Title

"We're working together for the same goals": A Patient and Public Involvement study of collaboration between school staff, parents and Speech and Language Therapists

Abstract

Collaboration between teaching staff and Speech and Language Therapists (SLTs) working with children with Speech, Language and Communication Needs (SLCN) in mainstream schools, and their parents/carers, is vital to ensure best outcomes for children with SLCN. There is a lack of UK research in this area, including the individual socio-relational factors which impact on collaboration. There is also a lack of research combining all stakeholders' views and experiences, and involving stakeholders in the research process. This two-stage Patient and Public Involvement (PPI) work aimed to gather information about which socio-relational factors are important to those supporting children with SLCN within their collaborative working, in order to inform the focus of a planned programme of research into optimising this aspect of professional practice. The first stage was carried out by an SLT, a teacher who is also a qualified Special Educational Needs Co-Ordinator (SENCO), a teaching assistant (TA) and two parents of children with SLCN. This group of co-researchers designed, carried out, analysed and supported dissemination of the results of a wider set of advisory PPI interviews and focus groups with mainstream primary school teachers, TAs, SENCOs, SLTs, and parents/carers of children with SLCN. Codebook thematic analysis of the focus group and interview data identified four themes: "*communication and accessibility*", "*relationships and being understood*", "*expectations and expertise*", and "*beliefs about responsibility for SLCN support*". These themes provide directions for a planned programme of research exploring inter-personal factors influencing collaboration, ensuring future research is grounded in PPI.

Key words: Collaboration, Patient and Public Involvement, speech and language therapist, teacher, teaching assistant, parent

Background

Around 1 in 10 children have long term Speech, Language and Communication Needs (SLCN; Law et al. 2011, Norbury et al. 2016). SLCN is an umbrella term which includes difficulties

with speech (e.g. speech sound disorders, stuttering and voice), language (e.g. understanding and/or use of vocabulary, sentence structures), and social communication. SLCN is the most common type of need for children receiving Special Educational Needs support in England (Department for Education, 2025). There is a much higher SLCN prevalence in children living in areas of high social deprivation (Law et al., 2011; Strand and Lindsay, 2016, Royal College of Speech and Language Therapists, 2025). Many different people are involved in supporting a child with SLCN, with a range of roles. Within a mainstream primary school, these are their teacher, Special Educational Needs Coordinator (SENCO), and may also include a teaching assistant (TA). Pastoral staff such as Family Liaison Officers may also support the child and family's wellbeing. The team may also involve external professionals, such as a Speech and Language Therapist (SLT), Educational Psychologist, or a specialist teacher. The child's parents, carers, and wider family members also play a crucial part in understanding and supporting the child's communication skills across a range of contexts. It is a legal requirement and assumed 'best practice' that all parties should work collaboratively to support the child (Children and Families Act, 2014; Every Child Matters, 2003; SEND Code of Practice, 2015). Both Evans et al. (2025; USA) and Armstrong et al. (2023) indicate that there is a link between collaborative practice and child-related outcomes. The latter paper identified 18 studies (from United States, Canada, Australia, United Kingdom) and one of the six main themes resulting from their synthesis related to having a shared understanding of roles and shared views (Armstrong et al. 2023). Furthermore, priorities, beliefs and understanding all impact child outcomes according to Klatte et al. (2020) who carried out a realist evaluation into collaboration between parents and SLTs. Their resulting theory emphasises the importance of parents and SLTs having an understanding of each other's preferences, expectations, roles and responsibilities prior to intervention. Therefore, effective collaboration is vital.

Current evidence base

A scoping review carried out by Mathers et al. (2024) aimed to identify what research exists regarding collaboration between SLTs and teaching staff within mainstream UK primary schools. Whilst 14 papers met the inclusion criteria, they found that collaboration was the primary focus of only five papers (Band et al., 2002; Forbes et al., 2019; Law et al., 2002; McCartney et al., 2010; McKean et al., 2017). Of the 14 total papers identified, five focused

on breadth, identifying the wide range of factors influencing collaboration (Band et al., 2002; Baxter et al 2009; Law et al., 2002; Lindsay et al., 2002; Lindsay et al., 2010). Examination of socio-relational factors in depth was therefore limited. Many socio-relational factors, i.e. the factors that impact on people's social relationships and social contexts, were raised within the literature reviewed by Mathers et al. (2024): perceptions of roles (Band et al., 2002); confidence (Davies et al., 2004; Law et al., 2002); trust (Forbes et al., 2019); knowledge and skill sharing (Forbes et al., 2019); in-group bonding which may lead to excluding other professionals (McKean et al., 2017); communication within and between agencies (Mukherjee et al., 2002); balancing decisions and information brokering (Lynch et al., 2019). Socio-relational factors therefore appear important for a full understanding of the collaborative experience. The profession of participants varied in these studies. Parents were participants in two of the papers (Band et al. 2002; Baxendale et al. 2013). Ten papers involved participants from both health (e.g. SLTs, paediatricians, health visitors) and education (e.g. teachers, TAs, language and communication teachers). Six papers included participants with a senior leadership role, for example, headteachers and SLT service managers (Baxter et al., 2009; Forbes et al., 2019; Law et al., 2002; Lindsay et al., 2002, 2010; McKean et al., 2017). The way different stakeholders describe and conceptualise the socio-relational factors, and their relative importance or impact has not been explored. International literature also identifies themes such as understanding of roles, confidence in taking on roles, building relationships, and mutual investment in the relationship and support (Campbell et al., 2012; Campbell et al., 2016; Suc et al., 2017). Again, these are rarely explored in depth and there is limited research investigating how to improve collaboration using this theoretical information.

TAs are under-represented in the literature on collaboration to support children with SLCN in mainstream schools, despite the crucial role they play in SLCN support (Mathers et al., 2024). Additionally, families have not always been considered fully as part of the collaborative process. D'Amour et al. (2005)'s literature review of theoretical frameworks for collaboration across all healthcare disciplines found that this was a significant drawback of the current literature. The relationship between parents and school staff has been explored without also explicitly including healthcare professionals, or focusing specifically on support for children with SLCN (Addi-Raccah & Grinshtain, 2022; Mann & Gilmore, 2023;

Walker & Bond, 2025). Walker and Bond's (2025) systematic review of research into home-school collaboration identified 9 papers. They conclude that building relationships should be a deliberate, ongoing process. They found that home-school collaboration is strengthened by sharing knowledge, having clear communication systems, and being aware of power dynamics. Addi-Raccah and Grinshtain (2022) examined the relationship between teachers and parents, with 325 teachers and 655 parents in Israeli primary schools completing a questionnaire. They conclude that effective collaboration is influenced by perceptions of teachers' professionalism and efficiency. Furthermore, teachers may be 'managing' parents rather than fostering true partnerships. Mann and Gilmore (2023) also found that the teachers they interviewed were less engaged and invested than parents in their mutual relationships. They carried out semi-structured interviews with 20 parents and 16 educators in four Australian schools. Both papers argue that teachers require training and to be invested in the collaborative relationship.

