioners' collaboration experiences is, to a large degree, determined by the stories practitioners already have about their practice (White, 1998). For example, if the narrative concerning my practice centres around the premise that 'achieving predetermined goals is more important than nurturing relationships', I would likely think of myself as a goal-oriented practitioner. My experiences confirming this premise would get connected into a story. Over time, I build a coherent practice story that provides a sense of meaning and purpose in life (Gergen & Gergen, 1984). The situations confirming the importance of clarity around setting goals and well-structured effective negotiations of goals, for example, will stand out in my memories.

#### *4.5.2.2. What we forget is shaped by the narratives*

Secondly, narrative theory suggests that our life stories also determine which life experiences get ascribed meaning and which do not. We are very selective with which of our experiences get ascribed meaning. Life experiences that contradict the plot of a dominant story are not likely to get ascribed any meaning (Morgan 2000; White, 1998) and those experiences we are likely to forget. In the previous practice example, I might have experienced situations where focusing on nurturing relationships rather than goal orientation contributed to the success of teamwork. However, the events that contradict the rich, dominant story are likely to be rendered insignificant and therefore forgotten. Over time we accumulate a pool of memories with experiences sitting outside our dominant life stories. Because those experiences do not belong to a coherent life story, we struggle to attach meaning to them. It is those forgotten aspects of practice that sit outside dominant stories that this study aimed to focus on through narrative conversations. This process of ascribing meaning or forgetting is illustrated in Figure 4.9.

**Figure 4.9.** Narrative conversations



To summarise, it can be argued that experienced practitioners, such as HCN practitioners, value relationships and hold a pool of relationally responsive successful collaboration experiences. But, because they work in an evidence-based model of practice with high accountability demands, those are not likely to belong to their dominant story of collaboration. This study argues that engaging in conversations to recognise and explore relationally responsive successful collaboration experiences will open a potential for an alternative, relationally oriented narrative.

This framework, illustrated in Figure 4.9, was my guide in approaching each conversation and constituted a component of the conversation method employed in this study. The next component, which is described in the following section, was concerned with how relationally oriented practices were recognised and engaged with in this study. In the next section I describe the method of engagement with HCN practitioners. Following that I delineate the steps taken in the process.

#### ***4.5.3. Identifying relational orientation in HCN practice***

I turned to Gergen's (2009) relational theory, introduced in the literature review chapter, for guidance on how to identify and engage with relationally oriented practices in my conversations with HCN practitioners. Co-action oriented



collaboration was summarised in the literature review chapter in the Relational Orientation diagram (Figure 3.5). This diagram captured how relational orientation can be recognised in the context of interprofessional collaboration. It indicated that when relational positions are adopted in collaborative practice, individual action gives way to co-action, individual meaning and knowledge give way to understanding, and individual plans and individual goals give way to emerging collaborative strategies and possibilities.

Comparing the two ways of working gave me the direction required to recognise relational orientation in HCN practice. Therefore, this diagram (Figure 3.5) supported the process of identifying relational orientation in HCN practice. The method section will describe how I shared the relational orientation diagram with HCN practitioners to invite them to actively engage in the process. This process of coming to a common understanding of relational orientation allowed the exploration of collaborative practice to become a shared process.

Gergen's (2009) concept of relational wellbeing adds an additional layer of relational awareness. Gergen suggests three contributors to sustaining relational wellbeing: (a) understanding: synchrony in action; (b) affirmation: the birth and restoration of collaboration; and (c) appreciative exploration. The indicators focus on the wellbeing of the process of coordinating joint action and the wellbeing of relationships rather than individuals.

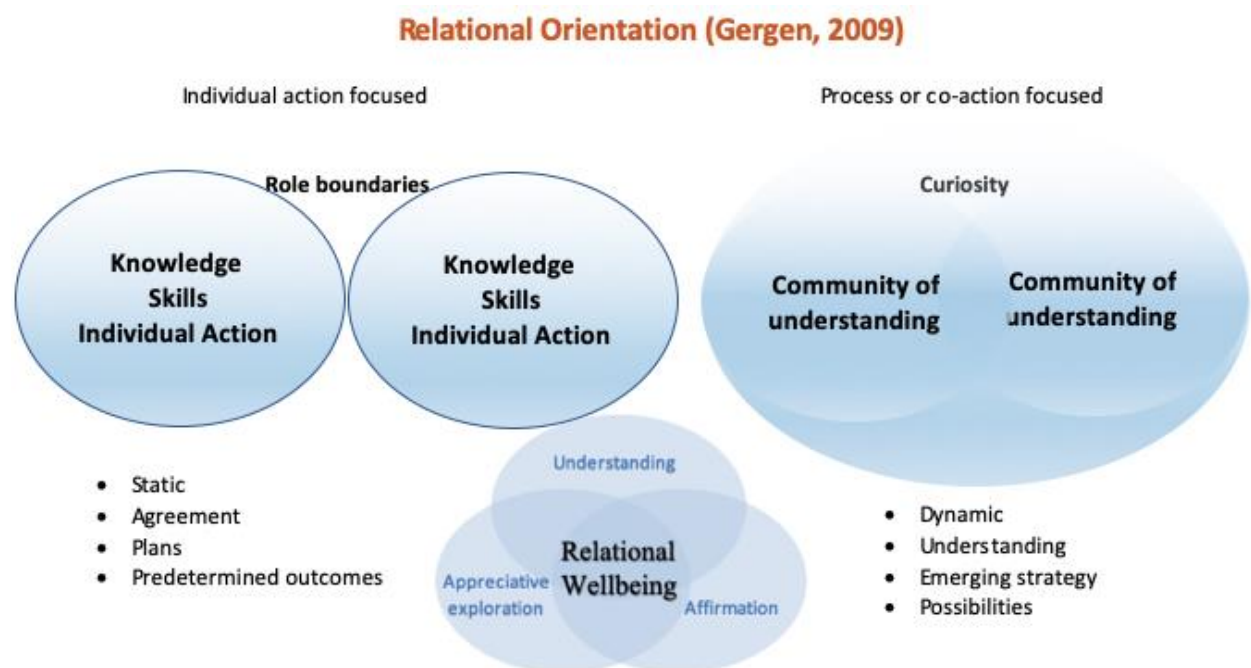
From the relational perspective, understanding is not a cognitive, mental process occurring in individual minds. For relational constructionists, understanding is a synchronic sensitivity to each other's actions. That is, a carefully tuned responsiveness in anticipating each other's actions in a way that invites further action (Gergen, 2009). This is also referred to as double listening. It requires listening to words as well as actions. When we pay attention to actions in addition to content in a meeting, for example, we become aware of the common scenario in which the coordination of actions becomes meaningful. I see this as a process by which a team 'gels' and attains its own characteristics easily recognisable to the team members. As a result, the team members come to an understanding of what the unspoken expectations are, so they come to meetings confident in their understanding of how the meeting might go.

The concepts of understanding, appreciation and affirmation are commonly associated with collaborative work. Gergen (2009) transforms these common

individualistic concepts into cornerstones of relational wellbeing, by inextricably linking individual action to the action of another. This simplicity in the shift in thinking, can be viewed as another expression of respect for the tradition. Gergen takes valued concepts and, in a slight shift in positioning, opens previously unseen new possibilities in practice. Combining the wellbeing indicators with the Relational Orientation diagram (Figure 3.5) produced a methodological tool I refer to as a Relational Orientation Guide, presented in Figure 4.10.

I chose not to directly share the relational wellbeing indicators with practitioners for two reasons. Firstly, I wanted to be respectful of their time, some of which had already been taken up with the work on understanding the concept of co-action. Secondly, I shared the principles behind the indicators by practising and enacting them as often as I could during our conversations. The outcomes chapter will later show how the three relational wellbeing indicators were used as a framework for presenting the outcomes of this study.

**Figure 4.10.** Relational orientation guide



The Relational Orientation Guide (Figure 4.10) captures the principles of relational theory and as such played a role in guiding the whole research process. Having described the methodology used to identify and engage relational practices, next, I pay attention to a dialogue with practitioners as a research process.

#### ***4.5.4. Research as relational practice***

The preceding chapters intended to situate the reader in the worldview where the self develops in an unfolding relational process of meaning-making with multiple others. When this view is adopted, it becomes problematic to depict human action in terms of single outcomes. The multiplicity of relational being and unfolding nature of co-action correspond better with jointly generating possibilities rather than focusing on specific outcomes. This means that the main research concern shifts from hypothesising and discovering specific research outcomes to the process of jointly generating new possibilities for action (McNamee, 2014; McNamee & Gergen, 1999; Raboin et al., 2012).

The next point to note is that “unfolding interactions between people draw from and reshape social, local, historical environments” (Raboin et al., 2012, p. 8). This recognition of the reality-creating capacity of language also suggests local rather than universal research implications. In this way research becomes concerned with what is locally useful, rather than what is right or wrong for all (Hosking, 1999, 2011; Hosking & McNamee, 2006; McNamee, 2014; Raboin et al., 2012).

So far, this thesis has proposed that relational research is concerned with unfolding interactions between relationally constructed selves. The researcher is no longer an independent language user objectively describing the world as it is, but embedded in collaboration out of which locally useful possibilities emerge. Those possibilities generated in the process are the valued outcomes of a research process conceptualised this way. The value attached to the outcomes depends on their usefulness in practice. Therefore, research aims to be accountable to practitioners in their daily practice (Gergen, 2015b).

#### ***4.5.5. Focus on relational process in this study***

Relational constructionists contend that for meaning-making, individual acts are insufficient. It has been argued throughout the thesis that co-action and the resulting shift in focus on the process of relating is relational theory’s critical contribution. The method used in this study, therefore, had to reflect this process-oriented shift in how new meaning is generated. That is, this study had to be equally as interested in the dialogic process itself as it is in the new knowledge that was generated in it. For example, in addition to listening for co-action-based practices in my conversations with practitioners, I was also listening to their actions. What Gergen (2009) calls double listening was enacted by paying attention to the co-ordination of my actions with the practitioners. This was less about what I said and more about how engaged

and motivated practitioners seemed, how considered their responses seemed, how many little 'side-laugh's' were shared, and so on. This also needed to be explicit in the research design.

In order to align with the dialogic character of relational research, I conceptualised the research process and my engagement with practitioners as co-action. Co-action was described in the literature review chapter as an ongoing process of acting and supplementing within the same scenario of understanding (Gergen, 2009). This implied the engagement of the practitioners in the research process as equal partners supported by the common scenario of understanding relational collaboration. It is important to emphasise again that the partnership was not a way to give a stronger voice to participants, it was the basic conceptual positioning that I aimed to make transparent in every step of the process.

Co-action is difficult to account for when the research process is guided primarily by the research tools and researcher's individual actions. The main challenge in this study, therefore, was to ensure the focus on the dialogic process of co-action and co-ordination. The method had to highlight the relational, dialogic process. Table 4.5 depicts the way I emphasised this process and included ongoing invitations, offerings and responses through formal letters, narrative letters, emails and Zoom conversations. These were ongoing and two-way communications attempting to keep the co-action and co-ordination explicit. In other words, this was an attempt to ground the tools described earlier in the relational process.

The main difference between the tools and the dialogic process, from the relational perspective, is acknowledging that new meaning is generated in the dialogic process, rather than by a researcher using methodological tools in isolation. This study aimed to highlight the co-ordination of co-action out of which valued practices and future potentials were jointly generated.

It needs to be noted that relational processes are never simple and linear. Table 4.5 highlights the process and captures a glimpse of the shift in process from co-action to coordination of actions in this research.

**Table 4.5.** Relationally sustained narrative conversations method

<b>Relationally-Sustained Narrative Conversations Method</b>				
		<b>Co-action process</b> (Data Collection)	<b>Co-ordination process</b> (Data Analysis)	<b>Generated Outcomes</b> (Findings)
<b>Research Question 1</b>				
1	Conversation 1	Narrative Conversations		Valued practices shared
2	Letter 1	Relational Orientation Guide	Relational Orientation Guide	Engaging with Relational potential
3	Introducing Relational Ori. Guide	Relational Orientation Guide		
4	Conversation 2		<b>Co-ordination in relational space</b>	<b>Valued stories Generated</b>
5	Letter 2		Relational Orientation Guide	Relational orientation identified
<b>Research Question 2</b>				
6	Group meeting			Feedback Evaluation emails
7	Forum presentation	<b>Co-ordination</b>	<b>Co-ordination</b>	<b>HCN orientation Generated</b>
8	Outcomes presented in HCN Maps		HCN Relational Maps developed and shared	<b>HCN Relational Maps Generated</b>
9	Future		Potential of <b>Relational flow</b>	Stories - possible publication

Table 4.5 depicts both the tools (in black font) and the dialogic process (in blue font). The first row indicates that when relational processes are the primary focus, data collection becomes co-action and data analysis requires a shift from co-action to synchronised co-ordination. Data collection and analysis are no longer something a researcher conducts as primarily responsible and accountable to the research community.

Table 4.5 shows an overview of the steps taken in this study and depicts both the methodological tools used (in black font) and the dialogic process (in blue font). It

lays out the method in nine steps starting with the first conversations and letters and ending with jointly generating potential for future HCN practices. The next two columns identify aspects of the method relevant for each step. The final column shows the corresponding outcomes, some of which were generated jointly in the process, some were a result of individual actions, rendering them not significant relationally. In other words, one type of outcomes arose primarily out of the use of methodological tools in individual action (black font) and the other relational process (blue font). The table reflects the complexity of the process and will be best understood at the end of this chapter. I am explaining its relevance here so the reader can recognise it more easily in the following section where I provide a detailed outline of the research process. Gergen (2014) highlights,

the interview is a complex relational process and can unfold in ways that either invite or suppress the respondent's offerings. With the interviewer's keen sensitivity to the relationship and a continuing flexibility, respondents may supply far richer and more illuminating views than can ever be obtained through standardization. (p. 50)

#### **4.6. Research Method: From Data Collection to Co-action and from Analysis to Co-ordination**

This section is concerned with how this research was carried out and will detail specific steps taken in achieving the outcomes of this study.

This study proposed that identifying successful interprofessional collaboration experiences (conversation 1) would provide a stock of experiences with a potential for relationally oriented ways of working. When engaged with them as valued, relationally situated practices can be further explored for their potential in practice (conversation 2). In the last step the identified practices were used to start considering alternative stories and possibilities for moving forward (rather than away from established ways of working) while sustaining the relational direction in practice.

With this in mind I embarked on initiating the dialogue with practitioners. The first narrative conversations focused on collecting practitioners' narratives of successful collaboration experiences.

#### **4.6.1. Narrative conversations**

Narrative conversation aimed at answering the first research question:

In what ways is relational practice already present in effective HCN interprofessional collaboration?

##### *4.6.1.1. Conversation 1: Exploring valued collaboration experiences*

The first round of individual conversations was conducted as recorded Zoom meetings in June and July 2017. In preparing for the conversations, I made a set of questions to ask (see Appendix 5), knowing that they were more of an aide for my confidence as this was not a structured interview. *What stands out for you when you think about successful interprofessional collaboration?* was the first and the main question practitioners were asked. This question intended to situate the conversation in the context of practices valued by the practitioners. I further asked a number of similar questions, such as *What do you consider successful in interprofessional collaboration?*

Early in the conversations it became evident that practitioners were highly motivated to talk about their successful interprofessional collaboration experiences and did not need much prompting or guiding. After each question, practitioners were encouraged to recall practice examples. After the initial exploration of valued practices, I provided a summary of main points to each practitioner. In one example, I said: *“You spoke of a natural way of working; you mentioned the importance of looking forward, bringing people together and listening to what people say. Can you remember any more examples or similar situations where this played out in practice?”*

At this stage the practitioners were fully engaged. Their passion for the practice was clear and I would describe the dialogue that followed as easy and vibrant. Many personal experiences and thoughts were shared. The importance of treating these with respect and care dawned on me as I realised that practitioners are also potentially making themselves vulnerable. This prompted me to ensure that my responses were validating the experiences shared and acknowledged their value to the study. In one example, when a practitioner reported: *“This friction is caused by not having trust amongst the team. The shift happens when there is understanding of why things are happening, seeing the big picture, when people feel safe and things are working”*, I commented: *“Here you recognised the positive shift happens when there is trust, when people feel safe, when there is understanding and people*

*are able to see the big picture. Thank you for this striking insight, which opens a question of how do we keep this shift going. I would love an opportunity to unpack this with you further”.*

Because of the risk in praise like “striking insight” being understood as disingenuous exaggerations or patronising, I mitigated it with a more detailed explanation of what I meant. Trust is often assumed and expected to be present in teamwork and therefore rarely explored and reflected on. Therefore, it requires recognition and acknowledgment.

Other questions I asked were: *When you look back at the time you started working in interprofessional teams and compare your practice to now, what has changed?* and, *What advice would you give to the younger self about working in interprofessional teams?*

Although we clearly focused on effective, successful collaboration, some problematic situations were reported by all practitioners. Those were not ignored. Not addressing the problems in the conversation would risk undermining the complexity of the situations practitioners were reporting. In those situations, I would ask the practitioners to remember the point that marked a shift in actions towards solutions. It surprised me how productive this question was in highlighting the importance of relationships.

In answering this question, the practitioners spoke of relationally oriented moments where often simple acts of being relationally sensitive and attuned shifted the team away from problem saturated stories. Although my narrative therapy training prepared me for that, the extent to which their stories challenged the notion of requiring expert knowledges to achieve success in complex situations was unexpected. I was not prepared for how clear this would be, considering the context of government work requiring high expert visibility and accountability. It made me wonder if the combination of the high levels of practitioners’ experience and the complexity of HCN work naturally highlight the importance of being relationally attuned.

While acknowledging the importance of clear rules and guidelines in high stakes, complex government funded work, I asked the practitioners to report on effective ways of working additional to those included in the practice guidelines and ‘rulebooks’. This proved to be another question that ignited rich conversation. Every



conversation ended with my gratitude and appreciation of their offerings and their time. They concluded with a reminder of the next steps in the process.

Throughout my conversations with the HCN practitioners, I slowly moved away from relying on pre-planned questions and towards a process in which it was more important how I responded to the situation. McNamee (2014) offers an example of a researcher using the 'traveller with a compass' metaphor to describe his journey as a researcher. "If I have my contributions planned implied is the implication that participants' responses will neatly slot into the empty spaces. This leaves little space for emerging strategies and gives the participants a message that I am only interested in specific responses not them as a person" (p. 92). In this context, the researcher positioning is best described as a curiosity-led inquiry with a goal to jointly explore valued practices through the relational lens.

As Table 5.7 shows, at steps one and two I relied on the Narrative Conversations method (Figure 4.9) and Relational Orientation Guide (Figure 4.10) as the tools in preparing for and guiding my conversations with the practitioners. I was listening to practitioners' valued experiences sitting outside their coherent individual action-focused collaboration narratives while looking to tap into the forgetting suggested by narrative theory.

After the first round of conversations, the Relational Orientation Guide helped me identify relational potential in practitioners' stories and I highlighted them in the follow up letters I sent to each practitioner. For example, as I was watching the Zoom video recordings of the conversations, I was looking for examples where individual action gives way to co-action, individual meaning and knowledge give way to understanding, and individual plans and individual goals give way to emerging collaborative strategies and possibilities.

#### *4.6.1.2. Narrative letter 1: Summary of conversation 1 and follow up questions*

Following the conversations, I wrote each practitioner a letter. Letter writing is an important part of narrative practice. Narrative letters serve a purpose of extending the dialogue by summarising the previous conversation. They invite further exploration and relationship building (Morgan, 2000).

