

# **Learning from mothers: How myths, policies and practices affect the early detection of subtle developmental problems in children**

Thesis submitted by

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**In December 2005**

**for the degree of Doctor of Philosophy  
in the School of Nursing Sciences  
James Cook University**

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## STATEMENT ON THE CONTRIBUTION OF OTHERS

This thesis has been made possible through the support of many people as follows:

### Supervisors:

Primary Supervisor: Professor Colin Holmes  
School of Nursing Sciences, James Cook University

Secondary Supervisor: Associate Professor Kim Usher  
School of Nursing Sciences, James Cook University

### Financial assistance:

School of Nursing Sciences Scholarship: \$15,000 per annum

### Peer Reviewer:

Dr Mary-Ann Hardcastle: Staff Education, Townsville Hospital

## **ACKNOWLEDGEMENTS**

There are a number of people, colleagues and friends, who have contributed in some way in the development and completion of this thesis through their gift of time, advice, encouragement and support.

I am indebted to Professors Colin Holmes for his patience, careful supervision and encouragement throughout my years of candidature. Appreciation is also extended to Professor Kim Usher who contributed in a co-supervisory role.

I would like to express my deep and sincere appreciation to all the key participants who assisted with the study, unselfishly sharing their time, thoughts and ideas about their experiences as mothers. These stories make up so much of this thesis.

Finally, I would like to thank my family, friends and work colleagues for their unending tolerance, encouragement and support over the years of my candidature, in particular, my husband, David for his willingness to share the burden of household responsibilities, and for my children Hugh, Alistair and Megan for remaining steadfast in their belief that nothing would change and that 'mum can do anything'.... including their homework, washing, ironing and cooking. Thanks also to my fellow PhD student, Mary-Ann Hardcastle who shared both the joy and the tears, as well as giving me much appreciated feedback on my draft material. Thank you to my colleagues in the school of Nursing Sciences who humoured me in times when laughter was indeed the best medicine. I am certain that the completion of this PhD only occurred because you all believed in me.

Thank you.

## KEY TO TRANSCRIPTS

In the presentation of the research findings (Chapter 4, 5 and 6), where excerpts from the participants are included, the following abbreviations and font styles have been used:

**Long quotes:** All the names used within this thesis are pseudonyms (refer to appendix 2 for further information). Pseudonym name, transcript page and sentence number/s identify excerpts from participant interviews.

E.G. I became a mum to be a mum, so I don't want to have to pay for someone else to raise him (Kimberley, p. 11, 39-41).

[ ] has been used to indicate where words of sentences have been removed from the middle of the quote (usually for the purpose of brevity).

**Short quotes:** When a few words, or word, have been applied within a sentence in the main text, this is specified through the use of quotation marks.

E.G. 'neurotic mother' (Nerida p. 1, 30),

### Additional information

Additional information is sometimes included within quotes to clarify words or to include a mother's action. Brackets and the use of italics identify these.

E.G. ....you know, having gone through all the problems I had with Michael (*an older child*) just in the first few months..... I had no worries bringing up a second child...so I didn't worry about going (*to the child health clinic*)...the only time I went was to get him his needles, get him weighed, things like that...but there was no...nothing to worry about...not at the time, she (*the child health nurse*) wasn't overly worried about anything.....(Rebecca, p. 16, 26-32).

. . . Indicates that the participant paused for more than two seconds.

## **ABSTRACT**

### **Background**

Recent research has revealed increasing concerns over the number of children entering school with unidentified developmental problems even though there are seemingly comprehensive health services available for mothers and their children in the pre-school years. Recognising that early detection and early intervention reduces the likelihood of long-term serious health and educational problems, it is important to understand why so many children have not been detected with developmental problems in their pre-school years. Utilising the knowledge and experience of mothers' whose children had not been diagnosed with developmental delay until school age, this study draws attention to reasons how and why children with subtle developmental problems 'slipped through the net'.

### **Research Question**

What can be learned from the mothers' experiences of their child's development that will contribute to improving the early detection of subtle developmental problems in children?

### **Aims**

This study had four specific aims: (1) to document mothers' stories about their experiences of raising a child with developmental problems that remained undiagnosed until school; (2) to ascertain the extent to which mothers' were 'aware' of developmental problems with their child prior to school entry; (3) to determine the environmental characteristics associated with parent's experiences and their interpretation of these experiences and, (4) to ascertain ways in which child health professionals may utilise the experience of parents to improve early recognition and diagnosis of subtle developmental and behavioural problems in children.

### **Theoretical framework, methodology & method**

Recognising that parenting does not occur in a vacuum, but is influenced by the immediate surrounds, the community and the larger socio-economic, cultural, political and historical environments, a social constructionist perspective was utilised as the framework for this research. A synthesis of interpretive biography and literary folkloristics provided a method of collecting, reading and interpreting the life stories of mothers whose children had not been detected with developmental problems until



school age. The life stories were obtained through individual, in-depth interviews of eight mothers who lived in the North Queensland region of Australia, and were read through the lens of three literary theories, arising respectively from the tenets of semiotics, neoMarxism and Foucauldian poststructuralism.

### **Findings & Conclusions**

Findings draw attention to a number of factors that influence the interaction between mothers, health professionals and community members and how these impact on early detection of children's developmental problems:

- competing messages about motherhood affect how mother's decide on the best course of action when concerned about their children;
- societal myths influence how mothers and health professionals view their roles, the child's problem and subsequent action;
- health professionals' knowledge is valued over mothers' knowledge;
- expectations of the role of the health professional, influenced by mythical ideals and ideological notions, differ between mothers and health professionals;
- communication between health professionals and mothers is distorted due to different approaches to language and understanding;
- competing arguments about the value of diagnosis and labelling delay identification and access to assistance programmes for their children;
- a medical diagnosis plays an important role in how support and assistance is determined.

### **Significance**

This research has raised awareness of constraining social, historical and political factors on how mothers and health professionals interact, and the effect this has on the early detection of childhood developmental problems. Bringing these constraints to the attention of health professionals working with mothers and their young children will hopefully encourage active engagement with parents and the acknowledgement that health professionals and parents can work together to improve the early detection of developmental problems in children.

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