Forbes et al. (2019) and McKean et al. (2017) make an important contribution in identifying a range of socio-relational themes relating to the interactions between the individuals in the collaborative process (health and education professionals), using the theoretical and analytic framework of Social Capital Theory (Bourdieu, 1986). Social capital theory can be used to explore inter-personal and institutional relationships. It views networks, shared norms, and trust and reciprocity as enabling individuals and groups to work effectively together. Social capital can take the form of bonding (strong ties within a group), bridging (connections across different groups), or linking (relationships across organisational hierarchies). In both papers, this research team analysed semi-structured interviews with the same participants which included headteachers, SENCOs (some also classroom teachers), teachers, HLTAs, health visitors, SLTs, EPs, and language and communication teachers. Participants were asked about their experiences, the barriers and facilitators to collaborative working, and their ability to influence and access support across different organisational levels and hierarchies. Themes identified included trust, reciprocity, openness, vulnerability, flexibility, shared understanding of roles, shared understanding of distribution of knowledge and expertise, clear communication, and mutual learning through observation and feedback. The researchers used these interview themes to examine the social networks, shared norms and values, and trust, at the macro- (governance and policy),

meso- (institutional) and micro- (inter-personal) levels. As a relatively new field, looking through a different theoretical lens without an a priori model may help ensure complexities are not missed. While Forbes et al. (2019) and McKean et al. (2017)'s research focused on interprofessional collaboration (so parents/carers were not included), the impact parental collaboration had on interprofessional collaboration was acknowledged (McKean et al., 2017).

In summary, there is not enough information to fully understand the complexity of individual socio-relational factors, and which of these require further in-depth research. Further, the full range of stakeholder views has not been addressed collectively. A greater understanding of individual socio-relational factors involved in collaboration could inform both practice and policy, and ultimately improve support for children with SLCN.

Patient and Public Involvement (PPI)

The National Institute for Health and Care Research (NIHR, 2021) define public involvement in research as "research being carried out 'with' or 'by' members of the public rather than 'to', 'about' or 'for' them". The term 'public' is used broadly to include service users. In Speech and Language Therapy for school-aged children, this includes teaching staff, children and their parents/carers, all of whom will be referred to as 'stakeholders'. By ensuring stakeholders perspectives are represented throughout the research process (including lesser heard voices such as TAs), public involvement leads to research with greater relevance and impact. Existing research into collaboration between teaching staff, families and SLTs has involved education research academics, but to our knowledge has not involved parents/carers or TAs as co-researchers. The ultimate aim of PPI in this area is to ensure research into collaboration to support children with SLCN in mainstream primary schools, is carried out with those engaged in the collaboration on a day-to-day basis The current project involves co-researchers and PPI members in the first stage of the research process, prioritising and shaping research by identifying topics of importance. The socio-relational factors identified will be the focus of a planned programme of qualitative research by the lead author. Specifically, they will inform the topic guides used in in depth qualitative research into collaboration in schools, and ultimately a feasibility study investigating collaboration-support mechanisms.

The aim of this PPI work was to identify which socio-relational factors are important to those supporting children with SLCN (i.e. parents/carers, teachers, TAs, SENCOs and SLTs) within their collaborative working, in order to inform a planned programme of work to enhance inter-professional working. This PPI work will therefore guide the focus of our future qualitative, in-depth research in this field. The information gained will be used to guide future research developing recommendations for collaboration, by focusing on the socio-relational factors most important to those supporting children with SLCN in mainstream schools. This PPI project takes a critical realist epistemological approach: social reality exists, but cannot be measured directly because it is experienced through our brains, language and culture (Wong et al., 2013). However, we can use indirect methods to explore the nature of social reality. The 'stratified ontology' proposed by Bhaskar (1975) is assumed: there are a) observed experiences/ events which may be identified within this PPI work, b) experiences and events which may occur but may not be identified, c) unobservable causal mechanisms which cannot be observed but may still influence events and behaviour.

Method

Methods have been reported following the Consolidated Criteria for Reporting Qualitative Research (COREQ) checklist (Tong et al., 2007) and Guidance for Reporting Involvement of Patients and the Public, Version 2 (GRIPP2) (Staniszewska et al., 2017) (see supplementary materials).

Design

This paper reports on a two stage PPI process (preliminary - co-research; and main - advisory) created to inform a larger scale programme of research into collaboration between parent/carers and professionals in schools. Due to the previously noted complexities in defining collaboration, initially four co-researchers were recruited to form a co-design group with the lead author. This co-design group shaped and supported interpretation of the main phase of advisory PPI activities (focus groups and interviews), to

ensure that these were of a high quality. Both phases of this work were carried out with the aim of informing future research decision-making (Doria et al, 2018).

Co-researcher's levels of involvement were identified using Cook et al.'s (2017) model (Table 1). Consultation was defined as AM carrying out the work, then asking for opinions from co-researchers. This was production of a one page summary for local schools, SLTs and families. Co-operation was defined as co-researchers identifying activities and priorities, with responsibility for directing the process remaining with AM. This was the case for identification of the recruitment strategy, and production of the recruitment flyers and topic guides. Co-learning was defined as co-researchers sharing knowledge and making their own suggestions, with AM providing facilitation. This occurred when carrying out the focus groups, identifying the codes and themes from the focus group responses, and identifying implications for practice.

Table 1: Levels of involvement at each PPI stage (following Cook et al., 2017)

	Designing research methodology	Data generation	Data analysis	Dissemination
Consultation				Production of one page summary
Co-operation	Recruitment strategy Production of recruitment flyers Topic guide			
Co-learning		Focus groups	Identification of codes and themes	Identification of implications for practice

The first author AM identified the design for the main advisory PPI activities. Focus groups were chosen as offering a safe space for open contributions. Semi-structured interviews were also offered to teacher PPI members and to one parent PPI member, where availability to attend a focus group was identified as a barrier to participation. These methods provided opportunities for PPI members to discuss the topics broadly, supporting possible identification of new themes.