To ensure that the letters adhered to the narrative principles, I engaged an experienced narrative therapist, Dr McMenamin for support. As can be seen in the example in Appendix 6, Dr McMenamin and I worked meticulously on each letter. Every letter underwent a number of iterations. We aimed for the letters in general,

and the questions related to relational potential specifically, to reflect the principles of narrative theory and invite further dialogue.

The purpose of the letters was to first highlight and then engage with relational practices as valued, so they can be further explored for their potential in practice (conversation 2). Therefore, the letter writing required a level of analysis. For that, I relied on the Relational Orientation Guide (Figure 4.10). When a practice example could be identified as relational understanding, collective capacity or emerging strategy, for example, a corresponding question was formulated to support further exploration.

Every first letter started with:

*Firstly, it was a privilege to talk to you about collaborative practice. I have been looking forward to doing this study for almost a decade and am now very excited about working together to make a difference, however small, in the practice of interprofessional collaboration.*

*Here is my summary of what you said. Please add to and change this as you see appropriate. It is important to me that this reflects your views. You will find some questions about situations I would like us to unpack more when we have our next conversation. I want to emphasise here that I genuinely don't know the answers to these questions and hope that we can start exploring them together.*

With this introduction I intended to share some of the commitments and values that shaped my research practice to emphasise the dialogic stance I adopted. The introduction also reflected the basic premise of narrative theory by referring to practitioners as holders of valued knowledge. Equally important was the role of the letters in engaging the practitioners in further dialogue. I wanted to emphasise a joint exploration aspect of the conversations and communicate to the practitioners that I was not looking for specific answers, as is often the case in research.

In terms of relational process, the act of practitioners offering their stories in conversation 1 required a supplement. This was another purpose of narrative letters. In this sense letter 1 supplemented the practitioners' stories. That point in the research process could be seen as inviting co-action and developing a joint scenario for action. I aimed to show my appreciation, respect and curiosity for practitioners'

valued stories and invite further dialogue with the questions sent in the letters. Thus, narrative letters intended to support dialogue and further engagement.

In the first two steps (conversation 1 and letter 1), on one hand the initial set of data was collected (practitioners' experiences and stories) and analysed (by the researcher using the Relational Orientation Guide) and initial findings emerged in the identified relational potential in practitioners' stories. On the other hand, from the relational perspective, co-action (continuation of dialogue) was possible only to the extent to which the practitioners engaged with their letters. At this point I had no insight into that. Therefore, co-action, co-ordination and generated outcomes were not yet present.

In one example, when a practitioner reported: *"Being observant, reading what is happening for people in the room, following gut instinct"*, the question in the letter asked:

*When using the phrase 'gut instinct', what are you referring to? If you think about gut instinct as being trained across the years – through formal training and through experience, what stories do you have of how it has been developed to such a useful extent?*

In another example, when a practitioner spoke of *"noticing"*, the questions were:

*What is it that you value about the practice of noticing? What attitudes sit behind the noticing? What does that say about what you consider important?*

In addition to questions, the letters provided comments on examples of relational orientation to support further engagement with those. For example, *"... in the example of a student who was afraid to be judged for wanting to go to church. You provided a safe environment for him to have his say and discover that people didn't judge him"*. My comment in the letter was: *"This makes me wonder just how much potential for change exists in any one conversation. I found this part of our conversation particularly inspirational. Thank you"*.

The first letters ended with:

*With gratitude and excitement, I would like to thank you for working with me. Through the identification of your own unique story and within your own unique experiences, you have made visible alternative knowledges*

*which may hold new potential. I look forward to exploring the ways you have influenced this direction in your practice and learn about the ways this direction in your practice has influenced you.*

After the first conversations were completed and the first letters written, it became clearer that the reported experiences offered much relational potential. In the process of listening to the Zoom recordings and writing the letters, some categories of the information could be identified even before using any specific interpretation tools. I highlighted those categories (Appendix 7) as a way of familiarising myself with the information:

1. Green – relational potential and practice for which we have no common words to describe,
2. Blue – relational insights,
3. Yellow – stories and examples of practice,
4. Red – reported problems.

The information provided in the first conversations could be separated into two somewhat distinct groups. Some parts of the conversations were more experiential and some more reflective and insightful.

Although the original invitation letters and information sheets refer to participants, as my understanding of relational research grew, my view on the position of the researcher changed. From a relational perspective, my job was not to use my research expertise to interpret and make sense of the data collected from the participants to achieve a deeper understanding of collaborative practice. In this study, practitioner experiences and knowledge of collaborative practice and my knowledge of relational and narrative theory provided a context for a joint, shared effort where new practices emerged. In that sense the analysis, too, was a joint process.

Another intention of the letter was to be transparent and keep the communication lines always open. Although I communicated to the practitioners early in the process that their practice was not going to be evaluated or criticised, sometimes criticism may be perceived when it is not intended. For that reason, it was critical to keep the communication lines always open. During the period of participant involvement, which was over three years, I sent intermittent individual emails to practitioners and to the national HCN manager to keep them informed of the process and invite any questions they might have had.

#### **4.6.2. Preparation for conversation 2**

Before commencing the second round of conversations, I introduced the Relational Orientation to practitioners. This was done initially in an email (Appendix 8) with a written explanation and a short Prezi presentation, in which I summarized the section of the literature review describing the difference between individual action and co-action attentive orientation in practice. This was followed by a clarification and a discussion in conversation 2. The act of sharing a research tool with the practitioners was a critical point in the research. It required my conscious decision to set the research tool aside and shift the focus onto dialogue. The acts of writing letters and sharing the relational orientation with practitioners intended to build and nurture a common scenario from which further joint action could be generated. The success of this point in the research also depended on the practitioners' willingness to embrace their role as co-researchers. Introducing the relational orientation to practitioners can be seen as a researcher's act which was later supplemented with practitioners' contributions in the conversations that followed (see Tables 5.6 and 5.7).

In the email I invited the practitioners to view the presentation, but not feel pushed in case they didn't have the time for this additional request. I explained that if they did not see the presentation, I would explain the content of the presentation at the beginning of our next conversation.

With this, I intended for practitioners to choose a level of engagement that suited them best. The purpose of sharing this information was achieving transparency about the thinking behind the process. This was expected to deepen the practitioners' engagement and allow for joint exploration of relational orientation in their practice, grounded in shared understanding. Most importantly, achieving a common scenario for co-action was expected to invite co-ordination of our actions at the next step in the research process.

#### **4.6.3. Conversation 2: Exploring valued relational experiences and joint analysis**

The second conversations consisted of jointly addressing the questions sent to each practitioner in their narrative letter. This made each conversation different, depending on each practitioner's practice examples and stories. However, they all contained rich and engaged dialogue focused on what relational orientation means and looks like in their collaborative practice.

The first conversations and narrative letters set the stage for the next step. By this point each practitioner had spent an hour in a conversation with me, and received emails and the letter documenting successful collaboration experiences that I identified as having relational potential. The practice experiences were reported in the form of practice examples, anecdotes and stories. They were full of insights about collaborative practice collected in the first conversation. In the second conversation, these stories provided rich grounds for new conversations which facilitated practitioners' engagement with the relational potential they value in their practice. Since nearly a year passed between the letters and the second conversations, I sent an email reminder to the practitioners with their letter attached prior to the second conversation.

It could be argued that the first conversations identified relational potential, while the second conversations clarified what that means for each practitioner in their practice. As illustrated in Figure 4.9, from the narrative lens, the act of engaging with relationally situated practice experiences enabled an alternative story that included relational orientation in HCN practice. In that sense, the second conversation marked the beginning of joint data analysis. It was the practitioners who conducted the analysis in the process. This was made possible by (a) the conceptual positioning which placed valued knowledge in dialogue, and (b) conceptual transparency achieved by introducing the practitioners to relational orientation in collaborative practice.

In relation to highlighting the process, at this point the practitioners became co-researchers in the sense that meaning-making now included the shared theoretical lens. The shared guide gave us a common ground for meaning-making and the conversations that followed now could generate the first level of joint analysis. The practice experiences shared at the point of conversation 2 reflected practitioners' understanding of relationally oriented collaboration and, in that sense, supplemented its introduction.

It can be argued that at this point researcher/practitioner actions were occurring within the same scenario of relational understanding. According to Gergen (2009), acting in the same scenario of understanding allows co-action to become co-ordinated and synchronised. From the relational perspective, through this co-ordination new stories became meaningful within the shared scenario and thus attained their status as the main outcome of Research Question 1.

#### 4.6.3.1. Narrative letter 2

Consequently, the second letters intended to capture the jointly co-ordinated meaning. After the second round of conversations, I wrote another letter to each practitioner to communicate and check on my understanding of what they shared. In that sense, letter 2 had important supplement and relational value even though it did not generate new outcomes.

Similar to the first, the second letters also summarised the previous discussion and included follow up questions. The purpose of having questions in the second letter was to support reflection and sustain relational orientation as valued.

All second letters started with the following statement:

*Thank you for talking to me again. In the second conversation, we revisited more relationally based situations and explored their potential.*

*I now ask you to leave that aside for a brief moment, while I set out my thoughts for your consideration. It seems to me that although professional knowledge and practice guidelines are valuable as guides, they are only partly helpful for the moment-by-moment decisions we make in collaborative practice with our peers and with the people we serve. And further to that, while the research I read is clear that relationships are important to collaborative practice, that same research seems to offer at times confusing and unconvincing advice for practitioners.*

*In the light of that, in this project I am proposing that the knowledge to guide moment-by-moment responses in each unique and particular situation be developed by the HCN practitioners. In this current co-research relationship, it is you who holds the valued knowledge. My contribution was to offer a tool in the form of relational theory to be used as a set of glasses through which your knowledge and solutions get magnified sufficiently to be recognised as valued. My hope is that this might open up possibilities in practice which would otherwise stay hidden from us.*

*Now to my summary of what you said. Just like before, please change this as you see appropriate. It is important to me that this reflects your views. You will find some questions again. This time I hope the*

*questions will support your reflection on how the practices and ideas we explored could be useful in future HCN practice.*

The wording of the letter was highly influenced by Epston's (1999) positioning of approaching his clients' knowledge as the driving force for change. The letters now refer to practitioners as co-researchers. While they had started the research as participants, in the process their level of engagement grew from giving information, to engaging with theory and participating in data analysis. The letter intended to capture the shift in dialogue and perception of what is considered valued practice. In that sense, the second letters are a good representation of the outcomes of this study.

As a researcher I went on to add another level of analysis using Gergen's (2009) relational wellbeing indicators. This was valuable from the point of view of a researcher interested in relational theory. From the relational perspective, however, this step added little value because it did not include practitioners. In the next step I engaged with the practitioners on how they might take the outcomes of this study into their future practices.

#### **4.6.4. Feedback and future orientation**

Research Question 2:

How can relational orientation support collaboration in HCN practice?

On one level, Research Question 2 was concerned with practitioner's evaluation of the usefulness of their participation in this study in terms of influencing their future practices. Originally, when designing the research approach, I planned to develop a survey aimed at evaluating narrative conversations as an emerging strategy to move beyond the boundaries of problem-sustaining stories of collaboration.

Inspired by the Taos Institute practitioners, I was interested in using a method that can inform the future rather than measure the past. I aimed to achieve this by including participants in the analysis. Participatory narrative evaluation (Shimshock, 2012) allows for data to be analysed and made sense of by participants in a process of joint, shared meaning making. For example, Shimshock (2012) collected practitioners' anecdotes and stories to evaluate a community service provision. Shimshock used a questionnaire in the analysis process as a catalyst for making sense of the practitioner's stories. In the questionnaire he asked the practitioners to rate specific aspects of their stories. In this way he made the analysis a joint process. He called it Catalysis (Catalyst + Analysis).



During the conversations with practitioners I decided against the questionnaire in favour of a focus group meeting. Since this study is steeped in the importance of relationships, getting together as a group to reflect on and complete the study seemed a better idea. Therefore, I planned a group meeting to which the practitioners would bring their reflections and feedback.

Ultimately, the method which was finally used to answer this question evolved out of the research process. To reiterate, at this point in time the practitioners and I had been working together and communicating over a three-year period. I had two Zoom meetings with each practitioner and email updates between meetings. The practitioners received two narrative letters with which we engaged in dialogue about their relational practice. While the focus of the narrative conversations and letters was on relational orientation in past and current practice examples, the focus had now shifted to consideration of what this might mean to the future of their practice.

The timing of bringing the study to the final steps coincided with the 12th Educational Psychologist Forum in February 2020. Jointly presenting the study at the Forum seemed an opportunity for addressing Research Question 2. In late 2019, I approached the practitioners with an invitation to consider jointly presenting the study at the Forum. Almost immediately four practitioners responded expressing their interest. The fifth practitioner explained that she had prior travel commitments and was unable to join. Next, I approached the national manager asking for her permission. The manager informed me that one of the practitioners had approached her already and she gave her permission for that practitioner to attend and be the representative of the group.

#### *4.6.4.1. Group meeting*

Next, I planned a Zoom meeting to start planning the conference presentation. The meeting provided a forum where practitioners could collectively reflect and start jointly planning for the time after the study. Following their consent to receive group emails, the meeting was set. Three of five practitioners were available at the time of the meeting. At the meeting practitioners expressed their preference to submit their contributions to answering Research Question 2 in writing. The received written statements (Appendix 9) were valuable reflections of practitioners' experiences as co-researchers.

The conference presentation had a specific structure, which I adjusted to ensure there was space for practitioners' input. Half of the presentation was allocated to the

research process and the other half to HCN practice. At the meeting I introduced a summary of the research half of the presentation. Possibly because this was the first time the participating practitioners met as a group, the conversations were less free flowing. From there we agreed to continue planning for the conference by email and phone conversations.

#### *4.6.4.2. Practitioner direct feedback*

Four practitioners sent an email back (Appendix 9) containing their feedback. One practitioner phoned and reported their feedback that way. This will be presented and discussed in the next chapter.

#### *4.6.4.3. Joint forum presentation*

Following emails and phone correspondence with the practitioner representative, we prepared half of the 30 minute presentation each. We spent the day at the conference together and presented together. The following chapter will detail the significance of the process for the outcomes of this study.

In this section I presented the research process as a dynamic and complex interaction between the use of specific methodological tools to guide the process and a commitment to maintain the focus on dialogic process.

## **4.7. Concluding Comments**

In this chapter I introduced a relationally sustained narrative methodology and described how it was used in this study to support practitioners to explore, analyse and generate potential in their practice. With the view of narrative as creating social realities and perspective on narrative as a paradigm as well as a set of analytic tools, I turned to White and Epston (1990) for specificity of text analogy. When meaning originates in co-action, research becomes a process of forming preferred futures through dialogue. This view of research called for practitioners to become co-researchers to jointly participate in collaborative dialogue to guide practice. Narrative and relational theory were combined to make this study grounded in a dialogic process to recognise the knowledge creation capacity in practice as it relates to relational orientation in valued HCN ways of working. Next, I will present the outcomes generated in the process.

## **Chapter 5.**

### **Generated Outcomes and Discussion**

#### **5.1. Chapter Introduction**

The journey through jointly exploring relational orientation in HCN practice was described in the preceding chapter. This chapter presents what was generated in this process. In line with the literature review and methodology chapters, it first provides a brief reminder of the conceptual commitments endorsed at the beginning of the thesis. This thesis set out to explore the HCN practitioners' perspectives on the ways in which relational orientation is currently present in their practice and ways in which it can support the future of HCN practice.

The two main sections of this chapter answer the research questions. Each section is separated into themes which are further divided into relevant streams. It should be noted that most of the presented practices could be placed in more than one theme. The purpose of the themes is to structure the chapter rather than define the practices in any way.

Before introducing the main sections, it should be noted that I discuss practitioners' narratives as they are introduced throughout this chapter, instead of following traditional thesis design with separate outcomes and discussion chapters. The way narratives are discussed is intended to reflect the dialogic nature of the method employed in the study. The presented narratives were generated in dialogues held through face-to-face conversations, letters, and email exchanges. The two main sections of this chapter, thus, integrate and discuss practitioners' narratives as specific relational themes which generate streams of ideas.

The section answering Research Question 1 (Section 5.2) begins with attending to the initial outcomes. This indicates that the conversations with HCN practitioners generated more than the answers to the research questions and more than this thesis could capture. The two stories presented in relation to Research Question 1

in Section 5.2.1 depict the context of HCN practice, which is expected to support the readers' engagement with the practices that follow.

In each of the following sections, relevant relational themes are discussed in light of existing literature and as they relate to the current research questions. Co-action oriented practice is the first theme in the section answering Research Question 1. This theme provides a quick glance at the many ways practitioners referred to the process of relating. This theme is then unpacked in streams of relationally attuned ideas of being present in interprofessional meetings as a human being and addresses the concerns related to time pressures faced by HCN and many other professionals. The last two streams discuss the co-action theme as a specific view of learning and a way to tap into collective capacity.

Relational theory redefines understanding as a central relational theme. This theme is further unpacked with the idea of listening as a carefully tuned action. The practice examples relevant to this theme reflect understanding as a process between people, always fluid and flexible and inextricably linked to the actions of others. The act of grounding understanding in a non-judgmental stance emerged as a major theme in this section. This theme concludes with the practitioners' emphasis on the flow-on effect of their practices into the wider society.

The affirmation theme is discussed next. It validates appreciation as critically required in successful collaboration. Related to this theme is the idea of confidence as a relational process, rather than an individual, internal characteristic.

The last theme, appreciative exploration, offers a challenge. The practice examples in this theme break the barriers commonly accepted as unbreakable. They challenge the complacent helplessness most of us feel, when facing views we find ourselves less willing to understand.

The outcomes of Research Question 2 were easier to structure, not requiring an introduction. Research Question 2 was concerned with whether the practitioners saw the ideas and practices unpacked in the research process as worthwhile takeaways in terms of the future of HCN practice. Put simply, at the end of the research process, I was interested to learn if and what practitioners identify as useful for the future of their practice. This section discusses two themes – practitioner feedback and relational responsibility in action. Practitioner feedback is further unpacked as actions concerning moving on in dialogue, the idea of

transformation as respect for tradition, and relational responsibility. The last theme describes an unexpected demonstration of an emerging relational flow.

All of the outcomes of this study are HCN practitioners' valued practice examples. At the end of this chapter they are summarised in two tables which formed the two HCN relational orientation maps. The maps capture what relational orientation looks like in HCN practice by documenting a number of specific practices and related practice principles. The two maps are expected to serve as a guide for taking the HCN collaborative practice in a chosen relational direction.

### **5.1.1. Links to conceptual framework**

The outcome component of the conceptual framework (Figure 2.2) binds the two ends of the thesis. It ties the ontological commitments made at the outset of the journey to an open-minded interest in exploring the valued HCN practices from the relational lens. The outcome of this commitment in this study is the generated principle-based guide to a preferred relational orientation. This chapter further ties the outcomes to a dialogic process in conversational, social space. Most importantly, it grounds the outcomes in respect for the HCN practice tradition by caring for its future.

Finally, in this chapter the thesis comes alive with participants' narratives of complex and fast changing real-life situations. These narratives provided rich, fertile grounds for relationship-centred dialogue. This chapter captures only a glimpse of the richness of the practice-informed knowledge creation capacity I had the privilege of witnessing. The inquiry process brought to light many relationally oriented practices.

## **5.2 Outcomes: Research Question 1**

*In what ways is relational orientation already present in effective HCN interprofessional collaboration?*

The outcomes relating to this research question are recorded in the narrative letters sent to practitioners as part of the relationally oriented narrative methodology. I refer to them as letters in this chapter. To protect their privacy, pseudonyms replaced practitioners' names. To present and discuss the outcomes, I predominantly use practitioners' direct quotes either as in-text or stand-alone direct quotations. Practitioners quotes are occasionally supplemented by my comments. To bring attention to practitioners' words, they are italicised in the text that follows. In order to

reflect the methodological focus on the outcomes arising out of a dialogic process, I have also included some of my comments recorded in the letters or the Zoom recordings. Because practitioners' contributions are the main outcome of this study, my comments are not italicised.

