Possible answers

Sociolinguistic analysis

Orientation – He was 14 months old and my husband virtually had to threaten the doctor at X hospital to tell us what was wrong.

Complicating actions

- We knew there was no sign of him [child] trying to sit up at the time. Very quiet, didn’t move a lot, hardly cried – more a sort of a whine.
- The doctor was very evasive and my husband said ‘We’re not leaving until you tell us and you’re not leaving until you tell us.’
- Then he called another doctor behind a screen and they had a whispered conversation.

Evaluation: Then he came back. He felt ‘there was a certain degree of retardation but no specific reason why’

Result He told me to continue on with what I was doing and he told me that once a month for four and a half years.

Range

- Oa5 He was 14 months old and my husband virtually had to threaten the doctor at x hospital to tell us what was wrong.
- 1b0 We knew there was no sign of him (child) trying to sit up at the time. Very quiet, didn’t move a lot, hardly cried - more a sort of a whine.
- 2c0 The doctor was very evasive and
- 3d1 you’re not leaving until you tell us and you’re not leaving until you tell us”.
- 4e0 Then he called another doctor behind a screen and they had a whispered conversation. Then he came back.
- 5f0 He felt “there was a certain degree of retardation but no specific reason why”.
- 0g0 He told me to continue on with what I was doing and he told be that once a month for four and a half years.
Sociocultural analysis

Political and social context: The boundaries and context relate to the difficulties of gaining a diagnosis for a child with developmental delay. The narrative arose in response to the question to the parents of a child with severe disabilities: ‘when did you first find that your child had a disability?’ The political context of a poorly funded public health system plus the legal aspects of a doctor or hospital taking responsibility for malpractice at birth or misdiagnosis are evident in the caution of medical responses. The primitive nature of knowledge in medical science is also evident.

Contrasting stories: The wife’s view – extreme frustration is evident not only with the diagnostic delay but also with the lack of any real advice as to how to proceed, how to improve the capacities of her child and how this delay might further manifest as the child grew older.

The father’s deep frustration has risen to the point of threatening neither to leave nor to let the doctor leave until some clearer information had been transmitted between the doctor and the parents.

The doctor clearly doesn’t know what is wrong nor how to share this lack of knowledge nor what advice to give the parents as to what they might expect or have to deal with in the future. He tries to protect himself by consulting with a colleague and returns to tell them what they already know – that the child has developmental delay but that he doesn’t know why and that he has no advice to give except to send them on their way doing whatever they have been doing previously.

Here we have a conflict situation with the parents challenging the doctor to provide information – but information he does not have.

Actor and researcher: The researcher was positioned in that she was being funded to explore the topic of integration of young people with a disability into community settings and as part of that study she was interviewing parents to find out their experiences of interaction with the medical profession, the school system and the workforce systems. The actor is the mother of the young man with disability who, like all the parents in the study, had often had years of battling with the healthcare system to gain a diagnosis or any indications of what they should do to improve the life of their child.

Reader? (identify your own position)

Interpretation: The maintenance of power, fear of legality and limited knowledge of the medical profession can be seen here in the lack of readiness of the doctor to admit he doesn’t know and can’t/won’t help. The power of individuals who, in their frustration, have gone beyond the passive role of patient to one of client demanding answers and threatening harassment and imprisonment until information is forthcoming is also evident.