The information gathered from the PPI activities was brought together with previous research after synthesis and interpretation. An underlying assumption of this PPI was that there is some level of similarity between schools and between school staff with similar roles at a theme level, whilst acknowledging that there will be individual factors (such as school size, continuity of SLT provision, amount and type of experience of school staff, qualifications of TAs) that will vary.

Co-researchers and PPI members

The co-research team included one SLT (AM, lead author), one teacher/SENCO, one TA and two parents of primary-school aged children with SLCN, both of whom have received NHS SaLT support; one child has an Education, Health and Care Plan and the other does not. Detailed information about the children of the parent co-researchers was not gathered as they were involved in the work described in this paper as co-researchers rather than participants.

To recruit the co-research team, parents responded to project information shared by e-mail and a WhatsApp group by local charities, and the teacher/SENCO and TA co-researchers were identified by AM due to their research interest. All those who were interested in being co-researchers joined the team. All initial correspondence about the project between members of the co-research team was via e-mail.

Co-researchers attended two discussion and training sessions, either individually or within a group. The discussion and training sessions provided an introduction to the research process (including information about PPI), a summary of the existing research, and information about running focus groups. They were also used as a forum to discuss and agree the recruitment strategy and topic guides. These were led by the first author. The

group sessions lasted one hour each, with individual sessions lasting approximately half an hour.

PPI members were included as follows:

- Teaching staff and SLTs who had worked within a mainstream primary school in the past year;
- Parent/carers who currently or previously had a child attending a mainstream primary school and receiving SLT input;

PPI members participating in the main PPI activities were invited via flyers and information sent to their schools. Parent co-researchers suggested also sharing the flyer and information via local charities supporting families with SEN, who shared this via e-mail and a WhatsApp group. The co-research team identified schools with which a member of the research team had an existing relationship, to facilitate speaking in person to the school leadership team so that they would support by disseminating information. In total, 41 schools were approached, a mix of rural and urban schools (none inner city) all within the South East Kent geographical area. The SENCOs, teachers and TAs who took part worked at seven different schools, also with a mix of rural and urban. Two of those schools had a low percentage of children receiving free school meals (under 15%); two had a percentage of children receiving free school meals between 15-30%; and three had a high percentage of children receiving free school meals (over 30%) (the UK national average being 25.7% in 2025). Because we recruited via existing networks to facilitate recruitment, some PPI members were known to the first author and to members of the co-research team in a broad professional capacity. SLTs were invited via existing connections and word of mouth. All PPI members contacted the lead author by e-mail to express an interest in participating, and follow up correspondence was also by e-mail. The group was predominantly female but no further demographic information was collected. All those who expressed an interest in participating in the PPI activities then became PPI members, and no PPI members withdrew.

Table 2: Membership of the PPI team and type of contact

	Focus Group	Interview
Teachers	3	3

SENCOs	3	0
Teaching assistants	5	0
Parents/Carers	5	1
Speech and Language Therapists	6	0

There were 26 PPI members in total. Six PPI members were teachers (23% of PPI members), three of whom participated in a focus group, and three participated in individual interviews. Three PPI members were SENCOs (12% of PPI members), all of whom participated in a focus group. Five PPI members were teaching assistants (19% of PPI members), all of whom participated in a focus group. Six PPI members were parents/carers (23% of PPI members), one of whom participated in an individual interview due to being unable to attend during the focus group times, the remaining five participated in focus groups. Six PPI members were SLTs (23% of PPI members), all of whom participated in a focus group. Additional written contributions were provided, including by those not in the PPI group, via the online shared whiteboard space and on a paper version of the online whiteboard prompt pages at a school staff meeting, to enable more people to contribute. These contributions were anonymous, and so it was unclear how many additional contributors there were.

Materials/topic guides

PPI members were provided with an information sheet including names of co-researchers and focus group facilitators, information about the PPI activities planned (focus groups or interviews) and purpose of these, possible risks and benefits of taking part, confidentiality, and what would happen to the results of the PPI activities. PPI members were provided with the information sheets prior to deciding whether to join the PPI members group. Although this work was considered informal PPI, information sheets and consent forms were provided in order to use direct citations from the member contributions for wider publication. The information sheets were produced by the lead author. These individuals were invited explicitly as collaborators helping to inform a planned programme of research (rather than participants) but consented explicitly to their direct quotes being used for subsequent synthesis and interpretation, and publication. As such, the parent/carer PPI group members were paid for their time as collaborators in line with INFORM guidelines.

The topic guides (see supplementary material) explored: Accessibility of others to work collaboratively with, level of involvement in the collaborative process, relationships, roles, expectations, best practice, and key support factors. The topic guides were produced by the co-research team to ensure they would be accessible to parents, teaching staff and SLTs, and to elicit information on topics of importance to parents and professionals. A separate topic guide was made for each stakeholder group so that they were tailored to the profession or role of the PPI members. The lead author produced the topic guide for the SLT focus group, basing the areas covered on themes arising from previous research in the field. The co-researchers then tailored this topic guide for PPI members with the same role or profession during pair or small group discussions (i.e. the parent co-researchers produced the topic guide for the parents focus groups and interview, the school staff produced the topic guide for TA, teacher and SENCO focus groups and interviews). Focus groups and interviews were used to facilitate the participation of teacher and parent PPI members. The topic guide for each profession or role was the same across both modes of participation.

Settings and procedure

The parent/carer focus groups and one of the teacher interviews took place online. All other interviews and focus groups took place in person, within a local school. The teacher/SENCO and TA co-researchers led the focus group with their respective peers. One parent/carer co-researcher led one of the parent/carer focus groups, with AM leading the other. BM led the Speech and Language Therapist focus group to allow maximum freedom of expression given that AM is an SLT known to its members. All interviews were carried out by the first author AM. Focus groups lasted around an hour, and interviews 30-45 minutes. In all but one case, teaching staff focus group members worked in different schools. No other individuals beside the co-researcher(s) and PPI members were present during the focus groups or interviews.

All focus groups and interviews were recorded using Microsoft Teams then transcribed by the first author AM, at which point the transcriptions were anonymised. Transcripts were manually transcribed in order to ensure accuracy.