The relational orientation guide (Figure 4.10), presented in the methodology chapter, provided the main framework for presenting the outcomes of the first research question. Consequently, the section of the chapter capturing the outcomes of Research Question 1 is divided into the corresponding themes (co-action, understanding, affirmation, and appreciative exploration).

### **5.2.1. Initial outcomes**

In approximately 20 hours collectively spent talking about successful HCN collaboration, practitioners shared a number of positive stories in the face of extreme adversity. They were shared as illustrations of practitioners' valued collaboration experiences. In Appendix 7, the stories are highlighted in yellow. I have included examples of those stories in this chapter. These stories stand alone without requiring interpretation and may also provide the reader with a background context for HCN practice, which may be useful in reading the rest of this chapter.

Practitioners presented many fascinating and worthwhile stories, such as a fun story of a student 'seeing through' the behavioural plans and working out much faster than the therapist how to get all the rewards with minimal effort, or a story of a family struggling in an 'extremely chaotic' situation, inviting a homeless person to live with them. Here are two different examples that the practitioners chose for the joint conference presentation at the annual Educational Psychology Forum.

#### **Story 1**

*The first story example involved a fourteen-year-old young man with a range of disabilities (Tourettes, Obsessive Compulsive Disorder, Autism Spectrum Disorder) who either coped by avoiding risky, sensory-challenging and social situations (e.g. showering, going to school, going into shops in his community), or didn't cope and had verbal and physical outbursts. His parents had managed the latter by also limiting the number of challenging situations, to the extent that he was quite demanding of them and not as independent at home as would be expected of a teenager. The professional team collaborated well as they all agreed on the goals, but nothing much changed.*

*Eventually a mentor was found for him (funded through HCN) who shared the young man's passion for film-making and knowledge of obscure arthouse films, and it was agreed that they would have film-making sessions at school once a week. As a result, the young man came to school on that day, which made it obvious that he was able to attend. The mentor was able to show where film-making could lead and which university courses would be of interest to the young man. He began to accept that he needed to attend some other classes and complete work for National Certificate of Educational Achievement (NCEA) credits.*

*The school guidance counsellor and a teacher aide supported him at school and he increased his time there, while still working on his films. He then needed actors to appear in his movies so he reconnected with some of his peers. He needed to film in a variety of locations and he became willing to get out and about in his community. The result was that the perception of the team (including his caregivers) changed, and it became obvious that when he was motivated, he could overcome most of the things that they had assumed were challenging for him, just because he was refusing to do them. He ended up remaining at school until the end of Year 13, and graduated with enough credits to attend university.*

## **Story 2**

*The second example is of a team that were at odds because some members believed the young person had Fetal Alcohol Spectrum Disorder (FASD) and required an assessment for this, and others felt that this was a costly and (for the child) time-consuming intervention that would not achieve any further resourcing or change in what was being provided for the child. By valuing and considering both points of view, it became apparent that one of the practitioners who was advocating strongly for the FASD assessment had recently come from a Youth Justice role and found the information in the assessment useful both personally (in terms of how the young person processed information) and in presenting information to Court. She was new to the team and did*

*not realise that the type of information she had found valuable was already held by different team members, who were then able to share this with her. (The child was also young enough that there was hope that, with support, he could be steered away from entering the justice system). This allowed the issue to be 'put to bed'.*

In addition to providing the context for reading the practice examples that will follow in the remainder of this chapter, these examples contain a number of themes that will be further unpacked later. Many stories demonstrated human capacity to care for others beyond everyday expectations (Tanya, letter 1). Even more interesting and perhaps surprising was the ease with which successful examples kept coming up out of what is commonly considered the most complex and problem saturated situations for children and young people in the country.

### **5.2.2. Co-action**

#### *5.2.2.1. Relationships*

When asked about successful interprofessional collaboration, practitioners reported experiences reflecting various ways people relate to each other. For example, the practitioners talked about “*meeting having a nice flow*”; “*organic way of working*”; “*there is understanding*”; “*seeing the big picture*”; “*being on the same page*”; “*when people feel safe and things are working*”; “*everyone respects each other and communication is good*”; “*the team joined forces*”; “*people recognising how they can work together*”; “*where cross over is possible*”. In these and similar statements, relationships seemed important although they were reported in somewhat indistinct and generic terms. I could recognise why a growing number of researchers are interested in illuminating what relationships mean and look like in practice (Glennie, 2007), how to make them visible (Camargo-Borges, 2015), and to support them in everyday practice (Holley-Boen, 2018).

#### *5.2.2.2. Being human*

Vicky voiced the importance of relationships based on some of the very basic human principles:

*A young man's mother felt threatened by a team's suggestion of a supported living in future. At the start of the process she presented as physically shaking, defensive and angry. The team members demonstrated that their suggestion was an expression of genuine concern and coming from the heart. At the end of this process anger and*



*accusations were replaced with hugs and positive outlook for the future.*  
(Vicky, letter 1)

Vicky reported that “*decisions based on solid professional knowledge as well as ‘from the heart’ are both needed. Because the team was able to keep an open mind and consider both ideas, the issue was resolved with the child’s best interests in mind*” (Vicky, letter 2).

This and other similar reflective statements made by HCN practitioners stood out for me as capturing the transformational power of long experience in facing highly complex situations. Sharp (2020) explains that “dialogue is not easy but through it, [practitioners] are reaching new levels of understanding themselves and others” (p. 16).

When asked what she would advise her less experienced colleagues, Rita reported:

*Take time and listen, don’t rush, (within reason), to make sure everybody knows, not only what their roles are, but what it actually means. Understand where others are coming from, be personal, practice small talk. Self-disclosure is when values get shared and empathy becomes visible. Being mindful that I am not just here because it is my role, I am a human being, I want to be understanding and supportive.*  
(Rita, letter 1)

Rita’s stance of looking beyond a professional role is supported by research across a variety of settings (Anderson, 2020; Holley-Boen, 2018; Kearney et al., 2017; Madsen, 2016). The pressure agencies face to fix problems makes it harder for practitioners to nurture the relational stance they hold with families and colleagues. Madsen (2016) found that this pressure risks practitioners working on families rather than with them. In his study, Madsen (2016) explored a narrative theory-based practice approach, collaborative helping, with practitioners. This approach seeks to understand the stories around which people organise their lives. This view invites practitioners in human services to be mindful of the ways in which their interactions with families have the potential to sustain particular life stories and invites them to consider and express the values, beliefs, hopes and commitments that drive their practices. Madsen (2016) found that adopting this approach resulted in a positive practice shift and also had an energising effect on the practitioners in his study.

Another example of looking beyond a typical professional role can be found in New Zealand, where SENCO (special needs coordinators) have a high level of autonomy in defining their role. Kearney et al. (2017) found that making a meaningful difference in student lives, rather than achieving specific learning goals, was considered by SENCO a major component of their role. This will be further discussed later.

Being present as a human being, beyond a professional role, was reported as valued by all practitioners. Although this may not be seen as typical for high stakes government services, it scored highly as a valued HCN practice. From the relational perspective, multiplicity of being is a strength providing multiple resources (Gergen, 2009, 2013; Hosking, 2011). To be specific, it could be argued that multiple ways of being in one situation opens multiple lines of relating. When we place too much emphasis on clarifying role boundaries, less space may be left for relating. From that perspective, each new relational space holds new resources for action (Camargo-Borges, 2019). For example, if I am struggling to relate to you as a professional, I may still be able relate to you as a mother, a caring human being, and so on. With alternative trajectories for relating, alternative possibilities for action open (Hosking, 2011; McNamee & Moscheta, 2015; Mudry et al., 2019).

It could also be argued that wanting to be understood as more than their role also reflects practitioners' recognition of the single identity trap (Appiah, 2007), and their attempts to engage with the spaces between roles and identities. Professional identity is increasingly seen as a dynamic process of becoming and as embedded in a "web" of multiple relationships (Mentis et al., 2016). More recent research offers valuable insights into the role relationships play in the co-construction of professional identities (Holley-Boen, 2018; Mentis et al., 2016; Sermijn, 2020).

#### *5.2.2.3. Ethics of responsibility*

When addressing the issue of identity in New Zealand and the context of HCN work, it is important to reflect on kaupapa Māori perspective and the realities of being Māori within the HCN service. These are essential concerns, especially in light of the new Education and Training Act (2020) acknowledging that, as a partner to Te Tiriti o Waitangi, the Crown has a duty to actively promote and protect Tiriti rights and to develop education settings in a way that reflects Māori-Crown relationships.

From the perspective of education, for example, the traditional support services are problem-focused and often isolate an individual child's actions and behaviour. This

way of addressing needs limits the space for influence and invites blame shifting and exclusionary practices (Emmersten Lund, 2020; Williams & Winslade, 2020). Traditional individualistic, punitive practices in school have created a process of marginalisation and exclusion (Lund & Winslade, 2018) that affects Māori more than other New Zealanders (Education Counts, 2020). Services that enable collaboration around needs, positive relationships and mutual responsibility can influence change beyond individual classrooms. Relational approaches emphasise the co-active nature of human action. They foster collaboration, inclusion and ethics of joint responsibility (Lund & Winslade, 2018). They offer alternative ways of living together in schools and society (Bishop, 2019; Emmersten Lund, 2020; A. H. Macfarlane et al., 2015; Williams & Winslade, 2020).

The relational perspective suggests that both action and responsibility for action are relational, not held by an individual person or community. By extension, all New Zealanders have the ethical responsibility to protect Māori culture and language from being neglected and lost. Additionally, the relational perspective suggests that all New Zealanders have a lot to learn from kaupapa Māori about the importance of relationships. The key Māori values such as whakawhanaungatanga, manaakitanga and rangatiratanga are profoundly relational and dialogic (A. H. Macfarlane et al., 2015). A recent illustration can be found in Russell Bishop's book *Teaching to the North East* (2019), which expands on his earlier work on Te Kotahitanga endorsing a relational, whānau-based education system. Bishop elaborates on specific supports for relationally oriented teaching practices.

#### 5.2.2.4. *Trusting relationships save time*

Tanya's narratives identified time as essential in building relationships, especially with children. She noticed that it takes much more time to engage young people and for young people to achieve sustainable change than agencies anticipate. "*We need to recognize the longer-term nature of needs and collaboration, not just stay together for as long as the interventions last*" (Tanya, letter 2).

On the other hand, Laura noticed that HCN practitioners as co-ordinators "*didn't have to do much when people trust each other and know each other*" (Laura, letter 1). The indication that time spent on trust and understanding may decrease the workload is an important point in the context of high demands on HCN service. Rita noticed that "*trust strengthens over time*" (Rita, letter 1). So, it seems that valued practices such as trust and understanding require extra time, but when present also save time. Interestingly, other research has found that teams facing highly complex

real-life situations find that investing time in building trusting relationships resulted in effective and timely teamwork (Sharp, 2018, 2020).

#### 5.2.2.5. Joint meaning making

Practitioners spoke about the process of collaboration being more important than what was achieved in meetings in terms of specific goals. Tanya observed that:

*With time the pure concentration on the goals shifted to whole team collaboration. You can have the best plan in the world – it doesn't necessarily mean anything is going to be better for the young person, unless the teamwork is going well. When professionals are willing to look at different ways of working this is also good modelling for the young people and their families. (Tanya, letter 1)*

At the start of the HCN process, the teams spend considerable time and effort to develop a plan of action. Plans are reviewed and updated regularly throughout the HCN process, reflecting the evolving nature of plans. A common theme in many conversations was to continuously look for different ways of working. The practitioners communicated a sense of ever-present awareness of complexity, which cannot be expressed in nor addressed by any one plan. Being open to learning from each other seems to best capture Tanya's and other practitioners' response to the complexity they face.

These concerns have been addressed in previous research. While exploring teamwork similar to HCN, Sharp (2020) found that learning from teamwork as it happens was highly valued by practitioners. Sharp (2020) suggests that being prepared for change requires attention to the process of joint meaning making, also referred to as action-oriented learning. Sharp described it as a relational activity starting at a group rather than individual level. Action-oriented learning pays attention to dialogue, relationships and values. She compares it to Gergen's (2009) concept of co-action, in that learning is not an individual but a relational activity. It is characterised by an open dialogue exploring what each team member means when using particular terms and ideas. This relational conception of language echoes Bird's insight into the value of preserving the negotiability of words (Ness & Strong, 2014). All of these ideas highlight that relationships are essential in knowledge production.

Like Gergen, Sharp (2020) compares team learning to a tentative dance, always adjusting to the next move. It slowly became clearer, in my conversations with the

practitioners, that a “*nice flow*”, “*organic way of working*”, “*being on the same page*”, and so on, include a synchronised act and supplement dance. In every act there is conscious and careful anticipation of the supplement to come (Gergen, 2009).

Similarly, Mentis et al. (2016) developed a framework for a postgraduate training programme involving five different specialist teacher endorsements based on the idea of ‘webbing learning through networked interactions’. The framework conceptualised learning as relational and continually co-constructed in the web of diverse perspectives and experiences all contributing to ongoing transformation. The aim of the framework was to support lifelong learning and practice embracing multiplicity of perspectives. Interestingly, the authors also found that this way of learning resulted in increased appreciation of other professional roles, increased confidence and competence in practice (Mentis et al., 2016).

To summarise, learning has been recognised as a relational activity by many (Annan & Priestley, 2018; Bishop, 2019; Bishop et al., 2011; Holley-Boen, 2018). When learning is recognised as relational, the education system needs to reflect the sociocultural rather than monocultural perspective, or at the very least, needs to be critiqued from the social constructionist perspective (A. H. Macfarlane, 2015; S. Macfarlane, 2015).

#### 5.2.2.6. *Collective capacity*

The type of synchronic sensitivity described in the previous section makes collective capacity apparent. The turn towards valuing collective capacity over individual contributions was reported in many different ways by all practitioners. Sonya described successful collaboration as a “*natural way of sharing where everybody participated together*” and as an “*awareness of what everybody brings to the table*” (Sonya, letter 1). Tanya noticed that sharing knowledge can increase collaboration. “*When we share knowledge, the benefit goes beyond what one person can achieve*” (Sonya, letter 2).

Vicky identified that noticing other possibilities informs current ways of working: “*they lead us to examine our processes; which leads to new understanding and new strategies which, in turn, open new possibilities*” (Vicky, letter 2). Vicky is describing learning as a process and as real-life interactions between dedicated people immersed in collective activities where learning is everyone’s job. As Vicky noticed, learning from each other requires a dialogue steeped in a non-judgmental stance. Raelin (2006) refers to the process of generating learning from the activity of people

engaged in real-life situations as leaderful practice. It requires all participants to be prepared to put their own ideas to scrutiny and to be open to something new that may reconstruct the participants' original views (Raelin, 2006). This was how Vicky worked but "*just didn't know how to name it*" (Vicky, letter 2).

Paying attention to collective capacity has highlighted a number of relational ideas such as collective leadership (Larsen & Willert, 2018; Raelin, 2006). They were reflected in voiced practices showing increased awareness of the presence of other team members such as: getting to know and understand each other, commitment to relationships, collective leadership, being personal, being inviting to other people's actions, being supportive, valuing safety, trust, and empathy. Developing a mutual purpose has been found in research to result in clearer actions and in better services than following an action plan (Sharp, 2020). The following quote captures the way HCN practitioners portrayed successful collaboration:

If we invite others to look back at their own practice within groups they might notice that the successful ones were those in which there was a sense of belonging: a place where one could be active and participate in achieving something together. Those types of groups are the ones in which people become engaged, committed, relationally responsible and hence desirous of a continued relationship with the group. (Camargo-Borges, 2015, p. 21)

As indicated in the literature review chapter, when talking about collective capacity in New Zealand, kaupapa Māori offers invaluable resources with its acknowledgement of the relationships that Māori have to one another and the world around them (A. H. Macfarlane et al., 2008). In order to enrich the collaborative practices among various services and practitioners in New Zealand, kaupapa Māori needs to be acknowledged as valued. Acknowledging and embedding kaupapa Māori ways of working is not only about honouring the Tiriti, but enriching collaborative ways of working between services, systems and practitioners.

In this chapter so far the importance of relationships was highlighted, with practices that pay attention to the learning opportunities unfolding in relational processes that can be described as human beings engaging with collective capacity. It was important to consider the kaupapa Māori perspective as a way to enrich collaborative practices and to acknowledge the ethics of responsibility of all New Zealanders in honouring the Tiriti partnership in practice.

### **5.2.3. Understanding**

From the relational perspective, understanding is not a cognitive, mental process occurring in individual minds. For relational constructionists, understanding is a synchronic sensitivity. That is, a carefully tuned responsiveness to each other's actions in a way that invites further action (Gergen, 2009), also referred to as double listening. It requires listening to the content as well as the process. By listening to the process or way of talking, we can recognise the common scenario in which the coordination taking place becomes meaningful (Gergen, 2009).

#### **5.2.3.1. Listening as carefully tuned action**

Practitioners often spoke of a type of listening that Gergen (2009) describes as carefully tuned responsiveness. Rita described it as a *“non-judgemental stance which implies listening to the way people view the world without putting a value on any one view more than another”*. She noticed that this type of listening requires us to temporarily put aside our own values, *“which can be challenging”*. Importantly, she notices that *“It is more likely to happen when people know each other as more than their specific team roles and the more chances people have to share their own experiences”* (Rita, letter 1).

When unpacked, Rita's insights highlight a number of relational directions. Rita suggests moving away from placing judgments on people's worldviews. This alone is not uncommon in professional work. Being inclusive and respectful to a diversity of views is one of the basic principles in all professional practice. Interesting from the relational perspective is Rita's foregrounding the 'getting to know each other through lived experiences and through action', rather than abstract and often idealised roles.

When different lived experiences are narrated, we are more likely to become aware of the link between multiplicity of experiences and the multiplicity of values and beliefs. Firstly, narratives are commonly accepted as open for interpretation and retelling. This openness, in turn, can generate curiosity about ideas other than those directly conveyed. It is this openness to diverse understandings that supports dialogue (McNamee & Moscheta, 2015). Rita's statement relating to non-judgemental stance mirrors her appreciation of these diverse understandings and arguably supports her move towards ontological neutrality.

The act of coming to understand each other through lived experiences is interesting for a specific reason. The social constructionist view of language posits a significant

difference between presenting ideas and values in the context of lived experiences and presenting them as specific abstract positions (McNamee & Moscheta, 2015). Lived experiences (e.g. “something worked in this situation”) invite exploration of ideas, whereas positions (e.g. “it is wrong to ...”) invite defending them.

McNamee (2015) uses the term ‘radical presence’ to describe non-judgemental positioning. With this term, McNamee describes our ability to step outside the community of understanding we bring with us and pay attention to what is generated in the current process of engaging. Rita’s carefully tuned responsiveness nested in a non-judgemental stance captures McNamee’s description of relational stance. It is also similar to Sharp’s (2020) reference to relational collaboration as a tentative dance always adjusting to the next move.

#### 5.2.3.2. *Extending vocabularies*

Rita also noticed that:

*The psychology body of knowledge can support this type of listening because psychologists are interested in how perception works and how people frame their view of the world. Problems arise when professionals tend to hide behind terms and make assumptions that everyone else holds the same view. Very few people take the time to explain what terms like ‘trauma informed’ actually mean. (Rita, letter 1)*

Rita recognised the risk to understanding when the meaning of words is implied. In this statement Rita recognised the need to unpack the meaning of words. In relation to what ‘trauma informed’ means in practice, Rita said that “*when understanding is not achieved everyone is either saying we are doing it (e.g. trauma informed practice) while everyone is doing different things; or people just give up understanding and expect others to ‘wave their magic wand’*” (Rita, letter 2).