An online shared whiteboard space was provided for written contributions, accessible by any PPI member at any time so that contributions could also be made outside of the focus groups and interviews. This online shared whiteboard space provided the topic guide questions as prompts for the written contributions. During recruitment of PPI members, schools were also requested to share the link for the online whiteboard space with their

staff. This enabled more teachers, including those not in the PPI group, to provide PPI contributions. It was unclear how many additional contributors there were as contributions were anonymous. One of the SENCO PPI members (not co-researchers) also shared the same questions from the topic guide and online whiteboard in paper form at a staff meeting during the course of the PPI work, as she felt this would lead to more of her staff contributing. These written contributions were synthesised with the interview and focus group transcriptions, and following this all PPI contributions were interpreted using a codebook.

Although PPI activities are not usually subject to ethical approval, this was obtained from the City, University of London University Proportionate Review Ethics Committee [ETH2324-0349] due to the intention to publish the results (including direct quotes). PPI members gave consent for quotes to be used and the PPI to be written up for publication.

Analysis

Codebook thematic analysis was used to synthesise and interpret the focus group, interview and whiteboard contributions (Braun and Clarke, 2020; Wiltshire and Ronkainen, 2021). Codebook thematic analysis was used as it enables multiple members of the research team to be involved in identifying the codes (Braun and Clarke, 2020). Co-researchers read through one transcript relating to their role, identified trends and key concepts and met as a group to discuss them and develop a list of codes. All transcripts and whiteboard contributions were then coded by AM. Code development was iterative and new codes were discussed with co-researchers. No new codes were identified during the coding of the last (teacher) interview, suggesting sufficient conceptual depth (Nelson, 2016) to discontinue interviews. AM then identified potential experiential themes and subthemes, focusing on observed experiences and events (Wiltshire and Ronkainen, 2021), which were refined through discussion with co-researchers. To ensure themes and subthemes were grounded in the PPI members input (empirical adequacy, Wiltshire and Ronkainen, 2021), a second researcher (NB) independently coded a subset of the contributions (the quotes within this paper) and gained 80% agreement. The inter-relationship between the themes

was identified by AM and one co-researcher, starting to explore the possible influences and mechanisms that may not be directly observable (Bhaskar, 1975). PPI members contributions were organised and analysed using NVivo version 14 (QSR International) software.

Positionality and reflexivity

Whilst this paper describes PPI work which is designed to feed into the first author's subsequent work, rather than qualitative research, the importance of reflexivity and awareness of positionality remains paramount to the rigour and quality of this work. The work reported was designed to directly inform a planned doctoral programme of research by the first author. The first author AM has Master's level research training. She is female. She has worked in primary and secondary schools as a SLT since 2010, working collaboratively with parents and school staff, and continued working as a SLT concurrently with the project. This lived experience of working as an SLT was the impetus for the initial focus on collaboration. The first, second and third authors all worked within schools throughout the project, from which co-researchers and PPI members were identified. The relationships formed through shared work between some (but not all) of the co-researchers will have influenced relative ease of participation in the co-design process. Ongoing reflexive practice was crucial to inform the interpretation of the PPI contributions, and to ensure ethical conduct of the PPI activities. Field notes were made by the lead author following each focus group. The lead author reflected and discussed any concerns with the co-authors following every training session with the co-researchers and each focus group and interview. There were opportunities after every point of involvement (i.e. training sessions and focus groups) for the co-researchers to talk to the lead author, and they were encouraged at each point to reflect on what was working well for them, what could have been better, and any learning for themselves or the PPI work. It is acknowledged that prior existing relationships between some of the co-researchers and/or PPI members may have influenced the participation. However, it was clearly stated in all project information that participation was voluntary, and could be withdrawn at any time without penalty. It is also acknowledged that the relationships between the co-researchers and PPI members, and their backgrounds and experiences, may have influenced the interpretation of the PPI outcomes. The co-researchers may have been more likely to ascribe meanings to PPI

members contributions based on their own personal backgrounds and experiences. However, the co-researchers' current involvement in supporting children with SLCN with varied roles supported interpretive validity (Wiltshire and Ronkainen, 2021) and a greater understanding of the PPI members' contributions.

Results

Ten potential themes were identified by AM and refined with the co-researchers, leading to the final four themes: "c*ommunication and accessibility*", "*relationships and being understood*", "*expectations and expertise*", and "*beliefs about responsibility for SLCN support*". This process included identifying the key boundaries of potential themes, e.g. the potential initial theme of 'desire for team' was identified as part of the theme '*beliefs about responsibility for SLCN suppor*t'. It also included expanding on the theme *'relationships and being understood'* which originally focused on 'trust and responsibility'. Subthemes were also identified (see Table 3). Any parts of the original transcription that have been removed to keep the quotes clear and concise are shown using […].

Table 3: Theme summaries with subthemes

Theme	Subthemes
Communication and accessibility	Chain of communication Access to others to work with Not knowing who to talk to
Relationships and being understood	Mutual trust and respect Compassion Honesty and vulnerability Relationships built over time
Expectations and expertise	Expectations of others Need for 'specialist' support Confidence Overwhelm

	Independent search for knowledge (feeling isolated)
Beliefs about responsibility for SLCN support	Beliefs about who should have responsibility Passing on or sharing responsibility Desire to work as a team Beliefs about effective SLCN support

1. *Communication and accessibility*

Ease of communication impacted PPI members' collaborative working relationships, and their ability to take the supportive role they wanted. Many described relying on messages being passed on, which was seen as ineffective communication, leading to misunderstandings, and impacting formation of working relationships.

> "Perhaps things get misinterpreted because they went through school to tell the parent and then the parents say something to school and they say to you 'so and so's upset about this' and then you phone the parent and they're like, 'oh, no'" (SLT 6)

> "sometimes if it's just the SENCO in the past, I've found that they'll then pass messages on, but you don't get that full picture of what to do. So, I like being part of those meetings" (Teacher 3)

They described a struggle to speak to the person needed, not managing to "pin people down" (SLT) or find a suitable time.

> "They're right in the middle of teaching. So they just hand you the kid and then […] So you don't have a chance to chat with them. You follow them around school…" (SLT 5)

> "questions come up all the time […] and it doesn't feel like there's anyone to ask. […] it's not all those little things frequently" (TA 3)

Those not employed by the school sometimes need to wait to be "allowed" or "invited in" to establish communication. In some cases, existing ways of working or structures necessitate going through another party.