The constitutive view of language posits that the language we use holds assumptions that are often taken for granted and not examined. In the case of trauma, they may include beliefs that children who experienced trauma are damaged and can never recover, or that trauma informed practice is highly specialised and not for teachers. Coming to understand the meaning of terms as a team seems a significant point, from that perspective. For example, exploring different views on trauma can help clarify what trauma informed practice means for this specific team of people and their situation. Rita’s statement is another confirmation of the importance of paying attention to what terms and ideas actually



mean in order for the team to achieve a common scenario of understanding where actions can be synchronised (Gergen, 2009).

Sharp (2020) found that discussing different views helps consider different skills, knowledge and ways of working. Sharp also reported that negotiating and coming to understand specific meanings of terms prevents cross-purpose talking that sometimes happens in teams where meanings of key terms are taken for granted and not negotiated.

Rita further refers to the process of coming to understand what actions are going to take place in practice. Unlike agreement, understanding is grounded in dialogic relations. It is through dialogue and what we do together that team members come to know and value what each brings. In order to preserve dialogic potential, Bird (Bird, 2008; Ness & Strong, 2014) suggests words have to retain a level of negotiability. In Rita's example, this might involve considering that the term 'trauma informed' might mean 'a way to understand behaviour' to the psychologist, 'a list of things to do' to the teacher and 'a burden of blame' to the parent in this team. Negotiating what key words mean for their team and their specific context opens space for collective action. Gergen (2009) suggests that this may require creating new vocabularies for better understanding.

#### *5.2.3.3. Non-judgemental stance*

Vicky noticed team members were concerned with being judged, "*but when the plans develop organically, people start trusting each other and start relaxing*" (Vicky, letter 2). She characterised an organic way of working as noticing what works, being open to different ideas without judgement, not slotting people into professional silos, and keeping in mind the fluid nature of the child so that HCN plans are fluid and flexible. Vicky's statement bears similarities to Rita's in that she too highlights that openness to diverse understandings and values is made possible through dialogue.

Vicky also referred to a level of concern. Consequently, all practitioners pay careful attention to trust in their practice. Laura spoke of understanding as inextricably related to trust. "*Trust is possible when there is an understanding of why things are happening, seeing the big picture, when people feel safe and things are working*" (Laura, letter 1). Careful attention to safety and trust have been linked to confidence to act (Sharp, 2020). Sharp (2020) noticed in her research that when team members feel safe they are more likely to discuss disagreements and explore common values

and purpose. This, in turn, opens space for negotiating the meaning of key concepts and joint action.

#### 5.2.3.4. *Fluid and flexible roles*

In speaking of “*appreciating the need to understand privilege and listening for what it is really like living our clients’ lives and needing to be fluid and flexible*” (Rita letter 1), Rita conveyed a sense of responsibility for coming to understand the complexity of her clients’ lives through being immersed in real-life situations and standing alongside them and team members.

HCN practitioners facilitate interprofessional teams working with highly complex situations. Facilitation is described in literature as a way “to help and support people to achieve specific goals, and to enable teams and individuals to analyse, reflect and change their attitudes, behaviours and ways of working” (Sharp, 2020, p. 16). There are many factors influencing HCN teamwork, placing numerous requirements on their role. As evident in the practice examples, HCN practitioners are highly involved in the team relationships, functioning, struggles and successes. It is not difficult to see that the HCN practitioners’ role goes beyond what is typically understood as facilitation. The role is complex as HCN facilitation requires a level of flexibility in how it is defined and implemented. This was a strong theme in practitioners’ narratives.

SENCO and HCN facilitation roles are similar in terms of demands and complexity. Both SENCO and HCN practitioners frequently work with the same group of young people. Unlike other countries, the SENCO role in New Zealand has not been formalised through legislation and policy (Kearney et al., 2017). While this left some gaps in professional support and learning for SENCO, Kearney et al. (2017) found that maintaining a flexible and fluid role description had a potentially significant positive effect. It gave SENCO a level of autonomy. By defining their role themselves to a large degree, SENCO have found higher levels of satisfaction and confidence in carrying out the role. Even more importantly, SENCO have created a space for influencing government policy in relation to inclusive education (Kearney et al., 2017). Kearney et al.’s (2017) study recommended continuing to support flexibility within the SENCO role, “while also providing better structures for ongoing professional learning, collaboration and sharing of practice” (p. 127).

#### 5.2.3.5. *From agency practice to relational responsibility*

The HCN service involves three different ministries and is the most resourced service in the country. Consequently, HCN practitioners deal with many systemic demands, such as those related to political and professional power, service delivery pressures, and accountability especially related to funding and time. Although these demands were not the topics we addressed in the conversations, they were implied in many specific client-related examples.

With these concerns in the background Tanya wondered:

*How a child understands the adults' worries? How is that explained to the child? Does anyone have conversations with the child and explain, for example, - This is what we understand your life has been so far; this is what we know happens when children don't go to school- and so on. Does anyone check if the child has the rationale for having, let alone engaging with, the plan? (Tanya, letter 2)*

Within the HCN process, the child and young person's voice is first considered at the engagement stage when professionals close to the child and whānau talk to them about their aspirations, concerns and goals for the purpose of informing planning to support the child or young person. Whānau engagement is critical to every step of the HCN process and sustained efforts are made to involve the young people as often as possible. Even with a process as robust as HCN, the practitioners' narratives confirm that agencies tend to work more with adults and decisions are often dependent on what adults think. Recent research in the area of natural recovery found daily relational interactions that people engage in to be a powerful platform for positive change (Mudry et al., 2019). Looked at from a relational perspective, the constructs such as aggression and trauma background, for which we use medical diagnoses to explain and understand, derive their meaning from relational processes (Gergen, 2009). At the heart of mental health constructs are relational processes. The importance of paying attention to the role of daily relational patterns in recovery, healing and positive change is increasingly recognised (Dole, 2020; Mudry et al., 2019). This view validates Tanya's concerns.

#### 5.2.3.6. Relational flow

Laura shared a highly complex and problem-saturated situation with the team struggling to work effectively together:

*This changed upon learning that the child's mother was diagnosed with a terminal illness. Suddenly, the team was working towards one goal (how to make things sustainable for the family) with no pockets or silos; with a lot more flexibility; putting aside their earlier differences. Rather than saying 'my job is this and that', people just picked up things to do and ran with it. (Laura, letter 1)*

Laura described it as a “nice flow”. She also noticed that there was a lot more understanding of what agencies can provide. It has also been reported in research that very challenging situations help teams create more open and productive conversations resulting in more positive group dynamics (Holley-Boen, 2018; Madsen, 2016; Sharp, 2018, 2020). Sharp reported that team members found a mutual commitment to effective relationships to be particularly productive in addressing complex problems “where nothing is clear and everything keeps changing” (Sharp, 2020, p.10).

Rita shared a story of a young man whose parents did everything for him to prevent problems (see Story 1).

*There were big plans, lots of strategies, but nothing working until a mentor who shared his interest in filmmaking joined the team. What they did together shifted the parents' understanding of this young man. Without even being asked, the parents started to let him do things which in the past they would have prevented, believing that their son was too anxious to try. (Rita, letter 1)*

Working with uncertain and complex problems has helped team members to pay attention to the learning arising from joint activities. In this example, filmmaking provided a common scenario in which the mentor's and the young man's actions were meaningfully coordinated. Paying attention to this unexpected outcome allowed the change in perception of what the young person could do. The parents' confidence in team learning and decision making grew. Sharp (2018, 2020) refers to this as real-time-learning-in-action. It is easy to see that when practices like this are described as a nice flow, without efforts to record, share and explore them in practice, their benefits can be missed or forgotten.

Vicky gave another example of a team trusting a psychologist's suggestion to employ a young man in a mentor role. This was not a typical choice as he was seen as too young and inexperienced for the complexity of the situation. But "*the mentor, supervised by the psychologist, proved to be just the right person for the student. When the right person is given this role, the benefits often go beyond the individual plan*". In this example, by word of mouth, the mentor continued supporting other students with equal success (Vicky, letter 2). We discussed how this kind of success, which continues to benefit the community, is difficult to capture in individual plans.

As a practitioner, I have witnessed many situations where community benefit of relationships identical to the one Vicky described fall victim to a lack of teacher aide funding or rigid school processes. For Gergen (2009), however, this sharing of meaning from the immediate face-to-face relationship, to the local community, to the surrounding society, is a critical point. He proposes that removing impediments to this way of going on together would ultimately transform the world at large. Gergen refers to this process as relational flow.

This section continued to bring relational practices to light. The practice examples presented in this section contributed a relational flavour to what understanding means. Here, understanding involves careful listening to action in addition to listening to content. It may also require us to consider a new vocabulary, one that better reflects accountability and responsibility without the blame shifting so familiar to practitioners in human services.

#### **5.2.4. Affirmation**

##### **5.2.4.1. Appreciation**

From a relational perspective, an act of affirmation can be seen as the birth of collaboration. As discussed earlier, it is the other person's supplement to an individual's action that gives it meaning. It is only when we pay attention to how your action supplements my action that co-action comes to light (Gergen, 2009). Affirmation can take many forms (smile, nod, a word or a sound), but is essential in collaboration.

In a situation where a teacher aide said something that was undermined by another team member, Laura commented: "*what they say may be against psychological principles, but let's listen to where they are coming from*". Laura further explained that "*unless we do that we're just saying you are wrong*", reflecting her

understanding of the role affirmation plays in successful collaboration (Laura, letter 1). Implied in her openness to “where they are coming from” is the ‘community of understanding’ limits of all knowledge. Equally, implied in her invitation to listening, is the curiosity resulting from the openness to various understandings.

Laura followed this with an example where a team member was described as not professional. She recognised it as a barrier to collaboration and took on the responsibility for action to build up that person’s credibility in the team. Social constructionists see the self as a social dialogic process. Consequently, the term ‘collaborative relationship’ refers to how we orient ourselves to be, act, and respond so the other person shares the engagement and ‘joint action’ (Anderson, 2012b). Anderson (2012b) refers to collaboration as dialogic conversation which involves mutual inquiry, an engaged connection of sharing, exploring, crisscrossing, and weaving of ideas, thoughts, opinions, and feelings through which newness and possibility emerge.

The act of appreciation is a key concern for relational constructionists. This is reflected in the literature related to research methodology (Denzin & Lincoln, 2018; Dole, 2020; Gergen, 2015b; Stavros & Torres, 2005) and practice (Annan & Priestley, 2018; Budd, 2014; Camargo-Borges, 2019; Dole, 2020; Larsen & Willert, 2018; McAdam & Mirza, 2009; Stavros & Torres, 2005). As Dole (2020) argues:

To appreciate is to increase in value. When we take time to notice and inquire into the best of a situation, person, activity, or experience, it helps us increase in value, grow and thrive as individuals, and, more importantly, as a collective group or community. (p. 533)

When adopted as a deliberate stance in practice, appreciation has been shown to make promising changes in mental health practices (Mocheta, 2020). Appreciation can be a powerful primary mode of learning and teaching and a tool for creating a positive school environment where all students thrive (Dole, 2020; Dragonas, 2020; Dragonas et al., 2013). Teaching the vocabulary of appreciation improves student peer relationships. Strategically appreciating students’ strengths and values encourages their participation and engagement (Gergen & Gill, 2020). Similarly, the appreciation of multiple traditions as a conceptual grounding in Gergen’s (2009) ontological neutrality has been the drive behind this study.

#### 5.2.4.2. Confidence resides in relational process

In an example, when Laura noticed that a team member lost confidence after making a mistake, she deliberately referred to this person's plan in a positive way in a group email to communicate "*we all make mistakes, that's ok*" (Laura, letter 2). Laura's email affirmation constituted the act which allowed the coordination to continue for all. Laura felt she had the responsibility to act when she noticed a team member lacking in confidence:

*Confidence is a big contributor to successful collaboration. It isn't written anywhere. It isn't control, but a kind of presence, the ability to go to plan b very quickly. That is the key to holding things together. It's not in my job description or is it?* (Laura, letter1)

What Laura described could be seen as needing to be prepared beyond holding plans, as familiar from earlier examples. Gergen (2009) talks about double listening to the content and to the process. Listening to the process or a way of talking may support recognition of a common scenario in which the co-action taking place becomes meaningful. This may be what Laura referred to as "*being attuned to the team needs*" (letter 1). Furthermore, Laura and Vicky's examples reflect their concern for team members' social standing. Appreciating someone's unique skills, values and contribution to the wider society develops and nurtures relational responsibility (Haslebo, 2020).

Vicky also noticed that at the start of the HCN process there is a lot of anxiety before people get to know each other.

*Only when people get to experience that they are not going to be judged, that there will be support for each other and everyone is doing their best that people start to relax. This is what makes great, outside the box ideas, weird and wonderful ways to support the child happen.*  
(Vicky, letter 1)

Sonya noticed that "*in the context of highly complex situations, professionals face serious obstacles daily and need to be reminded that their efforts are worthwhile. Affirmation can help that, too*" (Sonya, letter 2). Practitioners spoke repeatedly about the need to be flexible and recognise each team's preference for what is good collaboration.

Perhaps unsurprisingly, considering the high complexity and stakes of HCN plans such as returning into the education system, meeting basic human needs and so on, practitioners often talked of team members feeling anxious. In one example, Laura reacted by identifying a person to be a buddy for that team member, which slowly resulted in them becoming a leader, assertive and confident (Laura, letter 1). The same theme continues in the example of a student who was afraid of being judged for wanting to go to church. Laura provided a safe environment for the student to have his say and discover that people didn't judge him, which increased his confidence with a positive impact on teamwork. Both examples happened because of Laura's careful attention and responsiveness to how team members relate to each other and her anticipating the scenario in which a positive shift is made possible.

Vicky shared another moving situation, when:

*A father was asked about the kind of support he needed broke down as 'no one ever asked him that before'. This simple act of caring and affirmation changed the way this parent engaged with the team. He became more cooperative and gave up some of the earlier demands. The teamwork changed from 'we are going to develop plans, meet goals', to – 'we are going to support each other'. (Vicky, letter 2)*

Practitioners' actions in the examples above demonstrate relational responsibility for sustaining the coordination of actions characteristic for successful collaboration described in most conversations. Practitioners often spoke of efforts for sustaining dialogue that reduced the competitiveness and judgemental barriers often present in more individual centred actions.

#### **5.2.5. Appreciative exploration**

As indicated earlier, appreciative exploration offers a challenge. This theme challenges the complacent helplessness most of us feel, when facing views we find ourselves less willing to understand. It offers a tool to confront the acts that seem to defy understanding. In doing so, appreciative exploration becomes "the single most powerful vehicle for securing relational well-being" (Gergen, 2009, p. 168)

##### **5.2.5.1. New horizons**

Laura reported that people find it difficult to view their own perspective as one of many. She noticed that when "*people are aware of their own agendas they bring to the meeting*" teamwork is more constructive and more rewarding (Laura, letter 1).



In one example, a big meeting came to a halt when a young policeman presented a spiritual view of a mental health issue. The practitioner reported that the team members simply did not know how to move on.

*Although he was coming from a very different perspective, the psychiatrist responded by respectfully validating the spiritual perspective in a way that helped the team's understanding. The rest of the team were very 'westernised', and this allowed the team to work together better. (Tanya, letter 1)*

The psychiatrist invited an appreciative exploration of the ways in which the policeman's position was meaningful to the community of understanding he referred to as spirituality. In doing this, he validated this perspective as one of many in a way that helped the team's understanding (Tanya, letter1). This allowed the dialogue to continue and the team to move on together (Gergen, 2009).

When we adopt the view that all values are linked to life experiences and to communities of understanding, it becomes possible to see different and even opposing values are all expressions of what is considered good, rather than fitting neatly into good versus bad hierarchies. Gergen (2009) refers to this view as a multiplicity of goods. When we accept the multiplicity of values and traditions and see them as originating in related communities of understanding, we are more likely to be curious about why and how the presented views make sense within that tradition. Conversely, when we view our values as arising from universally applicable and superior rules, the type of curiosity and appreciative exploration as demonstrated by the psychiatrist will be less likely.

Appreciative exploration is useful in situations where we encounter values and traditions that do not align with ours and we don't know how to respond. It seems increasingly important to learn how to enter conversations that tend to leave us speechless. In practice this is often communicated as frustration, involving statements such as 'there is nothing I can do about this, therefore, it is not my responsibility'. From the relational stance this is where efforts to preserve dialogue are most needed (Gergen, 2009).

Sharp's (2020) observation that dealing with complexity supports action learning may help explain HCN practitioners' validating appreciative exploration. Sharp, too, found that teams that were willing to respectfully pay attention to conversations that

in the past were avoided reported a sense of relief that the issues were now being addressed (Sharp, 2018, 2020).

Similarly, in Holley-Boen's (2018) study, the most challenging situations were reported by professionals supporting students with additional learning needs as the most fulfilling. Holley-Boen introduced the concept of practicing fiercely as a most fulfilling way of working, arising from a dynamic and relational stance.

Another situation with a potential for an impasse was presented by Rita:

*This was related to a situation of a client experiencing pain: occupational therapists focused on home routines while psychologist was far less interested in what occupational therapists suggested (going out, socialising) and advised counselling. People could spend time arguing, but if we spend time considering both of these as needed, we can address both at the same time. (Rita, letter 1)*

Overly focusing on individual professional roles has been known to create negative team dynamics (Sharp, 2020). Rita's suggestion reflects neutrality in that she shifts the thinking away from the binary of right and wrong, to curiosity about how both can be addressed. From a relational perspective, when genuine curiosity about another perspective is possible, so is collaboration (Camargo-Borges, 2019; Greenhalgh & Papoutsi, 2018; McNamee & Moscheta, 2015). Vicky noticed that "*sharing different perspectives invites people to be less precious about their own ideas and can lead to exciting and unexpected developments*" (Vicky, letter 2).

A moving story of a young woman struggling with suicidal ideation is one example:

*The team focused on keeping her alive. Following the HCN plan, the team worked on planning an indefinite protected care arrangement for the young woman. A mental health nurse, however, suggested that it was time to give the young woman some freedom. Initially, the team was taken aback by the suggestion because everyone was so focused on protecting her that "we didn't consider that she might be well enough to have a life". This suggestion changed how everybody was thinking and how the team looked at her and her future. It allowed the team to recognise and address their own anxieties. Now the young woman is independent and getting ready to go to university. (Vicky, letter 1)*

Vicky concluded that this is why HCN is needed: for new solutions and for new thinking.

Tanya shared an example where the practitioner's explanation changed the way the team understood the situation:

*In this example seeking hugs and physical contact by a child was seen as immature and inappropriate behaviour. However, when the attachment perspective was shared it reminded us that there is something else going on for this child. This brought us back to thinking about the reasons we are here in the first place. Often, we get too busy with interventions, how to fix this, how to change the problem behaviour. Sometimes we get too focused on getting things [to] happen that we forget where things have come from. Seeing the situation from different perspectives can bring the team back to what is important – the child.*  
(Tanya, letter 2)

Many stories were shared related to disagreements about specific assessment processes and tools. From the earlier story, presented as Story 2, Rita brought up a situation where a team member requested an FASD assessment for a student with an expectation that this would determine the appropriate interventions.

*We realised that, as a team, we already had the expertise and skills to understand that young person's needs. When everyone shared their understanding, it became very clear that there is no need to subject this young person to a demanding assessment process to get the information we already had. It took a joint commitment to 'what are the questions we want answered?'* (Rita, letter 2)

This is an example of a frequent theme. From a relational perspective, team members whose contributions are marginalised, for example those who are not invited to all meetings, such as teacher aides, can become active and valued contributors to the richness of perspectives and options considered.