> "And then in the end I was allowed, I was invited to come in and we had a conversation not with the teacher there but with the head of the year or head of key stage 1 or whatever. And the SENCO" (Parent 3)

> "and that's like the missing relationship. I think in everything we've talked about today, isn't it that teachers are sort of almost like gatekeepered by the SENCO" (SLT 7)

In other cases, a barrier to communication was not knowing who they might need to speak to.

> "if you don't know who someone is, how are you ever going to approach them? I haven't got a clue who half the people are at [child name]'s school" (Parent 4)

Lack of accessibility of others to communicate with and therefore work collaboratively with was a barrier to forming a relationship.

> "I understand more about the teaching assistants than I do about the teachers 'cause I feel like spend less time with them. And we tend not to speak to them for very long, if we do speak to them. So there's no sort of continuity with the teacher" (SLT 3)

The success of communication and feeling part of the 'team' impacted on feelings about self.

> "I look like [...] I don't know what my job is. [...] it puts me in a tough position that if the communication is not open, if it's not being relayed back to everyone involved" (Teacher 4)

2. *Relationships and being understood*

A person-to-person relationship with those you are working with was a fundamental need within the collaborative relationship. Trust that the people you are working with would fulfil their role (or what you understand it to be), and would be open and honest with you was important.

> "I think luckily, our TAs have good relationship with our SENCO. So they feel confident to go and speak to them about that. So I very fully trust my teaching assistants to raise any concerns. And sometimes they might notice things before even I do" (Teacher 1)

One parent described a previous experience: "I found out later they'd done an observation without me knowing", and its impact on their working relationship.

> "I was completely let down by that [...] teacher and then I lost trust [...] every year I'm calming down a bit because I'm having better experiences, but they need to know that a bit as well" (Parent 3)

Other PPI members sought compassion and understanding for their experiences with supporting the child with SLCN.

> "we're not saying things to be awkward [...] it's for a reason" (Parent 4)

> "You want to really feel, hear and see that they care and that they're not dismissive and they're not defensive" (Parent 3)

One SLT suggested being "more vulnerable" would help the relationships.

> "Maybe something we could do to support it is just everybody just being a little bit more vulnerable. Just saying 'I don't know. Let's talk about it" (SLT 6)

Ongoing relationships, with opportunities for back-and-forth discussions over time, were seen as important for relationships and for effectively supporting a child.

> "I think as well in reception obviously we try and get to know the parents so well [...] at the gate every morning chatting with them. [...] just maintain that relationship and not making it seem like a big scary thing" (Teacher 1)

The feeling of being "awkward" or an extra demand when raising concerns, asking questions, or discussing SLCN support, indicates one way in which views of responsibility for supporting SLCN (i.e. an extra demand being passed on rather than a shared responsibility) can impact on the collaborative relationship.

> “I think as well in reception obviously we try and get to know the parents so well [...] at the gate every morning chatting with them. [...] just maintain that relationship and not making it seem like a big scary thing” (Teacher 1)

> “sometimes it's not really a priority for the family or the school, but then obviously it's our bread and butter. So we're like, oh, could.. you really have to do this. And they’re ‘I'm just trying to keep my kid alive!’” (SLT 5)

Within an ongoing, trusting relationship the feeling of ‘team’ and acceptance of sharing responsibility can be established.

> “even someone to come in and watch you do an intervention or see how you get on in the class. [...]. It's sometimes nice to have a fresh face to come in and say that worked really well. Have you thought about this? And then you can trial it and then come back. So this worked, this didn't work” (Teacher 1)

3. Expectations and expertise

All participant groups described feeling the need to be an ‘expert’, whilst teaching staff and parents called for ‘specialist’ or ‘expert’ support.

> “The teachers all expect me to know what I'm doing and come to me with lots of questions“ (TA 3)

> “opportunities to build on that specialism, we don’t have because we’re too busy and short of money. […] I would say that there's probably, I’d say mostly from parents and TAs an assumed knowledge or specialism that isn't necessarily always there” (SENCO 1)

> “I also sometimes think that parents think you're an expert in every field of every kind of need there might be” (Teacher 1)

However, the pressure to be the ‘expert’ was also a challenge for SLTs.

> "I think a strain for some of us is there, that they think that we are the experts and it's kinda can be quite intimidating when you come in and ask me all these questions and they are expecting you to know the answer" (SLT 5)

The perception of specialism/expertise was not only used to refer to SLTs and other professionals external to school staff, but also to other people in the same role as themselves (i.e. TAs used it to refer to other TAs). However, no-one self-defined as a 'specialist'.

> "I went on to a great school […] to observe there, because a speech and language therapist told me they're really brilliant. […] they've got this whole room, they've got someone that does it all the time. She was really specialist" (referring to a TA or teacher) (TA 3)

SLT, teacher and TA groups described not feeling confident to fulfil their role, and a sense of pressure and overwhelm at the knowledge expected.

> "Sometimes it feels like, teaching assistants, school support, whoever's supporting the child in school has to be more of an expert because you have to then say there's a need, I'm identifying the need and then I call in speech and language therapist. That's how it's felt to me sometimes, that I'm being expected to be more of an expert than I am" (TA 5)

> "I sometimes feel that I should be more knowledgeable than all my teaching assistants and sometimes that's not the case. If I've not had that training or I've not been tasked with that" (Teacher 1)

Relatedly, parents, teachers and TAs described needing to find out about SLCN independently in order to feel better equipped.

> "That's what I've asked for my SENCO, [...] even to shadow someone, you know speech and language for a day […] If you come from somewhere where you've got no idea, you think 'am I doing this right?' [...] you're relying on YouTubes and things like" (TA 4)

This reflected feelings of isolation, that there is "no-one to ask" (TA 3) or learn alongside.

4. Beliefs about responsibility for SLCN support

PPI members often spoke about where they felt responsibility should lie.

> "Parents tend not to take responsibility […] if we said, 'have you practised that at home?' would be 'no, not at all'. And parents are very keen to know how many times they're being seen every week" (SENCO 2)

> "I think there's definitely a shift now. On childcare workers and teachers. Of well, that's not my responsibility that's yours. Oh they'll deal with that at school. [...] there's definitely 'oh, how are you going to fix it?'" (Teacher 5)

> "They think that we're the ones that meant to be doing this […] we're not the ones that are actually best suited to do this sometimes, actually you're seeing them so much more than us" (SLT 4)

Most talked about responsibility as passed on to another person rather than shared, which often led to the responsible person or service feeling alone without a team to work with.

> "Sometimes I feel our SENCOs like referring to speech is like a tick box exercise for them. Like they've done their job. I referred in the professional. So now that's it" (SLT 7)

> "I think that they're so busy teachers and I think they just think… [...] I don't think it's anything negative, they just think [...] that someone comes in to do speech and language" (TA 3)

> "Why does everybody else close [discharge] after six weeks? [...] as long as they're at school, other people, other services, can move away. They can be more flexible, they can close, they can, whatever. But…" (SENCO 2)

However, when discussing how collaboration worked when it was effective, or what might be more effective, shared responsibility was described.

> "The teacher should know, because then they can help 'did I hear you say your sound' or 'was that your old sound?' or something. Just so we're all on the same page [...]. It doesn't have to be they're coming out of class to do an intervention, it

could just be that everybody could be reminding them or modelling back the sound" (TA 3)

The desire to be part of a team all working together and taking responsibility was felt by parents, teaching staff and SLTs alike.

> "so it's not so much us and them, it's more we're working together for the same goals" (Parent 5)

> "We want it to be more mutual problem solving. This is the problem. OK, let's put our heads together. It's the way it would work best but it's more a question and answer session" (SLT 2)

> "In the classroom we could have meetings which would be better because we don't all know what's happening with every child" (TA 1)

Responsibility was intertwined with implications about how the PPI member viewed effective SLCN support taking place. PPI members spoke about interventions taking place outside the classroom, led by TAs, revealing their experiences and perceptions about effective SLCN support.

> "if I waved a magic wand it'd be to have a speech, language, speech and language therapist in the mainstream school. All the time to deliver all of the interventions" (SENCO 3)

Less often was the need for adaptations during everyday interactions mentioned.

> "it's OK having the interventions here and there and that's great for those really severe cases. But when, like us, you've got that general thing across the class [...] everybody's got a bit of something, if I just do it to everybody, as part of my everyday teaching, then one it's not anything different, and two, they're not missing out on anything" (Teacher 5)

Relationships between the themes

Co-researchers AM and KLS identified the inter-relations between the themes. An interaction between 'communication' and 'relationships' was identified, with improvements

in one supporting the efficacy of the other. Beliefs about responsibility for SLCN support also impact on relationships, with shared beliefs fostering them, and a mismatch having a significant impact. Shared or conflicting beliefs about responsibility for SLCN support impact on 'expectations and expertise'. Additionally, feelings of lack of confidence or overwhelm impact approaches to passing or sharing responsibility. The relationship between 'expectations and expertise' and 'relationships and being understood' was also developed, with one co-researcher describing how "the relationship you have bolsters you", and impacts on confidence and feeling (or lack of) overwhelm. Conversely, when the relationship is not strong and people are "tip-toeing around each other", impacting confidence levels, potentially leading to feeling in need of 'specialist' support. The relationships between the four themes can be represented as seen in Figure 1.

[Figure 1 about here]

Evaluation of PPI

Preliminary co-research phase: Each co-researcher answered reflective questions throughout the PPI process, and participated in a final reflective interview, to enable narrative analysis of the process. All decisions were recorded in an impact log.

Impact on the main advisory phase: The numerous ways in which the co-researchers impacted on the design, delivery and interpretation of the advisory PPI work have been discussed in the paper. These supported PPI members from different professional backgrounds to participate, both practically through developing the recruitment strategy, and by ensuring their participation was meaningful by supporting understanding and openness within the focus groups. Simple changes suggested by co-researchers, such as e-mailing the introduction and guidelines to PPI members the day before, and making whiteboard notes during the conversation, supported PPI members' understanding of the aims, and participation within, the focus groups. During the discussions around coding and interpretation, co-researchers further related the PPI members' responses to their own experience.

Co-researchers' reflective logs, and interviews following the project, stated they felt they had a greater knowledge of the research process, and enthusiasm for its importance. They enjoyed the process of working together as a team with different skills and experiences and saw how this helped the PPI work. Co-researchers spoke about being pleased that they were able to ensure their own and peers' voices were represented in the directions taken by future research, and a passion to improve collaboration to support children with SLCN. They found that hearing peers' experiences made them feel less alone. Co-researchers felt they developed skills and confidence in running focus groups. Co-researchers commented that this project prompted them to reflect on their own practice, and be more pro-active in ensuring all members in the collaborative process are informed and involved (e.g. making sure TAs have seen SLT reports, or making sure they are discussing children's support regularly with the class teacher). They reported a greater understanding of the pressures on the other people they were working with, and thinking more about the 'bigger picture' (i.e. what is happening for the teacher/TA/child within the whole class context, or what is happening for the child at home). D'Armour et al. (2008) speak about those involved in the collaborative partnership being aware of the differences between each other, and managing those differences. This awareness has been raised through the act of a collaborative project for the co-researchers, which indicates a way in which mutual understanding can be developed. One co-researcher commented that she is now aware of how complex the act of collaboration is, and another said previously she had seen everyone's roles as separate, but now sees all parts have to work together. Another spoke about the wider benefits to her workplace in showing engagement in research and showing that they are valuing the importance of collaboration.

Main advisory phase: All PPI members actively contributed within their focus groups/interviews. It is acknowledged that the information generated is a result of a specific social environment, and the same PPI members may provide different responses within a different group or with a different facilitator (Cyr, 2016). One aim of this PPI work was to ensure parent/carers and TAs were represented during the identifying and prioritising research topics phase, to inform a programme of planned research by the lead author, which will address key collaboration barriers in a wider context; and will seek to offer more transferable recommendations. The TA focus group reached the 'performing'

phase (Tuckman, 1965; Bonebright, 2010) where all members appeared to be speaking freely, and the TA co-researcher reflected afterwards that she felt that the focus group facilitated the open sharing of experiences and views due to there being less of a power imbalance, as the focus group was facilitated by a TA. PPI members who were not co-researchers also reflected positively on the experience. One parent/carer who attended a focus group also said "It felt very compassionate as well, and I think we were both heard". Another PPI member who participated in an advisory PPI interview shared valuing the time to reflect on collaborative working: "It's been lovely talking about it, 'cause you don't often [...] get the time to talk about."