Importantly, Rita noticed that *"this process was different to saying 'No, we don't need FASD assessment'. The process the team undertook was inviting to all team members' perspectives"* (Rita, letter 2). The reality, however, is that *"professionals often bring their own agendas to disagreements around diagnosis, which at times requires involvement from higher management"* (Sonya, letter 1).

#### 5.2.5.2. Mutuality

Rita introduced the topic of integrity in a way which may be related to a type of appreciative exploration. She noticed that:

*Integrity isn't present when people, for the sake of being nice in a meeting, agree with everyone against their own beliefs and only say something when it's too late to address it. ... When disagreements are voiced, however, they can be addressed by the team. When integrity is present people make sure that everyone's voice has been heard by checking that everyone's question has been answered and we go back to those with less perceived power. (Rita, letter 1)*

This example is related to a number of frequently discussed themes including trust, honesty, openness, understanding and anxiety. Superficial agreements without real trust create additional anxiety and further erosion of trust (Sharp, 2020). Rita's description of integrity opens space for the mutuality and openness necessary for trust. The implications are that being deliberate about appreciative exploration as an agreed team approach for addressing disagreements would support this type of integrity.

With their concept of multi-actor collaboration, Hovelynck et al. (2018) endorse relational practices of connecting, confronting and committing that are all grounded in mutuality. They define mutuality as the experience that any single actor lacks the authority or expertise to tackle the domain by themselves (Hovelynck et al., 2018).

The above section considered some of the most difficult moments in practice often described as 'brick walls'. It provided examples where dialogue grounded in respect was paramount. Gergen (2009) suggests that finding ways to continue dialogue is most critical when we find it most challenging. In that sense, relational responsibility is a resource for bridging the walls. Next, I present the outcomes and discuss Research Question 2 in relation to the literature. This is followed by a summary section.

## 5.3. Outcomes: Research Question 2

*How can relational orientation support collaboration in HCN practice?*

The outcomes of this research question were collated from two different sources. The main source of information was practitioner feedback sent to me by email (Appendix 9). The second happened unexpectedly. In essence, the outcomes indicated an increased level of confidence about identified valued practices. They were a testimony to an awareness of co-action and co-creational capacity of working together in this way. In our conversations, specific day to day practices surfaced. They were recorded in collaborative maps which can serve as a guide for future desired HCN practice directions. I report on these outcomes in the next three sections. While the previous section presented narratives from a wide range of practitioners' experiences over many years within the HCN sector, the following sections present their personal reflections and experiences of this research process.

### 5.3.1. Practitioner feedback

In order to protect the confidentiality of a small group of practitioners, these outcomes have been presented collectively. In essence, the feedback presented next relates to the following two questions: Have you found our conversations useful in any way? Is there anything different you might be doing in practice as a result?

One practitioner chose to report her feedback in a phone conversation. She specifically reported finding the content in the letters useful in reflecting on both her practice and the research process. This practitioner appreciated the time to focus specifically on collaboration. She also reported especially looking forward to reading other practitioners' examples of successful collaboration. The process made her feel confident about her approach and she will now share her successes with the HCN team without reluctance. The four other practitioners sent their feedback in email form (Appendix 9).

#### 5.3.1.1. Moving on in dialogue

Another practitioner reflected on receiving letters:

*I have looked through the letters, thanks Branka, and am impressed with the depth of thinking that we achieved in our conversations.*

*Unfortunately I was quite busy at the time so probably wasn't able to reflect as fully as I would like after receiving the letters, to be able to say*

*how they impacted directly on my practice, but the themes certainly remain relevant.*

It is not easy to find time for reflection in busy professional work full of competing demands. Narrative letters have been known to have a powerful witnessing effect (Madsen, 2016; Morgan, 2000). Recording and sharing successful practice stories support transmission of organisational knowledge, but also have a positive transformative effect in that new understandings, knowledge and practices are constructed in the process (Madsen, 2016). This practitioner's reference to a deeper level of thinking as a result of collaborative conversations mirrors Gergen's (2009) view of transformation as moving on together in dialogue.

#### *5.3.1.2. Transformation as respect for tradition*

All practitioners appreciated the focus on successes:

*I think reflecting on the good examples of HCN work during our conversations allowed me to identify more details of what did work – e.g. having positive results from that whole class intervention example allowed me to encourage other teams to consider extending interventions beyond the individual child and seeing that these benefit more than just the individual child. I think we don't often get time to reflect fully about the successes. At the final review for the case, I paid more attention to drilling down more with teams about what/why the plan/goals/interventions were successful (rather than the final review just being a tick-box exercise).*

Enquiring into successes gave energy to our conversations. From the relational lens, where language creates rather than reflects reality, the best way to create success is to explore it in dialogue (Camargo-Borges, 2019). Additionally, asking questions about practitioners' day-to-day practice linked success to lived experiences, rather than practitioners' internal characteristics. In other words, thinking "I did this because I am an organised person" internalises the actions. Internalised actions are less likely to be examined. When success becomes more visible as actions, practitioners can enquire into those practices and develop them further. By linking to lived experiences, success was externalised giving practitioners more space for action (White, 1998). New actions make new directions in practice possible.

Highlighting personal motivation and values that underpin actions was critical (Madsen, 2016). Lived experiences sustain multiplicity of values and beliefs. When multiplicity of ideas and beliefs is normalised, curiosity about other ideas and beliefs is more likely. This is why exploring lived experiences invites curiosity while taking up positions invites opposition of ideas (McNamee & Moscheta, 2015). It is this openness to diverse understandings that transforms everyday practice through dialogue (McNamee & Moscheta, 2015). It supported practitioners in exploring alternative understandings and alternative resources within their own experiences.

#### 5.3.1.3. *Relational responsibility*

Focusing on success does not mean that problems are ignored. HCN practitioners face problem-saturated situations related to both their clients' lives and the complexities of competing demands in their practice. In our conversations, obstacles were addressed by exploring what might be possible instead. As one practitioner noted:

*Finding out more about relational practice and is it what we do on a day to day basis allows this to happen ... and in order to grow from this research participation perhaps having some more deliberateness to the approach in our structures and processes at HCN so as to acknowledge this important aspect of the work. I will continue to look at how I can bring this more deliberate aspect into the individual cases.*

The reported commitment to deliberateness could be seen as an articulation of a transformative effect of relational responsibility (Larsen & Willert, 2018; Madsen, 2016; Sharp, 2020). It suggests that this study may empower practitioners and HCN teams to act more relationally in the service of social justice and ethical practice I aspired to at the start of my PhD journey.

The following two statements touch on relational engagement involving reflective exploration of practitioners' own values and ideas about practice:

*I have been reflecting on our conversations, and have made a small change in my practice that has had enormous impact. I have always wanted the service providers, like OTs, SLTs, Psychotherapists etc. to be responsive to the children's needs rather than working to the letter of my instructions. I thought that even though this is something I want, so they can be empowered to do their best work, that they cannot be expected to just know this. I have started to explicitly tell them that they*

*have the freedom to be responsive and I will not micromanage them. The results have seen a higher level of collaboration as they are happy to share their work and ideas. I'm seeing the providers meeting up to work on 'mini-plans' in areas their work intersects, an organic sort of collaboration. And the results ... I'm seeing my clients make gains faster than anticipated.*

Another narrative by a practitioner was appreciative of the opportunities to reflect:

*I enjoyed having the conversations with you and the opportunity to talk about what we do, how we do it and the situation and environment that is needed to allow for successful collaboration. Having opportunities to reflect and think about the work you do is always helpful. Each opportunity makes it easier to break it down to explain it to the next person.*

As it was evident in the practice examples, the commitment to new learning, doing things differently and together was evident in practitioners' reflection on the research process:

*Change is often influenced by a number of factors and changes in the environment. ... I like the challenge of always trying to learn, grow and do better. ... I know this will lead to many conversations in the team and provide us all with an opportunity to reflect and look at next steps or build on.*

This statement brings up again some of the frequent themes:

*Two of the things that stand out for me now are: including the young person in the collaboration, and appreciating that practitioners can have competing motivations and that is important to take time to listen and see where they are coming from, rather than dismissing their ideas and input.*

This quote speaks to being prepared to view different and even incommensurate values as always intelligible within the community of origin (rather than right or wrong). When that is possible so is curiosity about those different values and ways of knowing. In this sense, Gergen's (2009) ontological neutrality offers a way to respectfully generate new ways of knowing, new practices. The new practices then



signify the transformation of community which we always value for its potential for continuing dialogue.

Transformation happens when actions are coordinated in a way that opens a new way of seeing the world and where people are transformed through relational interactions (McNamee & Moscheta, 2015). This section painted ways in which relational orientation maintains respect for the current practice while inviting curiosity about future practices. From the relational perspective, caring for the future of a tradition we value is an expression of respect. When relationally attuned, both respect and transformation are likely to be ongoing. In the last sections of this chapter, this practice orientation is captured in two HCN collaborative maps.

### ***5.3.2. Relational responsibility in action***

The process of preparing a joint conference presentation at the New Zealand 12th Annual Educational Psychology Forum generated outcomes beyond what was expected. The presentation consisted of two sections. In the first half of the presentation, I presented the theoretical and methodological framework of the study. The second half was a PowerPoint (Appendix 9) presentation entirely prepared by the practitioners.

The practitioners' presentation consisted of three case studies illustrating the ways in which relational orientation influenced teamwork. Each case study also introduced the outcomes for the young people and their whānau/families. Most importantly from the perspective of this study, the presentation demonstrated new ways in which relationally oriented practices were being talked about. The presentation conveyed that HCN practitioners were practicing and living the principles they now recognised as relational. This included being transparent, flexible, open to innovation, and success focused. The way all practitioners responded to the idea of jointly working on their component of the presentation without needing to be guided by me was also a valuable outcome that could be interpreted as relational responsibility in action.

The presentation concluded with a list of "HCN relational collaboration takeaways", again independently developed by practitioners. The list of relational takeaways captured authentic voices of practitioners in terms of what relational orientation means for them as a team. Therefore, this needed to be acknowledged as a specific outcome of this study. The HCN Relational Orientation Map 1 (Table 5.6) contains only relational practices chosen by the practitioner.

## 5.4. Principle-Based HCN Relational Orientation Map

Maps (Table 5.6 and 5.7) have been chosen as a way to capture the outcomes because of their metaphorical value (Madsen, 2016). The map metaphor suggests exploration and direction while leaving the destinations open for negotiation. Narrative metaphors have long been used to encourage collaboration. They are not about the confirmation of what is already known, but about expeditions into what is possible for people to know about their lives (White, 2007).

Principles articulate values (Madsen, 2016). The role values play in motivating action has already been discussed in this section. Typical HCN plans start with identifying family/whanau and the child values, aspirations and dreams. This is a good starting point which could be extended with practitioners taking this to the team to negotiate each team's collaborative map and chosen collaboration related values.

For the purpose of organising the practices chosen by the practitioners in their conference presentation into HCN Relational Orientation Map 1, I separated the statements into those reflecting distinct practices and those reflecting principles. For example, "take time to listen to others" was placed into one of the relational orientation practice boxes, while "lead by example" was chosen as a principle because it encompasses a wider variety of practices. However, this is not intended to define the statements in any way. In fact, I invited practitioners to keep changing the map to best reflect the flexible nature of their relational direction.

Thus, as I was working on the way to represent the outcomes of the methodology used to answer Research Question 1, the practitioners had already developed their own relational orientation map. The relational map is an outcome which was generated, analysed and presented by the practitioners. In that sense this map best reflects the outcomes generated in this study. It could be argued that this map captured the essence of this study in terms of the relational shift generated in practice and in terms of the sense of relational responsibility demonstrated by the practitioners.

**Table 5.6.** HCM Relational Orientation Map 1

	Co-action	Understanding	Affirmation	Appreciative Exploration
Relational Orientation	Initial team building is critical; relationships are the key; trust is central; the child's buy-in to the work is half the battle; communicate to the child that their adults are a unified team; flexibility is crucial;  child centred	Failures are a chance to do things differently; take time to listen to others, as they have their own agency/professional motivations, which need to be honoured;  listening to actions and words – double listening	Celebrate successes as a team; openly share information; share resources and networks; share out parts of a bigger task; act out of 'role' often; no naming, blaming or shaming;  collective shift	Be willing to step back from your vision and try someone else's idea; shift mind-sets from "We have to meet goals" to "We will support each other and our child"  appreciation
Resulting Practice Principles	Lead by example to be transparent and collaborative (live it)	Give people permission to be brave and creative	Success breeds success	Organically responsive and developing plans

Table 5.7 shows the additional relational map. This map contains the relational practices identified in conversation 1 and conversation 2, as well as practices and values communicated in practitioner feedback.

**Table 5.7.** HCN Relational Orientation Map 2

	<b>Co-action</b>	<b>Understanding</b>	<b>Affirmation</b>	<b>Appreciative Exploration</b>
<b>Relational Orientation</b>	Commitment to relationships; innovative and mini plans; emerging strategies; possibilities; collective leadership; trust; listening; empathy; being a human being rather than a professional; confidence; being personal; taking time; practicing small talk; self-disclosure;	Inviting of other action; everybody knows; understanding where others are coming from; collective capacity linked to trust; inviting of other peoples' knowledge; values get shared; awareness of what everybody brings; sharing personal experiences; natural way of sharing; values get shared; long term view of goals;	Different ways of working; paying attention to when things are working; responsiveness; being interested curiosity; always adjusting; being fluid, flexible; being explicit; building on success; being supportive; trust strengthens over time; don't rush; feeling safe;	Being prepared for change; people know each other; noticing other possibilities; innovative thinking; empathy becomes visible;  Deliberateness and depth of conversations;
<b>Resulting Practice Principles</b>	Non-judgemental stance which implies listening, different ways of working and process learning and growing	Benefit goes beyond one person	Noticing effects of change	Moving on with opportunities to reflect and a vision of the next steps

Following Gergen's invitation (2009) to build on the wellbeing indicators as a growing vocabulary for productive coordination, I invited the practitioners to continue what they started through their participation in this study. The current maps can be explored for their value in other contexts. Each map should be considered primarily valuable for the context in which it was developed. The stories and practice examples in this chapter captured the values and aspirations practitioners rely on in

their practice. They speak of rich relational sense making inherent in the complex, real-life situations typical for HCN work and valued by HCN practitioners.

## **5.5. Outcome Challenges**

This study explored relational orientation in HCN collaborative practice and was concerned with how specifically focusing on relational process can shape the practice. This study argued that when we suspend the idea of individual self, we are left with a sound view of relational process (co-action) from which the self (relational being), meaning and knowledge (tradition) emerge (Gergen, 2009). Grounded in ontological neutrality and relational responsibility, relational theory can turn to transformation guided by what is valued, rather than focusing on what needs to change. Therefore, this study proposed ways for transforming collaborative practice as a valued tradition. In that sense Gergen's (2009) relational orientation provides a creative account of a relational process and a unique tool for transforming the practice from a position of care.

Relationally sustained, principle-based narrative conversation supported the dialogue with practitioners to engage with successful practice that looked beyond individual actions. Through this process, locally useful collaborative maps were developed for validating and sustaining relational orientation as useful in HCN interprofessional collaboration.

This chapter presented and discussed the outcomes generated to answer two questions. One concerned with what it means and look like to focus on the process of relating in the context of interprofessional collaborative practice and the other with what possibilities this understanding might open in the future.

Firstly, by exploring relational orientation, a number of day-to-day practices such as the importance of knowing each other, having small talk, and being responsive, which in the past could have been taken for granted and ignored, have been identified as successful. Identifying these simple, taken for granted practices as successful could lead to better understanding and building on the successes presented here. This chapter presented a range of themes and practices which became visible only through the relational lens and can be explored more in future research. In that sense, this study invites further interest in better understanding the relational gems hidden in day-to-day practices. Learning that trusting relationships

save time, for example, seems worthy of further exploration. Additionally, how practice can be supported in ways that motivate and energise practitioners is a valid concern in the context of high pressures to work efficiently and ‘fix problems’.

The case of turning “*anger and accusations*” into “*hugs and positive outlook for the future*” (Vicky, letter 1) involves “*keeping an open mind*” and working through difficult conversations to find ways to respectfully consider opposing views is another example of practices deserving more attention. This is significant when we know that through those difficult conversations, team members are reaching new levels of understanding themselves and others (Sharp, 2020) and innovation becomes more likely (Camargo-Borges, 2019).

The practitioners’ examples repeatedly indicated that a strong focus on achieving goals “*doesn’t necessarily mean anything is going to be better for the young person, unless the teamwork is going well*” (Tanya, letter 1). The practitioners in this study identified that being prepared to learn from each other can help find the balance between goal-focused practices and innovation. Perhaps unsurprisingly, collective learning was a strong theme in the practice examples. Paying attention to the process of joint meaning-making was interesting from this perspective. Although this is far from being understood, this study indicates that joint meaning-making does not start on the level of individual action. Practitioners spoke of being interested and responsive; always adjusting; being fluid; and being prepared for change as in a way that communicates anticipation of actions of others. They communicate what I do is always in relation to the actions of others. Gergen’s (2009) concept of being attuned to the actions of others and being able to anticipate the actions of others as a synchronic sensitivity offers tools for better understanding this process, so that successes reported here can be built on.

The practices presented in this chapter were steeped in lived experiences, showing that sharing lived experiences can support coming to understand each other. Coming to understand each other as more than individual roles was a consistent theme in the practice examples. Recognising that sharing lived experiences can help us move away from placing judgements on perspectives that differ from ours, because it naturally encourages curiosity (Camargo-Borges, 2019), is potentially a significant outcome. That the act of sharing lived experience helps avoid judgements by invoking curiosity can also have wider implications on how information is recorded and shared in human services, for example.

One of the outcomes of this study that stands out for me as potentially most practical is the recognition of the need for teams to jointly unpack the meaning of professional terms and words in general. Tapping into the negotiable character of words (Bird, 2008; Ness & Strong, 2014) can be a tool to address the issue of hiding behind professional terms (Rita, letter 2) and cross-purpose talking (Sharp, 2020). More importantly, it could lift the plans HCN teams develop for children and young people to the level of shared understanding, from having plans based on superficial agreements.

Perhaps the outcome most filled with potential for a positive change in collaborative practice is appreciative exploration as a tool for addressing those situations that are categorised as belonging in the 'too hard basket'. Appreciative exploration (Gergen, 2009) is a tool that helps us challenge the view that values arise from universally applicable and superior rules. When we accept the multiplicity of values and traditions as originating in related communities of understanding, we are more likely to be curious about why and how the presented views make sense within that tradition. Finding a respectful way to approach what we want to avoid holds arguably most potential for positive change.

Furthermore, the outcomes acknowledge the team commitment to supporting relational processes in interprofessional collaborative work within the HCN service. The purpose of relational research is to generate new meaning and new realities through dialogue (Bodiford & Camargo-Borges, 2014; McNamee, 2014). Looking differently at established ways of acting is Gergen's (2014) definition of generativity. Generating involves examination of taken for granted assumptions and finding new ways of acting (Camargo-Borges, 2019). In that sense, the maps hold the potential for dialogue and transformation of HCN practices to continue in the hands of the practitioners who made them.

This chapter also documented successful experiences of collaboration. Many positive experiences with an emerging story related to interprofessional collaboration were shared. Given what we know about the positive effects of sharing successful practices, HCN practitioners may want to build on this collection of their practice stories. This could be shared with an audience wider than the HCN service. Success is not what most people associate with highly complex and problem saturated situations. Learning about successful practices in such contexts could potentially benefit other service providers.

Gergen's (2009) relational orientation provided a creative account of a relational process and a unique tool for transforming practice from a position of care. When relating is understood as co-action, who we are as practitioners and our practices become inherently negotiable and therefore open to transformation. With the focus on relational process, this study created a context where different valued views of collaboration can be respectfully heard and coordinated. The most complex situations are often storied as requiring complex, expert solutions. The practitioners' narratives presented in this chapter challenge this notion. Without wanting to undermine the time, effort and resources required for this work, it surprised me how often practitioners spoke of success as simply being relationally present and attuned. The main outcome of this study is presented in the maps capturing the generated relationally oriented practices and a direction for further exploration. They are a testament to a valued way of working which has now been acknowledged by the participating practitioners to be further nurtured and developed.

Next, I turn to framing the conclusion chapter in terms of challenges for further dialogue.



## **Chapter 6.**

### **Concluding Challenges**

Thus, the routes to crossing boundaries are more numerous than the highways we have allowed to divide us. (Gergen, 2009, p. 371)

#### **6.1. Chapter Introduction**

Interprofessional collaboration is likely to be one of the top basic practice principles in most contemporary human services. Two considerations stand out in the literature and research on interprofessional collaboration reviewed in this study. The first consideration concerns the gap between the evidence-based ideal and day-to-day practice realities resulting in a call for more research on the ways in which professionals contribute to interprofessional collaboration (Greenhalgh & Papoutsis, 2018). Specifically, there is an interest in illuminating the fine grain of the how and why of professionals' contributions and insights into the effects of interprofessional collaboration (Greenhalgh & Papoutsis, 2018; Holley-Boen, 2018; Madsen, 2016; Schot et al., 2020; Sharp, 2020).

The second consideration is the way relationships are addressed in the literature. Although relationships are difficult to define and study in an evidence-based environment where agencies face a strong push for measurable outcomes and accountability, the role relationships play is generally well recognised (Glennie, 2007; Hernandez, 2013). Relationships are addressed in the literature in a variety of ways, most of which have in common their focus on individual action. From the individual action focused perspective, professionals are typically expected to contribute to collaboration by bringing a set of individual skills specific to their professional role, reach an agreement on a child or young person's individual plan, and clarify specific steps to achieve predetermined outcomes.

It is important to note that individual accountability and outcome focus are currently important ways around which government work is organised, to ensure funding is used effectively and fairly. Therefore, it was not the intention of this study to criticise this way of working, or replace it. Rather this study followed the call for innovative ways of understanding professional relationships made in many studies cited in the review of collaboration literature. The review of literature suggested two risks of viewing relationships in an individual action-oriented way. The risks were that relationships were seen as either less relevant and getting in the way of evidence-based practice (see examples in Table 3.2), or seen as a separate step on the pathway to successful collaboration (see examples in Table 3.3).

Social constructionists propose that by participating in relationships we co-construct what is real, valued and meaningful (Gergen, 2009). When communities of understanding intersect, new forms of relating and new worlds of meaning become possible (McNamee et al., 2020). To paraphrase Gergen (2009), through understanding the relational process better, the destructive potentials of conflict may be reduced or transformed. In the context of interprofessional collaboration, this study investigated what it means to focus on the process of relating, as this is less clear in the current literature.

I argued in the literature review chapter for a need to explore other ways to account for relationships in collaboration. The key contribution of this study is foregrounding ways to view individual action as inextricably linked to the action of another. Viewing individual action as always in relation to the actions of others is a way to achieve meaningful collaboration and sharing of power. In other words, this study suggests a way to approach collaboration as a relational process.

Positioned in relationally attentive and curiosity-driven narrative conversations, I asked experienced HCN practitioners about collaborative practices that stood out for them as successful and valued. We then jointly explored relational processes that generated the success practitioners valued in their practices. This exploration highlighted the success potential of a range of common and uncommon relational practices. The practitioners talked about a non-judgemental stance, commitment to nurturing relationships, and being fluid and flexible as commonly used everyday practices. This brings up a question of how well those common practices are reflected in practice models and guides, and how much attention they receive in professional supervision. Practices such as positioning oneself first as a human being, double listening, awareness of what everybody brings to collaboration,

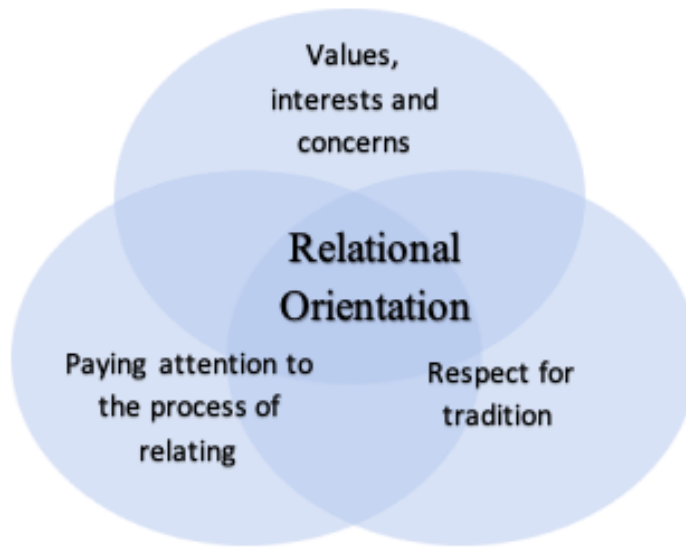
sharing personal experiences, and valuing depth of conversations, became visible through the relational lens.

An unexpected outcome of this study was represented in the actions taken independently by HCN practitioners to define and develop the relational orientation in their practice. Their actions spoke of the effect the research method had on their engagement. This was captured in their conference presentation and illustrated in the HCN Relational Orientation Map 1. Positioned around child-centred work, the conference presentation foregrounded understanding as being attuned to words as well as actions. Paying attention to actions as well as words has implications for team planning situations. Specifically, agreements around plans are recording in words. When accompanying actions such as unspoken expressions of concern in planning meetings are ignored, the team can achieve agreements on paper, but not understanding between people.

Subsequently, the practitioners highlighted an appreciative multi-level sharing, striving to achieve a collective shift in practices such as: openly share information; share resources and networks; share out parts of a bigger task; act out of 'role' often. In the conclusion of their conference presentation, practitioners noted a shift to being "willing to step back from your vision and try someone else's idea", and a change in mind-set from "we have to meet goals" to "we will support each other and our child". These statements indicated a shift towards co-action. In this way the current study was able to capture a co-action attentive, relationally oriented view of collaboration in the two HCN relational orientation maps.

This chapter concludes the thesis by merging the three main conceptual positions of this study. These three positions include: (1) a focus on the process of relating; (2) paying attention to values, interests and concerns of practitioners in their daily practice; and (3) respect for current practice. These aspects of relating energised practitioners and allowed the value of relational orientation to become more visible (Figure 6.11). In the three sections of this chapter, I summarise the outcomes generated in this study, synthesise the main components, link them to practice and research implications, and address the limitations and recommendations for further research, before concluding the thesis with a final reflection.

**Figure 6.11.** Relational orientation



## **6.2. Implications for Methodology and Practice**

I have argued in this thesis that the social constructionist and specifically relational orientation offers a strong platform for enriching collaborative practices. The explosion of interest in relational practices and research is well documented in the most recent *SAGE Handbook of Social Constructionist Practice* (McNamee et al., 2020). The handbook demonstrates a variety of innovative ways in which relational ideas can enrich practices in education, health, community and organisational work. This study contributes to this scholarship by bringing relational ideas into intersectoral government work.

Specifically, it questions the emphasis on the actions of individual professionals for understanding relationships in the context of interprofessional collaboration. Regardless of how effective, well-planned and evidence-based individual actions are, focusing on individual actions tends to fix our concern with patterned practices. Organising collaborative work around fixed, well-defined practices may not prepare us sufficiently for the demands of the complex, ill-defined, and constantly changing practice context because it pays insufficient attention to the processes between people.

### **6.2.1. Values, interests and concerns**

Traditional, individualistic approaches have long been criticised for insufficiently attending to meaningful concern with wellbeing and “only marginally connected to the real struggles and challenges of contemporary existence” (Kirschner & Martin, 2013, p. 15). As a practitioner in human services, I share one of the HCN practitioners’ concerns with “*what it really means to live our clients’ lives and what is the young person’s understanding of service provisions*” (Rita, letter 1). Related concerns with equity, social justice and systemic racism, among others, point to the need to examine the values underpinning practices in human services.

The drive to highlight values, integral to social constructionist and relational positioning, encouraged me to be transparent about what motivated my commitment to the study. Additionally, it guided the focus on valued practices in the research process. The focus on valued practices also made the inquiry process purposeful and passionate for the practitioners (Gergen, 2014). This passion helped transform the typical HCN problem-saturated context, briefly illustrated with stories 1 and 2 presented in the outcomes chapter, into energising, deep motivation to act in the service of another.

Social constructionists state that what we consider valuable emerges out of relational traditions or communities of understanding. Therefore, all knowledge on which practices are built carries values and concerns cherished by those traditions (Gergen, 2015b; Gergen & Gergen, 2003; McNamee et al., 2020). This view of knowledge has direct and far-reaching implications for how we use professional practices and tools. It clarifies that every tool we use in practice (e.g. assessment and evaluation tools, practice models) extends some and undermines other values. This, in turn, sheds light on the question of what is being favoured and who is left in shadows (Gergen, 2014).

In other words, when we accept that our practice tools carry the values of the traditions they arose from, both professionals and researchers have an ethical responsibility to understand those values and be explicit about their effects. In that sense, the current research addressed the questions of who else can have a voice on what gets locally accepted as valued knowledge and what kind of relationships get constructed in collaborative practice (McNamee, 2014). This approach then provided an alternative to evaluating the current collaborative practice against the universally held, value-free standards and turned to practitioners for practice-based evidence.

When all practices are viewed as nothing more than a set of resources valuable for a specific time and place, then curiosity about multiple practices becomes possible. Instead of one best practice, we become curious about many other practices (Gergen, 2020). It was interesting to note that deliberately seeking new ways of working was consistently conveyed by all practitioners. Based on the innovation-seeking attitude captured in the outcomes chapter, it could be argued that experienced and motivated practitioners, faced with complexity, naturally find that seeking innovation in day-to-day practice experiences is far more effective and rewarding than adhering to a strictly defined role or way of working. The resulting openness became a conceptual position and a tool for extending transformation. In other words, this attitude made the traditions practitioners bring to collaboration more open to change.

### **6.2.2. *Process of relating***

By adopting Gergen's (2009) relational theory, this study suspended the centrality of individual action. By extension, the centrality of knowledge as situated in individual minds was suspended in order to explore the process of relating instead. In doing so, this study contributed to a shift in focus from individual action to co-action in both the methodology used and the collaborative practices explored.

#### **6.2.2.1. *Process oriented method***

When meaning is understood as relational, research design needs to reflect the interest in the process of becoming relationally responsive, relationally responsible and connected to people's real-life experiences (McNamee & Moscheta, 2015). The aim of the method was to highlight the relational processes involved in jointly generating locally useful knowledge in the context of complex real-life situations. In that sense, this study joins recent efforts to highlight new resources created in joint sensemaking (Larsen & Willert, 2018; Sharp, 2020). What becomes clearer in this research orientation is that change is generated when conversations change (Gergen, 2020). In the case of this study, there was respect (based on what practitioners identified as valued), curiosity (based on the principles of narrative theory), and joint sense making (co-action attentive). This resulted in a relational shift in practice which generated a locally relevant relational orientation in HCN practice. Or simply, in a dialogue with a researcher, HCN practitioners explored new ideas and concepts to consider new ways of orienting their practices.

The constitutive view of language suggests that by narrating practice experiences, we become conscious of the way the principles and values are enacted (Freedman

& Combs, 2020; White, 2007). White and Epston's (1990) narrative theory was a conceptual positioning that provided basic principles to plan and organise the method of engaging with practitioners in curiosity-driven conversations relevant to them (Denborough, 2001; Epston, 2001). My conversations with practitioners focused on expanding the limits of what is spoken about as *valued practice*. In research, this perspective invites researchers and participants to be equally engaged in the process and become co-authors of new narratives. The current study attempted to achieve this by inviting practitioners experienced in collaboration to explore their experiences and knowledge as the driving force for change.

I argued in the methodology chapter that the structure that makes White and Epston's (1990) narrative theory a good methodological tool also makes it vulnerable to individualistic interpretations. Therefore, a relationally sustained narrative conversation method was developed and employed.

After practitioners spoke about their valued practices in the first conversation, I shared the relational perspective on collaborative practice as one of many ways for exploring HCN practice chosen for this study. The transparency about conceptual grounds provided a shared direction for our second conversations. In the conversations that followed, we became co-researchers and engaged in dialogue about the relational potential in their practice. Similar to Larsen and Willert (2018), we jointly explored ways in which practitioners and researchers can engage in collaborative, reflective dialogue to nurture and develop practice. While the shared conceptual understanding provided the direction in the second conversation, the practitioners' valued, real-life practice experiences shaped the conversational meaning-making, which generated the relational orientation in their practice as their desired destination (Madsen, 2016).

#### *6.2.2.2. Process oriented practices*

Relational processes felt alive and present in the practice examples. There was little sense of forgetting suggested by the narrative conversations framework described in the methodology chapter. The conversational meaning-making validated the day-to-day practices and the relational orientation as something that needs recognition and nurturing to be developed to its full potential.

All practitioners embraced having the time to pay attention to success in general and they specifically spoke about effective, positive relationships. HCN Relational Orientation Map 2, summarises the relational orientation in HCN practice generated

in the dialogue involving the conversations, narrative letters and email exchanges. Throughout both conversations, practitioners demonstrated their commitment to keep the change going, be fluid and flexible, have mini-plans, and pay attention to emerging strategies and collective learning. This interest in ongoing change and learning was steeped in deeply human qualities of empathy, trust, support, being personal, having small-talk, sharing values, and disclosure. The relational lens further shows that by fully fixing the meaning of professional terms, they lose a sense of negotiability. However, when we are attentive to the negotiable character of words, our actions become more negotiable. In other words, when we can understand actions as inextricably linked to the actions of others and dialogic, ways of working become more open to negotiation. Next, practitioners demonstrated a type of care that goes beyond one person, with practices focused on understanding where others are coming from and tapping into collective capacity, shared knowledge, values and core attitudes, such as everybody knows.

It has been suggested that the way the world is changing makes new demands on practice and research (Gergen, 2015b; Greenhalgh & Papoutsis, 2018; McNamee, 2014; J. Moore, 2005). Professionals are managing complex, ambiguous and ill-defined situations daily. The gap between evidence-based ideals and unpredictable, constantly changing practice contexts has been demonstrated in previous research (Greenhalgh & Papoutsis, 2018; Madsen, 2016; Schot et al., 2020; Sharp, 2020). Earlier research demonstrated many relational resources in day-to-day practices (Holley-Boen, 2018; Sharp, 2020). This study confirmed the earlier findings by employing a method which highlighted the relational knowledge aiming to tap into “continuous enrichment in capacities for skilful innovation” (Gergen, 2014, p. 306). In other words, we no longer need to search for what is wrong with current practices and what needs to change. Practice becomes a process of ongoing transformation through dialogue.

This study employed a pragmatic approach to research which was put into practice through a relationally sustained narrative conversation method, as described above. It can be argued that this approach can be a useful tool for other contexts where people come together to creatively generate innovative solutions in complex situations, where curiosity about other ways of finding solutions and ongoing learning is possible, and where quality relationships are important. This includes but should not be limited to learning organisations and human services.



### **6.2.3. Respect for tradition**

Lastly, this study argues that the most critical contribution of relational theory is not the alternative view of human action, but its grounding in ontological neutrality. The significant promise of this new conceptual tool could be more explicitly explored in research. In the current global social and economic context of growing divisions, reduced funding and limited resourcing, there are good reasons for exploring different resources. This study adopted a respectful, non-questioning approach in transforming a practice tradition.

Adopting an approach that was respectful to the current practices had a liberating effect on practitioners' engagement. It alleviated the concerns with drifting away from the mandated practices and risking 'going in the wrong direction' which, in turn, strengthened the innovation seeking attitude. It was interesting to note that practitioners referred to their current practice model and their struggle with the systemic demands in an affirming way. Individualistic, rational or problem-focused approaches would have risked undermining the passion and commitment HCN practitioners clearly hold for their practice (Camargo-Borges, 2019).

As indicated earlier, a practice approach doesn't have to be labelled wrong to warrant exploration and change. Relational research approaches make the traditional focus on 'what is wrong and therefore needs changing' redundant, because openness to change is integral to the relational, 'act and supplement' view of meaning making (Gergen, 2009). This openness allowed us to consider the practice beyond what is wrong and into 'what can be' (Camargo-Borges, 2019).

Our conversations concluded with a sense of *deliberateness* in noticing opportunities for change with a vision of the future in mind. Like the practitioners in Holley-Boen's (2018) and the leaders in Sharp's (2018, 2020) research, practitioners conveyed an appreciation for collaborative learning which enhanced their relational responsiveness. This was best enacted in the coordination needed to develop the conference presentation. In that sense this study has achieved the aim to nurture joint responsibility for dialogue about the type of collaboration best suited for each unique circumstance (Gergen, 2020).

Despite the fact that this study provided little opportunity to nurture and develop collective capacity, the practitioners in this study found a way to come together and collectively develop a conference presentation which later became an outcome of the study. This unexpected outcome demonstrated that relational approaches are

effective ways to tap into the potential of collective capacity (Raelin, 2006; Sharp, 2020).

Change in practice is too often linked to opposition of ideas with implied hierarchies resulting in clashes of approaches. Relational theory maintains that who we are originates in the spaces between, in the dialogue that is only possible when there is openness to change. The very purpose of dialogue, from that perspective, is curiosity about the other – ways of being and doing. When we focus on co-action, every conversation invites transformation.

Individualistic orientation in practice depends to a large degree on unique skills that define each role and contribution a professional brings to collaboration. Role boundaries and differences between people are set to be protected in that process. Co-action oriented practices, on the other hand, support professionals to become more curious about what brings them together, rather than what sets them apart. The shift in emphasis towards others was evident in many examples practitioners raised in our conversations. The examples include respectfully paying attention to other people's perspectives, rather than just noticing them, achieving shared understanding, the interest in collective learning and so on.

Put simply, to make sense of the world we need each other. My thoughts hold no meaning until I share them with you. It is in how we listen to each other in the process of jointly coordinating our actions that meaning slowly emerges. What we agree to call new knowledge does not erase what each brought to the process. The traditions each brings to collaboration have value in nurturing the curiosity about other traditions and therefore the inherent capacity for transformation. This curiosity also generates joint responsibility for maintaining the dialogue (Gergen, 2009).

### **6.3. Limitations and Recommendations for Further Study**

Interprofessional collaboration is a vast area of research and practice. This study explored it from a very specific lens. In that sense, it was only able to look at a limited number of factors relevant to interprofessional collaboration.

Due to time limitations, only professionals have participated in this study. This significantly restricted the perspectives considered. As a practitioner often working in interprofessional teams, I could relate to the process personally, which made access

to participants easier. However, since HCN collaboration includes young people and their whānau, the study was limited because of their absence.

As noted earlier, no practitioners identified as Māori. Lacking the Māori perspective on collaboration was a serious limitation for two reasons. As indicated throughout the thesis, the Māori worldview has been recognised as holding a rich relational potential. Exploring that potential in dialogue with Māori colleagues would have enriched this study with an invaluable perspective. Secondly, it was important to include Māori perspectives and voices in the context of HCN work because of the ways Māori are represented in the human services system and the Tiriti obligations, as discussed. It is also possible that this reflects a more systemic limitation. A study that includes Māori voices would be more relevant to the bicultural partnership context of New Zealand.