The focus group length was constrained by the amount of time that school staff could be available, but if longer groups had been possible there would have been more time at the performing stage. The in-person focus groups and one of the virtual focus groups reached the performing stage quicker than the other virtual focus group, thought to be due to issues with audio and video for one attendee.

Discussion

Implications for research and practice

The aim of PPI is to ensure the involvement of stakeholders in research, in order to make the research more relevant, and have greater impact. The ultimate goal of this PPI work was to involve stakeholders in identifying the focus for a planned programme of future research, which will develop recommendations and resources regarding optimum collaborative practice to support children with SLCN in mainstream schools. We identified some areas of collaborative practice which are important to key stakeholders, that will be the focus of the future research to support collaborative working at an interpersonal level: *'communication and accessibility', 'relationships and being understood',* '*beliefs about responsibility for SLCN support'* and *'expectations and expertise'*. We also identified some of the complexities, inter-relationships and crossovers within the themes.

Complexity of concepts

This PPI data highlights the complexity within previously identified socio-relational factors, in particular 'shared responsibility', 'philosophy of inclusion' (McKean et al., 2017) and 'clarity of roles' (Band et al., 2002), and this will be taken into consideration when designing the proposed future research programme. Whilst 'shared responsibility' is discussed within the current literature (e.g. McKean et al., 2017), underlying beliefs about who shares responsibility, and what effective SLCN support should consist of, appear key to working towards true sharing of responsibility. In day-to-day collaborative working, the distinction between 'clarity of roles' and understanding of each other's perceptions about where responsibility or role duties *should* lie, is crucial. If there are differing perceptions of responsibilities, then a co-working document may be ineffective. Views on what effective SLCN support should consist of were seen in these PPI contributions to influence beliefs about responsibility. PPI members speaking about 'interventions' outside of the classroom indicates their conceptualisation of SLCN support. The 'philosophy of inclusion' as it relates to school placement for children with SLCN, identified in McKean et al. (2017) as a shared philosophy, was not questioned by these PPI members. However, inclusion relating to SLCN support within the classroom appears to be a potential area of differing philosophies, which cannot be assumed and may need further research to fully understand. The importance of having shared beliefs and philosophies for successful collaboration has been previously identified (e.g. Elksnin and Capilouto, 1994; Hartas 2004), and this PPI work suggests that this may be particularly important within the areas of responsibility, expectations and expertise. Beliefs about responsibility for SLCN support will be a crucial part of the future research programme. The future participants' views and experiences of inclusion and SLCN support will be sought prior to discussion of roles and responsibilities, to explore the relationship between philosophies relating to SLCN support and views of roles and responsibilities, and expectations within collaborative working.

The complexity of the concepts within the themes and subthemes, such as 'trust', 'respect', 'vulnerability', and 'overwhelm' is acknowledged, with this PPI work providing examples of how these have been experienced (for example benefiting from ongoing relationships to develop, as also raised in McKean et al., 2017; Quigley and Smith, 2022). We echo Forbes et al. (2019)'s call for further research to explore more deeply how complex concepts such as trust and respect are experienced and built, and the need identified in D'Amour et al.

(2005)'s literature review for clear boundaries between the underlying concepts. The future research topic guides will be co-produced with school staff and parent/carers of children with SLCN with a specific focus on which terms are used to increase the likelihood of similar interpretation of concepts such as 'vulnerability' and 'respect'. Furthermore, the complexity and indistinct boundaries between the concepts identified within the themes and subthemes will be a crucial area probed within our wider programme of research.

Inter-relationships between concepts and themes

There are complex inter-relationships between the identified themes within this PPI work. The inter-relationships between the themes are reflected within the research literature, for example some teaching staff participants in Mroz (2006) expressed reluctance to receive training in SLCN as this would make them responsible for an area they felt they were not an expert in (showing the relationship between '*beliefs about responsibility for SLCN support*' and '*expectations and expertise')*. Within previous Social Capital Theory analyses, when the individual practitioner factors are in place (e.g. there is shared understanding of roles, communication is open and honest) then trust and reciprocity are said to increase, which strengthens relationships (McKean et al., 2017) and fosters strong social capital at the institutional level (Forbes et al., 2019). However, these analyses do not look at the specific inter-relationships between the individual factors. The Four-Dimension Model of Collaboration (D'Amour et al., 2008) represents the inter-relationships between its dimensions. Within this model, there are two organizational dimensions, focusing on the systems and structures within an organisation which impact on joint working; these are 'formalization' and 'governance'. 'Formalization' includes the formal structures in place for clarifying expectations and responsibilities, and whether these are being adhered to, and also includes the systems in place for communication. There are two relational dimensions, i.e. dimensions focusing on relationships between individuals, these are 'shared goals and vision' and 'internalization'. 'Internalization' refers to self-awareness of relationships with others, each others' values, mutual trust and a sense of belonging. Further socio-relational factors relevant to the 'internalization' dimension such as honesty, vulnerability, confidence and overwhelm, were also raised by the PPI members within this project. PPI members' contributions also highlighted the importance of shared beliefs as well as shared goals and vision, and so future participants' underlying beliefs relating to inclusion, SLCN support, and

collaboration, will be probed prior to discussion of experiences of collaborative working. D'Amour et al. (2008)'s model represents the interdependence between the organizational and relational dimensions, reflecting the interaction between communication and accessibility, and relationship building. Understanding the relationships between the socio-relational factors, emotions and belief systems appears key to a fuller understanding of how collaborative working relationships are experienced and developed.

Across all themes, PPI members spoke about their feelings relating to their experiences, and it is important to consider how these may impact on their future actions in collaborative practice (as discussed by Forbes et al., 2019). The sense of pressure and overwhelm is an important part of the theme *'expectations and expertise',* taking this beyond joint discussion of who has expertise or a role in each area (as previously identified; Band et al., 2002; Forbes et al., 2019; Greenstock and Wright, 2011; McCartney et al., 2010; Mukherjee et al., 2002). Perception of self-efficacy was also present within the themes *'communication and accessibility'* and *'expectations and expertise'*. The desire to be part of a team, and feelings of abandonment when this isn't the case, came across strongly within the theme *'beliefs about responsibility for SLCN support'*, and was also present in the theme *'expectations and expertise'*. In practice, teachers may not be involved in decision making about where and how SLCN support is provided (McCartney et al., 2010), and lack of involvement in the collaborative process leads to feeling undervalued (Baxter et al., 2009). Exhaustion and feelings of inefficacy have been found in health and education professionals due to the personal relationship demands (Maslach and Leiter, 2016; Squillaci and Hofmann, 2021). It is important to identify and acknowledge the impact of these feelings within theoretical understandings of the collaborative process, and within working relationships. Although members of the group did not raise connections between 'communication and accessibility', 'beliefs about responsibility for SLCN support' and 'expectations and expertise', we acknowledge that all four areas are likely to impact each other. In our future work, we will extend the models previously used in this area, so that shared beliefs, and the impacts of feelings on experiences and actions, are included more fully; and the relationships between the themes can be probed more explicitly to better understand where and how these themes overlap.