The method used in this study ventured into less-explored ways to highlight the process of relating. Specific attention was given to shifting the focus from a method-and-tool-driven to dialogue-driven research method. I attempted to shift the focus from researcher-driven data collection to co-action with practitioners, and from an individualistic approach to data analysis to coordination of actions with practitioners. This was a response to the calls for innovation, detailed in the literature review chapter, in how relationships are accounted for in research that would benefit from additional consideration and exploration.

From a relational lens point of view, the limitation of any study is the extent to which its completion signifies the end of dialogue. Although I have invited the HCN practitioners to work together on further developing and publishing a collection of successful HCN stories as a way to continue the dialogue, I am left wondering about the ways in which the PhD process itself could highlight the importance of what happens next in terms of continuation of dialogue.

Within the limited scope of this thesis I had to restrict the number of practitioners' stories presented. However, considering that research and literature have demonstrated that acknowledging and sharing successful stories can have a significant positive organisational effect (Madsen, 2016), it becomes interesting to consider how many untold stories practitioners have and what possibilities for positive change are kept hidden in them. Organisational research has further demonstrated that organisational life is constructed in dialogue about practice (Larsen & Willert, 2018). In that sense, it would be interesting to learn if, and how,

the practitioners' perceptions of the HCN unit, as an organisation, has shifted as a result of their participation. However, that goes beyond the scope of this study and may be addressed by further research.

## **6.4. Relational Orientation**

One thing that stands out from the literature on relational being (Gergen, 2009) is that the dialogue about it is growing. Relational research has started to develop a vocabulary that one day may be rich enough and a conceptual position inclusive enough to reach out of our body and mind. Whether it is referred to as 'relational consciousness' and 'relational language making' (Bird, 2008; Ness & Strong, 2014), 'radical presence' (McNamee, 2015), 'recurrent relational interaction that people engage in' (Mudry et al., 2019), 'tentative dance always adjusting to the next move' (Sharp, 2020), or 'dialogic process' (Anderson, 2020), all authors work on expanding the vocabulary of relating. This thesis contributes to the tradition of relational being by adding to the relational language in a field where successful interprofessional collaboration is critical.

Gergen's (2009) relational theory is captured in this study as co-action focused practices in the context of HCN interprofessional collaboration, and distinct from traditional, individual-action based practices. Sharing this distinction with the practitioners allowed for a respectful, curiosity led dialogue out of which a clear relational orientation in HCN practice emerged, answering both research questions.

This exploration highlighted the success potential of a range of practices. Some practices, such as having small talk, being responsive, and positioning yourself as more than the professional role, are considered common but not sufficiently recognised as successful strategies. Other practices only became visible through the relational lens. These included innovation-seeking attitude, collective learning, double listening, tapping into negotiability of words, and many others. A relational strategy that stands out, appreciative exploration, offers a way to address the situations frequently set aside in the too hard basket. Put simply, relational shift shows what we can do together which we cannot do alone.

In a theory-supported dialogue that was respectful to the current practice, relational practices were engaged with, afforded validity and developed further. Thus, this study offers an example of how engaging with effective relational practices in a

curiosity-led dialogue can become embedded into the process of learning and service development for HCN and potentially other human services.

Locally useful knowledge about practice was generated in joint sense making and captured in principle-based HCN relational orientation maps. The HCN practitioners identified the relational orientation as a useful resource in their practice and were motivated to engage with that aspect of their practice. This can be considered for other interprofessional groups in their contexts for further research. Practitioners who find the method useful will have another resource to use in the context that is commonly referred to as requiring everything we have.

While the use of relational theory is new to the collaboration between professionals, this study demonstrated that relational orientation is already valued by experienced practitioners. What is missing is a shift in focus to engage with those practices more strategically. From a relational position, the most important job for any interprofessional team is to ensure the potential for dialogue to continue, especially when that is most difficult.

Ki te kotahi te kakaho ka whati, Ki te kapuia e kore e whati  
(Alone we can be broken. Standing together, we are invincible.)

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# Appendices

## Appendix 1. Manager Information Sheet

### INFORMATION SHEET FOR MANAGERS

Dear HCN Manager,

My name is Branka Vasilic and I have been a psychologist with the Ministry of Education, Special Education, for almost 20 years. With this PhD study I hope to make a practical contribution to the field of interprofessional collaboration. With this information sheet I am asking for your permission to invite 10 to 20 HCN practitioners to join me in investigating practitioners' perspective of the value of relational flow in successful interprofessional collaborative practice.

#### **Project Procedures**

Over a three month period, I will have three one-hour individual conversations with the practitioners using a narrative technique. The aim of the narrative conversation process is to collect successful collaboration experiences which will form the basis for us to together explore relational flow and find new possibilities and ways of working together differently.

In the three conversations we will (a) explore examples of successful collaboration experiences; (b) find and analyse examples of relational flow within those experiences; (c) explore the potential of relational flow for improving collaboration. In the end, I will ask the participants to complete a 20 minute questionnaire to evaluate the usefulness of this process in their practice.

#### *What is Relational Flow*

Kenneth Gergen's (2009) relational theory offers a major shift in understanding and practising collaboration. Rather than focusing on content and individual action, Gergen suggests to focus on process and co-action. The power of this shift is in understanding and

keeping in mind that co-action always occurs within a certain tradition (set of beliefs, convention or historical context). According to Gergen, this small but profound insight opens up possibilities for transforming and enriching tradition. It is important to note that the emphasis here is on being open. Relating to each other in a way that is open to transforming tradition, is what Gergen calls Relational Flow. Relational theory suggests that being open to transforming tradition holds limitless possibilities for improving collaboration and the way human beings relate to each other in general. It has been chosen because it is recent, frame shifting and full of unexplored potential.

The main method of data collection will take form of videoconferencing (Skype or ZOOM) with the additional questionnaire for feedback.

**Expected outcomes:**

1. Successful relational flow based ways of working identified.
2. Practitioners stories of successful collaboration collated and ready to share with other practitioners interested in collaborative practice.
3. Narrative conversations as a technique and relational flow as a critical component of collaborative practice evaluated as a way of improving collaborative practice.

At this point in the application process, the Massey University Human Ethics Committee requires your written

- permission to access minimum 10 and maximum 20 HCN practitioners and the information they will share with me;
- approval for participants to have the option of having the video-conference in work time at the office or their own home and
- permission for the HCN Unit to be identified or identifiable as the practitioners' work context.

I sincerely appreciate the HCN practitioners' contribution to the lives of the children they work with and am very excited and grateful to be able to venture into this joint journey. I really believe that together we can make a meaningful contribution to the field of interprofessional collaboration and, most importantly, lives of the children we serve.

**Data Management**

All information, videoconference calls and the feedback, will be treated as highly confidential and will be kept in a password protected computer in my home. No identifying information will be recorded post the Consent Form procedure, unless the practitioners

choose otherwise. Consent Forms will be kept in a locked cabinet in my home. All data will be safely destroyed by my supervisors after five years.

### **Participant's Rights**

Participants can

- withdraw from participation at any point during data collection;
- refuse to answer any question;
- review the recordings, and a summary of the information will be sent to them after each of the three narrative conversations and at the end of the study;
- provide information on the understanding that their names will not be used unless they give permission to the researcher.

Please feel free to contact me or any of my supervisors if you have any questions about the study.

My supervisors are Mandia Mentis ([M.Mentis@massey.ac.nz](mailto:M.Mentis@massey.ac.nz))

Vijaya Dharan ([V.M.Dharan@massey.ac.nz](mailto:V.M.Dharan@massey.ac.nz))

Julia Budd ([J.M.Budd@massey.ac.nz](mailto:J.M.Budd@massey.ac.nz))

Thank you for your time

Branka Vasilic ([Branka.Vasilic.1@uni.massey.ac.nz](mailto:Branka.Vasilic.1@uni.massey.ac.nz))

This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application \_\_/\_\_ (*insert application number*). If you have any concerns about the conduct of this research, please contact Mr Jeremy Hubbard, Chair, Massey University Human Ethics Committee: Southern A, telephone 04 801 5799 x 63487, email [humanethicsoutha@massey.ac.nz](mailto:humanethicsoutha@massey.ac.nz).

Gergen, K. J. (2009). *Relational being: beyond self and community*. Oxford; New York: Oxford University Press.



## Appendix 2. Email After Meeting with Manager

Hello [REDACTED]

It was such a privilege and a pleasure talking to you and Nathan last week. It means a lot to me that someone with your level of expertise and experience in interprofessional collaboration is showing an interest and can see the purpose in conducting the study. Your recognition of the purpose in paying attention to how professionals relate to each other in teamwork was especially rewarding. I truly believe that relational theory has a lot to offer to improving and enriching collaborative practice.

Soon after our meeting I was informed that the Human Ethics Committee has provisionally approved the application. This is an important step forward. In order to get the final approval, the committee requires the following:

- Your written permission to access the participants and the information they will share with me;
- Your approval for participants to have the option of having the video-conference in work time at the office or their own home and
- Your permission for the HCN Unit to be identified as the practitioners' work context.

I sincerely appreciate the HCN practitioners' contribution to the lives of the children we work with and am very excited and grateful to be able to venture into this joint journey. I really believe that together we can make a meaningful contribution to the field of interprofessional collaboration and, most importantly, lives of the children we serve.

Thank you for your support

Kind regards

Branka

PS

I am thankful for the trust you have shown me by offering to share the HCN Unit data on collaboration to support researcher understanding of the context. After careful consideration I have come to realise that doing this might, for some people, place the integrity of the study at risk. It is essential for the study to be able confidently claim to represent the participants' perceptions. Protecting the integrity of the study might be more beneficial than researcher being more informed. This is why I have safely shredded the document in the office.

## **Appendix 3. Participant Information Sheet**

### **INFORMATION SHEET FOR PARTICIPANTS**

Dear HCN practitioner,

My name is Branka Vasilic and I have been a psychologist with the Ministry of Education, Special Education, for almost 20 years. With this PhD study I hope to make a practical contribution to the field of interprofessional collaboration. This information sheet is an invitation to join me in investigating HCN practitioners' perspective of the value of relational flow in successful interprofessional collaborative practice.

#### *What is Relational Flow*

Kenneth Gergen's (2009) relational theory offers a major shift in understanding and practising collaboration. Rather than focusing on the content and individual action, Gergen suggests to focus on the process and co-action. The power of this shift is in understanding and keeping in mind that co-action always occurs within a certain tradition (set of beliefs, convention or historical context). According to Gergen, this small but profound insight opens up possibilities for transforming and enriching tradition. It is important to note that the emphasis here is on being open. Relating to each other in a way that is open to transforming tradition, is what Gergen calls Relational Flow. Relational theory suggests that being open to transforming tradition holds limitless possibilities for improving collaboration and the way human beings relate to each other in general. It has been chosen because it is recent, frame shifting and full of unexplored potential.

#### **Project Procedures**

Over a three month period, we will have three one-hour conversations using a narrative technique. The aim of the narrative conversation process is to collect successful collaboration experiences which will form the basis for us to together explore relational flow and find new possibilities and ways of working together differently.

In the three conversations we will (a) explore examples of successful collaboration experiences; (b) find and analyse examples of relational flow within those experiences; (c) explore the potential of relational flow for improving collaboration. In the end, I will ask you

to complete a 20 minute questionnaire to evaluate the usefulness of this process in your practice.

The main method of data collection will take form of videoconferencing (Skype or ZOOM) with the additional questionnaire for feedback.

The HCN National Manager, Bernadette Anne has given her consent for your participation in work time and to take the videoconference calls from the comfort of your own home, if that is what you would prefer. It is important that you understand that your participation is completely voluntary. The first 10-20 HCN practitioners who return the Consent Forms will be welcomed to take part in the study.

**Expected outcomes:**

1. Successful relational flow based ways of working identified.
2. Practitioners stories of successful collaboration collated and ready to share with other practitioners interested in collaborative practice.
3. Narrative conversations as a technique and relational flow as a critical component of collaborative practice evaluated as a way of improving collaborative practice.

**Data Management**

All information, videoconference calls and your feedback, will be treated as highly confidential and will be kept in a password protected computer in my home. No identifying information will be recorded post the Consent Form procedure, unless you choose otherwise. Consent Forms will be kept in a locked cabinet in my home. All data will be safely destroyed by my supervisors after five years.

**Participant's Rights**

If you agree to participate you can

- withdraw from participation at any point during data collection;
- refuse to answer any question;
- review the recordings, and a summary of the information will be sent to you after each of the three narrative conversations and at the end of the study;
- provide information on the understanding that you name will not be used unless you give permission to the researcher.

Please feel free to contact me or any of my supervisors if you have any questions about the study.

My supervisors are Mandia Mentis ([M.Mentis@massey.ac.nz](mailto:M.Mentis@massey.ac.nz))

Vijaya Dharan ([V.M.Dharan@massey.ac.nz](mailto:V.M.Dharan@massey.ac.nz))

Julia Budd ([J.M.Budd@massey.ac.nz](mailto:J.M.Budd@massey.ac.nz))

Thank you for your time

Branka Vasilic ([Branka.Vasilic.1@uni.massey.ac.nz](mailto:Branka.Vasilic.1@uni.massey.ac.nz))

***This project has been reviewed and approved by the Massey University Human Ethics Committee: Southern A, Application 16/58. If you have any concerns about the conduct of this research, please contact Mr Jeremy Hubbard, Chair, Massey University Human Ethics Committee: Southern A, telephone 04 801 5799 x 63487, email [humanethicsoutha@massey.ac.nz](mailto:humanethicsoutha@massey.ac.nz).***

Gergen, K. J. (2009). *Relational being: beyond self and community*. Oxford; New York: Oxford University Press.

## Appendix 4. Ethics Committee Approval Letter



Date: 23 November 2016

Dear Branka Vasilic

Re: Ethics Notification - SOA 16/58 - Evaluating a Narrative Approach to Collaborative Practice

**This study aims to evaluate a narrative approach to improving interprofessional collaboration in the context of complex teamwork by highlighting successful stories and exploring relational flow.**

Thank you for the above application that was considered by the Massey University Human Ethics

Approval is for three years. If this project has not been completed within three years from the date of this letter, reapproval must be requested.

If the nature, content, location, procedures or personnel of your approved application change, please advise the Secretary of the Committee.

Yours sincerely

Dr Brian Finch  
Chair, Human Ethics Chairs' Committee and Director (Research Ethics)

## Appendix 5. Proposed Questions

Stage	Process	Outcome
Question 1  <b>In what ways is relational flow present in effective interprofessional practice?</b>	<b>1a - Conversation 1</b>  Collection of successful collaboration stories from practitioners. <b>Possible questions:</b> What stands out for you/ what is important to you in successful interprofessional collaboration?  Tell me examples of successful collaboration in your experience. What made it successful?  What were the effects on ... social inclusion What are the effects of ...  <b>Deconstructing conversations</b> What possibilities are related to this experience? Naming and externalising if applicable. What would you prefer to have in your collaboration practice?	Moving away from thin problem stories, making collaboration stories rich and complex.  Successful relational flow based ways of working identified.
	<b>1b – Pre conversation 2 analysis</b>  Following the conversations, introduction of the Digrama with information about Relational Research and about Relational Orientation in IPC.  <b>Conversation 2</b> The researcher will select the relational flow based experiences to unpack with the practitioners in the conversation 2 as exceptional experiences. <b>Possible questions:</b> What does RF look like, what are the effects of RF on practice; what are the effects of practice on RF; <b>Meaning making:</b> What does it say about you as a team member that you took this step? Why was this important?	Practitioners stories of collaboration collated and ready to share with other practitioners interested in collaborative practice.  What gives you joy, meaning, purpose?

	<p>If this was a step towards something specific, what would that something be?</p> <p>Can you tell me what you have learnt?</p> <p>How is that important?</p> <p>What could the meaning of this be for you?</p> <p>What was that like for you?</p>	
	<p>What supports relational flow, what might be the obstacles?</p> <p>This conversation is future oriented and will identify possible new ways of working.</p> <p>Possible questions:</p> <p>What might this mean in practice for the practitioner, for the clients for the practice?</p>	

<p>Question 2</p> <p><b>How useful are narrative conversations and relational flow analysis for practitioners in reflecting on and changing their professional practice?</b></p>	<p><b>Questionnaire</b></p> <p>How useful was the process of narrative conversations?</p> <p>How useful was the process of identifying the relational flow in collaboration?</p>	<p>Narrative conversations as a technique and relational flow as a critical component of collaborative practice evaluated as a way of improving collaborative practice.</p>
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## Appendix 6. Narrative Letter Writing with Dr McMenamin

*Firstly, it was a privilege to talk to you about collaborative practice. I have been looking forward to doing this study for almost a decade and am now very excited about working together to make a difference, however small, in the practice of interprofessional collaboration.*

*Here is my summary of what you said. Please add and change this as you see appropriate. It is important to me that this reflects your views. You will find some questions about situations I would like us to unpack more when we have our next conversation. I want to emphasise here that I genuinely don't know the answers to these questions and hope that we can start exploring them together.*

This is my summary of what you said:

- **At the start of the process you focus on building relationships.** In your experience collaboration is successful when professional roles are clear, ground rules are understood, practitioners make sure people stay engaged. People are likely to stay engaged when they see results.
  - *When the focus on relationships was successful, what difference did that make to the existing relationships between professionals? how did that manifest itself? How did professionals engage with it?*
- HCN coordinators need to be mindful of the perception of power assigned to them by team members.
  - *What practices position all those involved as able to speak and be heard? What practices make it more likely for people to feel that alternative options will find a place in the conversation?*
- **Professionals need to recognise what each team's preferences for collaboration are.** Some teams prefer working towards clear goals, some prefer to know more about the situation, so we need to be somewhat flexible.
  - *How do we discern what a team prefers?*
- **You found that "sometimes attending meetings and collaborating are more important than what is happening in the way of goal attainment".** An example of this was a young man who was absconding from residence. Some agencies took his disengagement as a reason to stop working with him. HCN continued to meet for another nine months. You continued to bring the team together to find out where he was, where things were up to and prepare for what could happen if and when he came back. **Although HCN goals were not relevant any more, "this way we could make things happen fast for him on return".** You noticed that other agencies are not able to be as flexible. The **professional respect** which HCN practitioners often have helps in making this happen. **HCN practitioners have the framework that helps you do that.**
  - *I see this as a wonderful example of the difference HCN practitioners can make and would appreciate an opportunity to unpack this further when we meet again. Maybe together we can look into what values supported new goals in this situation; what helped you preserve the belief that this young man will return, when other agencies couldn't; what is it about the practice framework that helped the collaboration in this situation.*
- You noticed that with time your pure concentration on the goals shifted to whole team collaboration. Our young people need professionals to collaborate, share information

Donald McMenamin

Do you want to bring a Foucauldian understanding to this important word? Foucault links truth power and self – the prevailing social understandings (discourses) define what will be accepted as true, thus assigning those who speak in the acceptable terms the power to be heard, thus assigning identity conclusions that they are right (or for those positioned as other, wrong)

*I was hoping you would pick up on this. I love Foucault, but you have much better grasp of his thinking*

If we use power to mean 'whose voice gets heard', or 'whose voice resonates with the preferred stories' then we might ask here something like: What practices help position all those involved as able to speak and be heard? What practices make it more (or less) likely that people will feel that marginal or alternative opinions will find a place in the conversation?

*Perfect.*

Donald McMenamin

Are there guidelines used to shape each of these conversations? How do we discern what a team prefers?

Branka Vasilic

The guidelines are: to use narrative theory and techniques to find relational practices used by HCN practitioners, make them visible, explore them with the goal to recognise relational practices as valued even though they do not fit the dominant organisational story of what successful collaboration looks like. Does this answer your question? I am happy to have an extra Skype session if you have suggestions in terms of ~~guidance~~.

Donald McMenamin

This sentence needs grammar work I think? EG An example of this was with the young man ...