Involvement of all stakeholders within research

This PPI work demonstrates the value in involving all of the parties involved in the collaborative process within the research. Our PPI members referred to their collaboration with all other members of the collaborative process (not solely school staff, or SLT-parent collaboration). Looking at the relationship between two individuals out of the context of the network could lead to important influences on the collaborative relationship not being understood or acknowledged. When developing advice or services, a co-design approach involving parents/carers of children with SLCN and teaching staff is likely to be most effective for all parties. Our future planned research will explore collaboration between all members of the process, and will record socio-demographic data, ensuring that the broad range of professions involved, and parents/carers, are represented. That PPI members spoke strongly about having person-to-person relationships, shows the power of these even when working within service constraints. This is important to acknowledge at service level and individual level, with time and opportunities being given to establish the relationship (Baxter et al., 2009) and continuity wherever possible to allow for ongoing relationships (Baxter et al., 2009; Hartas, 2004). One of the co-researchers identified the need for training or support for SLTs, teaching staff and parents/carers in how to work collaboratively effectively. In addition, whilst SLT services may feel they provide or signpost staff and families towards SLCN training, PPI members described feeling they were left to find out about SLCN on their own. SLCN training and support must be accessible, timely, and focused on the areas needed by families and education staff. Additional support could include workshops, parent friendly information leaflets, or SEN surgeries, but these important issues will now feature more prominently in our next research phase. Methodologies or models which can identify ways to develop strong collaborative working, such as stakeholder appreciative inquiry as used by Gallagher et al. (2019; relating to supporting children with Developmental Language Disorder) will be considered to help achieve this. In addition, methodologies which explore how collaboration develops when this support is in place (e.g. participatory evaluation used by McCartney et al., 2010, action research used by Quigley and Smith, 2022) will be considered, as these may be the most fruitful way forward to influence practice.

Strengths and Limitations

This PPI work was developed and carried out by a team of co-researchers, who have the same roles as the PPI members. As such, it made it more likely that previously under-represented voices will be heard, and paves the way for future research and co-produced approaches to support collaboration to include TAs and parents/carers as well as teachers and SLTs. To support the trustworthiness of the PPI work, a number of elements were included within the PPI process. Reflexivity was ongoing throughout the data collection and interpretation. Field notes and reflective diaries were made by the lead author following each focus group, interview and each meeting with the co-researchers. Co-researchers were also asked to reflect on their experiences following every meeting and following the focus groups. The use of codebook thematic analysis, remaining open to new codes and themes throughout the process, supports a comprehensive, sensitive interpretation and supports the likelihood of identifying any potential new inter-personal factors, and uncovering the complexities and inter-relationships of previously identified factors. The co-researchers were pivotal in identifying the codes, and validating the themes during the analysis process. To support the empirical adequacy of the themes and subthemes (Wiltshire & Ronkainen, 2021), a second researcher (NB) independently coded a portion of the dataset (the quotes within this paper), resulting in 80% agreement.

Due to the challenges recruiting teaching staff to research projects, a convenience sample was used which was facilitated by using the co-research team's previous professional relationships. We did not collect socio-demographic data which we acknowledge as a limitation. The co-researchers identified that the PPI members were all passionate about supporting SLCN, and in future research it will be important to gain access to the unheard voices, or use other methodologies to explore these. The 'Someone who isn't me' (Wilson et al., 2015) technique could be used. This involves first asking research participants to identify another member of teaching staff, SLT or parent/carer (who shares their role). After providing their own responses to a question or scenario, the participants then also respond as they imagine their identified person might.

Owing to the scope of this small scale PPI study, we were unable to check with the PPI members individually whether we had interpreted correctly their intended meanings during the focus groups or interviews. Repeat interviews could also not be carried out. Furthermore, only the lead author coded the transcripts. These limitations will be addressed in the future planned research.

Implications for co-research

There are a number of important learning points for future co-produced research with teaching staff and parents/carers of children with SLCN. Further training was also requested, with co-researchers commenting that they were worried about "getting it wrong". Balancing keeping meetings short and therefore accessible to busy parents/carers and teaching staff, whilst spending the time needed, is a challenge. On discussion with the teaching staff co-researchers, it was suggested that having more than one teacher and TA as part of the project, with clear division of responsibilities, would ease the time burden and gain a wider range of perspectives. A clear contract at the beginning of the project, so that all were aware of the roles within the project, with payment information for parent/carer co-researchers, would have been beneficial. A shared project timeline online was also suggested by a co-researcher, to help all researchers keep track of the project activities, and sign up to those they are able to participate in. This could support all co-researchers involvement, as all are managing timetables and demands from both work and home lives.

Conclusion

This PPI work has identified four key themes (Communication; Relationships; Expectations; Beliefs), which revealed more nuanced discussions of overwhelm and responsibility in relation to expertise; and the power of person-person relationships in navigating collaboration. These themes will feed directly into our future research programme exploring the inter-personal factors which influence collaboration, so that our planned research focuses on the areas of greatest importance to those involved in the collaboration. Teaching staff, SLTs and parents/carers of children are all involved in supporting children with SLCN, and must all work collaboratively to ensure the best support for the child, but the complexities and sensitivities make researching the factors influencing collaborative working challenging. It is likely, for example, that different cultural, linguistic and socio-

demographic experiences all impact on individual engagement in the collaboration process. This PPI work has therefore been crucial to ensuring that the subsequent research programme is focused, relevant and meaningful, and ultimately impacts those whom it is seeking to support. The views summarised in this article are reported in the hope that they will not only feed directly into our more in depth research exploring inter-personal factors and collaboration, but may also be used by services and individuals to reflect on their own collaboration at an inter-personal level. In this way, we hope this PPI work has the potential to inform both our planned future research and current practice.

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Figure 1: Relationships between themes discussed by the co-research team