Donald McMenamin

were

Donald McMenamin

Yes, I agree with your interest here. I am curious too: The action of staying with the young man – what are they hoping for in that? What does that say about what they are valuing – what they hold as important? If we took those values, where else in the organisation do those values shape our practice?

Branka Vasilic

Thank you



and talk to them. **You can have the best plan in the world - it doesn't necessarily mean anything is going to be better for the young person, unless the teamwork is going well. When professionals are willing to look at different ways of working this is also good modelling for the young people and the families.**

- o *Movement from having set goals to developing an environment where strategies emerge naturally is a recognised relational shift. Can we explore this further and make it easier to recognise in the context of HCN work? Modelling collaboration is another example of a positive change HCN teams make. I would appreciate if you could remember more examples of this in practice.*

**Thank you for the example when individual intervention was planned, but a whole class intervention was delivered instead. You noticed that this supported the child's sense of belonging and how he saw his position in the class.**

- o *How did this change in planning come about; what supported it; were there obstacles and how were they overcome?*

**Being open to having feedback, willing to listen to other people's ideas, willing to challenge others if things don't seem to be going well.**

- o *How often do you see this in practice, what are the benefits; how can practices like these be supported and maintained?*

The success of mentor support often depends on their gender, culture and creativity.

- o *What is your guess about why gender, culture and creativity make such a difference?*

You value work of others, their **sharing of clinical knowledge and bringing people together around that; looking at the situation from different perspectives; you find being together empowering.** I enjoyed the example of a young woman with a big team: police, **Oranga Tamaki**, DBT therapist, psychiatrist and more. In one meeting the policeman presented a spiritual perspective on mental health concerns. Although he was coming from a very different perspective, the psychiatrist responded by respectfully validating the spiritual perspective in a way that helped the team's understanding. The rest of the team were very westernised, but this allowed the team to work together better.

- o *What supports understanding*

Children often report surprising and fun goals: want to watch more TV or be Superman. The example, of a child seeing through the behavioural plans and working out much faster than the therapist anticipated how to get all the rewards with minimal effort was fun. One family struggling in extremely chaotic situation reported deciding to have a homeless person living with them.

You reported that HCN teaming is a good way to work which requires a strong drive to keep it going. All agencies need to recognise that we need to work this way. **It takes much more time for young people to achieve sustainable change than agencies anticipate. We need to recognize the longer-term nature of needs and collaboration,** not just stay together for as long as the interventions last.

- o *How might this look like in future? Do you have an image, a vision that guides*

**Donald McMenamin**

There is something here about nuanced practice that values relationship more than goals? I wonder if, in the context of relationship rather than goals, all the people involved are positioned in a way that allows their moment by moment responses to be heard and taken into account when shaping our next steps (as opposed to us having to follow a previously set goal). If this is the case, can she say anything about how new and emerging hoped-for goals are noticed and negotiated in the moment?

**Branka Vasilic**

Yes, I too see this as a good point to explore relational practice. How does this sound?

**Donald McMenamin**

Yes, I agree with this inquiry. I think a focus on positioning is important here.

What position was the team hoping for this child? Did they have hopes for their own positioning (as allies rather than fixing professionals?) How do they speak about their hopes for their own and others positioning in their various interventions?

**Donald McMenamin**

How do they structure these reflexive conversations? Are there times put aside for reflecting these ways? How do they decide who gets consulted?

I imagine that the answers to these questions will further expose the moment by moment emerging nature of their goal setting/goal revising method.

**Branka Vasilic**

Yes, that is what I am after. And because of relational focus on process, I would like us to explore examples of this in practice.

**Donald McMenamin**

Just as an aside, Branka, note the possible Foucauldian use of 'power' here – empowering as meaning finding a common or agreed way to speak?

**Branka Vasilic**

Will this be mind for the next conversation.

**Donald McMenamin**

Yes, do you find Maori models such as **Tu Whaka Tapa Wha** support your thinking here?

**Branka Vasilic**

I sure do.

**Donald McMenamin**

Lovely examples of the sort of emergent goal setting which seems to be at the heart of this work.

## Appendix 7. Example of Initial Letter Analysis

**Green** - relational potential and practice for which we have no common words to describe

**Yellow** – stories and examples of practice

**Red** - reported problems and difficulties

**Grey** – common practice

**Blue** – insights

Dear Laura , 1

*Firstly, it was a privilege to talk to you about collaborative practice. I have been looking forward to doing this study for almost a decade and am now very excited about working together to make a difference, however small, in the practice of interprofessional collaboration.*

*Here is my summary of what you said. Please add and change this as you see appropriate. It is important to me that this reflects your views. You will find some questions about situations I would like us to unpack more when we have our next conversation. I want to emphasise here that I genuinely don't know the answers to these questions and hope that we can start exploring them together.*

- Ensuring that everyone is **on the same page** and working towards the same goals stand out for you in interprofessional collaborative practice. In your experience professionals sometimes think they are collaborating while **being unaware of their own agendas**. You chose an example of a student with a terminally ill mother as one where collaboration was successful. You described a team working towards one goal (how to make things sustainable for the family) with no pockets or silos; with a lot more flexibility; putting aside their earlier differences, rather than saying 'my job is this and that', people just picked up things to do and ran with it. **It was a nice flow**. You also said that there was a lot more understanding of each other's roles and what agencies can provide.
  - *Thank you for describing this beautiful example of successful collaboration. I am curious about what made it possible for people to engage in collaboration differently this time? What kept it going and why?*
  - *How can we recognise this shift in other situations in order to engage with it easier?*
- We have more chance of successful collaboration when **people keep showing up; when everyone respects each other and communication is good**.
- Hidden agendas make things difficult; when transparency is lacking and secret little meetings start happening; when people are blindsided about their beliefs and values. This friction is caused by not having trust amongst the team. The shift happens when **there is understanding of why things are happening, seeing the big picture, when people feel safe and things are working**.
  - *Here you recognised the positive shift **happens when there is trust, when people feel safe, when there is understanding and people are able to see the big picture**. Thank you for this striking insight, which opens a question of how do we keep this shift going. I would love an opportunity to unpack this with you further.*
- Having professional credibility helps collaboration. You gave an example where a team member was described as not professional. This was a barrier to collaboration

which you resolved by building up that person's credibility in the eyes of other team members.

You recognise different ways a team can be brought together. In some meetings, the atmosphere is relaxed and language is informal. This is related to a type of team credibility. Other teams require structured and formal approach. **You described the need to be attuned to the team needs.**

- *How are professionals supported with this attuning?*
- You found reflection, supervision and support of your colleagues helpful. Being observant, reading what is happening for people in the room, **following gut instinct.**
  - *When using the phrase 'gut instinct', what are you referring to? If you think about gut instinct as being trained across the years – through formal training and through experience, what stories do you have of how it has been developed to such a useful extent?*
- I like your strategy ('one of these things is different than the others') which you found helpful in monitoring team work.
- It is important that **everyone has their say.** You don't judge the quality of a meeting by what gets covered, but by the **quality of conversations.**
  - *I am curious about the "quality conversations" you recognise as important and would love to talk to you about that further.*
- You share an insight that where meetings are located needs careful consideration. You noticed that **location can give power to certain people and take it away for others.**
  - *Thank you for this great insight.*
- In more than one example you talked about noticing when team members feel anxious. In one example, you reacted by identifying a person to be a buddy for that team member, which slowly resulted in them becoming a leader, assertive and confident.
  - *What an interesting, validating and empowering thing to do. I am stunned by its simplicity and beauty. You reflected about "having a safe place to have your say for everyone and without being judged".*
  - *What is it that you value about the practice of noticing.*
  - *What attitudes sit behind the noticing?*
  - *What does that say about what you consider important?*
- The same theme continues in the example of a student who was afraid to be judged for wanting to go to church. You provided a safe environment for him to have his say and discover that people didn't judge him.
  - *This makes me wonder just how much potential for change exists in any one conversation. I found this part of our conversation particularly inspirational. Thank you.*
- A lot of work goes into good collaboration and it takes more than books and manuals to get there.
  - *I couldn't agree more. There is more to collaboration than the process and I am so excited to explore this space with you.*

*With gratitude and excitement, I would like to thank you for working with me. Through the identification of your own unique story and within your own unique experiences, you have made visible alternative knowledges which may hold new potential. I look forward to exploring the ways you have influenced this direction in your practice and learn about the ways this direction in your practice has influenced you.*

Regards  
Branka

Dear Laura , 2

*Thank you for talking to me again. In the second conversation, we revisited more relationally based situations and explored their potential.*

*I now ask you to leave that aside for a brief moment, while I set out my thoughts for your consideration. It seems to me that although professional knowledge and practice guidelines are valuable as guides, they are only partly helpful for the moment-by-moment decisions we make in collaborative practice with our peers and with the people we serve. And further to that, while the research I read is clear that relationships are important to collaborative practice, that same research seems to offer at times confusing and unconvincing advice for practitioners.*

*In the light of that, in this project I am proposing that the knowledge to guide moment-by-moment responses in each unique and particular situation be developed by the HCN practitioners. In this current co-research relationship, it is you who holds the valued knowledge. My contribution was to offer a tool in the form of relational theory to be used as a set of glasses through which your knowledge and solutions get magnified sufficiently to be recognised as valued. My hope is that this might open up possibilities in practice which would otherwise stay hidden from us.*

*Now to my summary of what you said. Just like before, please change this as you see appropriate. It is important to me that this reflects your views. You will find some questions again. This time I hope the questions will support your reflection on how the practices and ideas we explored could be useful in the future HCN practice.*

In the conversation that followed these three themes emerged:

#### **You spoke about flow in collaboration**

You gave an example of a refugee family discovering that a school is not as multi-cultural as they thought. There were issues around full time TA; principal got attacked; BOT kept the young man at school under stringent conditions. **"The team joined forces**, worked really hard to come up with strategies (as a response to the situation) to support the school and support the young person to build him back up to where he doesn't need the supports. In terms of collaboration, this meant **having side meetings, willing to tweak things, going beyond the call of duty and so on**. I think that is what makes good collaboration -**dropping down the boundaries of I can only do this**. "

- *Thank you, Laura , for this thoughtful insight. This is a lovely example of a team getting stronger in the face of serious problems.*

You noticed that collaboration works well when **people recognise how they can work together to respond** to a difficult situation in a way that allows them to **merge their roles**. You gave an example of an MOE person working with a health psychologist to get another professional involved and develop a plan together. Either of them could have said: *this is not my role, I have done what my role involves*. A lot of this collaboration was around the **young person in the centre** (not around what was happening at the school, which was how it all started). Everyone was seeing **the big picture**. This young person's life was not compartmentalised and people were **not working in silos**.

- *This makes me wonder where did you develop these skills of allowing the roles to merge? How is it that you know such skills produce the effects of becoming child centred and seeing the big picture? How*

*might these skills be put front and centre in your work with colleagues?*

You used the 'black boxes and white spaces' metaphor for making the point that: "The key characteristic of collaboration is having a holistic approach where **cross over is possible**. If everything is in black boxes with white spaces in between, the grey is the crossover between the boxes. You noticed how in this situation **you didn't have to do much when people trust each other and know each other**."

- *How is this brought about in your practice? Have you noticed any other ways of working that reduce the pressure on your workload?*

· **We considered how to keep this flow going**

"My role is checking in, making sure everyone is on the same page and to follow up. Teams find it helpful to have one person not directly involved, just supporting everyone to stay together."

- *Relational theory would suggest that this is of critical importance. If I may say so, I think you are doing an outstanding job with this.*

· **You noticed that the positive shift happens**

You noticed that **confidence** is a big contributor to successful collaboration. It isn't written anywhere. It isn't control, but a kind of presence, **the ability to go to plan b very quickly**. That is the key to holding things together. Its' not in my job description or is it?

- *My mentor reminded me recently of an old definition of professionalism as being that which we do when there are no rules to describe what we ought to do here.*

You spoke of an example of a new MOE person on the team who felt bad about having said something. Your role was to build her confidence up again. To achieve that, in your team emails you referred to her plan in a positive way. You did this to support the team to move away from dwelling on what has happened. "We all make the mistakes, that is ok."

- *This is an example of your attunement to the team. You do this although it might not be described in your practice book. You remembered thinking, as a professional, this is not my role, but what can I do to support the person whose role this is.*
- *What you said here, Laura, helped me see this aspect of collaboration in a unique way. Thank you for this lovely insight.*

At the end of our conversation, we touched on how is collaboration covered in supervision. You said that time management and caseload are covered regularly in supervision. Collaboration is more discussed in informal supervision.

*Dear Laura, thank you for the privilege of learning about your practice and for giving me a glimpse of possible preferred futures of interprofessional collaboration.*

*Kind Regards  
Branka*



## Appendix 8. Communication between Conversation 1 and 2

### *Communication between first two conversations*

Email sent before second conversations:

Dear ...

I thought you might like to have the option of having this information, but do not worry if you don't get the time for it before we meet.

In our first conversation, we talked about collaboration in general. The richness of the practices you shared with me, the depth of your concern for the quality of your work and your clients stood out for me strongly. I feel very privileged that you have agreed to be a co-researcher on this project. The letter I sent, among other things, should have highlighted my interest in relational aspects of your practice.

The second stage is taking us directly into the heart of this research project-relational practice. Before I go on, I just want to say that this is a specific type of research called relational research. As such, it is not interested in finding the right/wrong or better/worse approach or even to study a specific approach in depth. The purpose of relational research is to generate something new that might be useful in a specific time and context. How relational research is different to other types of research is summarised in the table attached.

In order to move on, I would like to tell you about relational practice in 10 min presentation you can find here <https://prezi.com/mlzcqihb9scz/relational-practice/> If you get the time, please have a look. However, if you don't get the time, I will explain it at the start of our second conversation.

Some of the questions we might touch on could be: What does it mean to focus on:

- curiosity rather than role boundaries
- possibilities rather than predetermined outcomes
- emerging strategies rather than plans
- process rather than individual action
- tradition rather than individual knowledge

Looking forward to continuing our conversations. Please let me know if you have any questions in the meantime.

## Appendix 9. Practitioner Direct Feedback to Research

### Question 2

Have you found them useful in any way? Is there anything different you might be doing in practice as a result?

1. *Here are some of my reflections on the participation:*

- *Finding out more about relational practice and is it what we do on a day to day basis allows this to happen...and in order to grow from this research participation perhaps **having some more “deliberateness” to the approach in our structures and processes at HCN so as to acknowledge this important aspect of the work. I will continue to look at how I can bring this more deliberate aspect into the individual cases.***

- *I think reflecting on the “good” examples of HCN work during our conversations allowed me to identify more details of what did work – e.g. having positive results from that whole class intervention example **allowed me to encourage other teams to consider extending interventions beyond the individual child and seeing that these benefit more than just the individual child. I think we don’t often get time to reflect fully about the successes.*** At the final review for the case, I paid more attention to drilling down more with teams about what/why the plan/goals/interventions were successful (rather than the final review just being a tick-box exercise).

2. *I have been reflecting on our conversations, and **have made a small change in my practice that has had enormous impact.*** I have always wanted the service providers (OTs, SLTs, Psychotherapists etc.) to be responsive to the children’s needs rather than working to the letter of my instructions. I thought that even though this is something I want, so they can be empowered to do their best work, that they cannot be expected to just know this. **I have started to explicitly tell them that they have the freedom to be responsive and I will not micromanage them.** The results have seen a higher level of collaboration as they are happy to share their work and ideas. I’m seeing the providers meeting up to work on “mini-plans” in areas their work intersects, an organic sort of collaboration. And the results....I’m seeing my clients make gains faster than anticipated.

3. *I have looked through the letters, thanks Branka, and **am impressed with the depth of thinking that we achieved in our conversations.*** Unfortunately I was quite busy at the time so probably wasn’t able to reflect as fully as I would like after receiving the letters, to be able to say how they impacted directly on my practice, but **the themes certainly remain relevant.**

*Two of the things that stand out for me now are: including the young person in the collaboration, and appreciating that practitioners can have competing motivations and **that is important to take time to listen and see where they are coming from, rather than dismissing their ideas and input.***

*I have summarized the examples of where these aspects were relevant.*

*The first involved a fourteen year old young man with a range of disabilities (Tourettes, OCD, ASD) who either coped by avoiding risky, sensory-challenging and social situations (e.g. showering, going to school, going into shops in his community), or didn't cope and had verbal and physical outbursts. His parents had managed the latter by also limiting the number of challenging situations, to the extent that he was quite demanding of them and not as independent at home as would be expected of a teenager. The professional team collaborated well as they all agreed on the goals, but nothing much changed. Eventually a mentor was found for him (funded through HCN) who **shared the young man's passion** for film-making and knowledge of obscure arthouse films, and it was agreed that they would have film-making sessions at school once a week. As a result, the young man came to school on that day, which made it obvious that he was able to attend. The mentor was able to show where film-making could lead and which university courses would be of interest to the young man. He began to accept that he needed to attend some other classes and complete work for NCEA credits. The school guidance counsellor and a teacher aide supported him at school and he increased his time there, while still working on his films. He then needed actors to appear in his movies so he reconnected with some of his peers. He needed to film in a variety of locations and he became willing to get out and about in his community. **The result was that the perception of the team (including his caregivers) changed, and it became obvious that when he was motivated, he could overcome most of the things that they had assumed** were challenging for him, just because he was refusing to do them. He ended up remaining at school until the end of Year 13, and graduated with enough credits to attend university.*

*The second example is of a team that were at odds because some members believed the young person had FASD and required an assessment for this, and others felt that this was a costly and (for the child) time-consuming intervention that would not achieve any further resourcing or change in what was being provided for the child. **By valuing and considering both points of view**, it became apparent that one of the practitioners who was advocating strongly for the FASD assessment had recently come from a Youth Justice role and found the information in the assessment useful both personally (in terms of how the young person processed information) and in presenting information to Court. She was new to the team and did not realize that the type of information she had found valuable was already held by different team members, who were then able to share this with her. (The child was also young enough that there was hope that, with support, he could be steered away from entering the justice system). This allowed the issue to be 'put to bed'.*

*4. I enjoyed having the conversations with you and the opportunity to talk about what we do, **how we do it and the situation and environment that is needed to allow for successful collaboration. Having opportunities to reflect and think about the work you do is always helpful.** Each opportunity makes it easier to break it down to explain it to the next person.*

*I don't think it has influenced my practice and made me change as one singular thing. Change is often influenced by a number of factors and changes in the environment. I think I am a pretty reflective practitioner and like the challenge of always trying to*



*learn, grow and do better and I try and foster this amongst the team. As a group I do think we are responsive and reflective practitioners.*

*I am really looking forward to reading your thesis and looking at the information as a whole. I know **this will lead to many conversations in the team and provide us all with an opportunity to reflect and look at next steps or build on your work. I think there is learning to come from your work. You are giving us an exciting gift, thank you for this opportunity.***

## Appendix 10. HCN PowerPoint Presentation, conclusion slides

in-confidence

### Collaboration take-aways

- Initial team building is crucial: relationship are the key
- Trust is central
- Give people permission to be brave and creative
- Be willing to step back from your vision and try someone else's idea
- Lead by example to be transparent and collaborative (walk your talk)
- No naming, blaming or shaming:
  - ✓ 'failures' are a chance to do things differently
  - ✓ celebrate successes as a team
- Success breeds success
- The child's buy-in to the work is half the battle.

### Collaboration take-aways

- Take time to listen to others, as they have their own agency/professional motivations, which need to be honoured
- Openly share information
- Share resources and networks
- Share out parts of a bigger task, often out of 'role'
- Communicate to the child that their adults are a unified team
- Flexibility is crucial – organically responsive and developing plans are best
- Shift mind-sets from "We have to meet goals" to "We will support each other and our child".