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Approaches to collaboration and support in early childhood education and care in Finland: professionals' narratives

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ABSTRACT

Children with intellectual disability and autism often receive support which is organised with interprofessional collaboration in early childhood education and care (ECEC). In Finland, a new ECEC curriculum was launched in 2022. The core curriculum and renewed legislation on ECEC emphasise collaboration between professionals and parents. In this study, we examined approaches and practices regarding collaboration and support in the context of Finnish ECEC. The data were collected from ECEC professionals (N = 104) using the method of empathy-based stories (MEBS). The MEBS used frame stories through which professionals responded to a variety of descriptions about a child's situation, whether positive or negative. The analysis resulted in four narratives, which were about: 1) a culture of self-survival and individual responsibility, 2) interprofessional collaboration as a core method 3) one's own and the team's competence supporting the child, and 4) pedagogical practices in constructing inclusion. Findings suggest that, teamwork and interprofessional collaboration should be enhanced in pre- and in-service training and practices in ECEC.

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Introduction

Children who most often receive support with collaborative approaches have been diagnosed with intellectual disabilities, autism, or severe emotional and behavioural issues (e.g. Hallahan, Kauffman, and Pullen 2009; McCabe et al. 2020; Pesonen 2016; Ruppär, Allcock, and Gonsier-Gerdin 2017), and they may have a particularly high risk of being excluded from mainstream education (Kurth et al. 2018; Äikäs and Pesonen 2022). Teachers often encounter challenges in supporting these children in inclusive settings (Saha and Pesonen 2022). The methods of special educational support vary, since different children need different levels and types of support. The support varies from structured daily routines (e.g. pedagogy) to flexible groupings, collaboration between different units of extensive expertise – for example, when planning teaching by activity areas, hospital

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ECEC or the use of alternative and augmentative communication (AAC) methods – and other supportive methods (Browder et al. 2014).

Interprofessional collaboration in ECEC is not a specific special needs education service or organisational structure – instead it is available for all children. It is the foundation of support and has become a method of working in special needs education, social work, and healthcare (Glaser and Suter 2016; Bronstein 2003; D’Amour et al. 2008; Bricker et al. 2022). Interprofessional collaboration has been found to be beneficial (Berridge, Mackintosh, and Freeth 2010; Reeves et al. 2010; Anderson 2013), and the importance of educating future professionals to work together is evident (Santagata and Guarino 2012; Dobbs-Oates and Watcher Morris 2016). Interprofessional collaboration has also been emphasised in the recent educational reforms in Finland (FNAE 2022; Act on Early Childhood Education and Care 540/2018).

In this study, we investigate the collaborative practices for support in early childhood education and care (ECEC). In addition, we focus on the challenges facing those practices in the context of ECEC. Due to legislative reform in 2022, legislation (Act on Early Childhood Education and Care 540/2018) and curriculum (FNAE, 2022) highlight children’s right to receive support for their development and learning through general, intensified, or special support. However, national reports indicate that the child’s right for support is not practised systematically and that there is great regional variation in support (Eskelinen and Hjelt 2017). Implementation is particularly diverse and uncertain when the child needs more intensive support, as the staff does not have sufficient skills and stable interprofessional collaboration in ECEC (Heiskanen et al. 2021).

Practices and approaches to interprofessional collaboration

In relation to interprofessional collaboration a praxis called ‘significant support’ has been highlighted in research (Äikäs and Pesonen 2022) and recognised in Finnish ECEC practices within the field (Heiskanen et al. 2021). It refers to a way of working when ensuring child’s support in Finland, yet it is not a particular service and nor a specific part of special support. Significant support might appear in situations in which the child’s most beneficial and functioning support needs to be organised with interprofessional collaboration. Although the term ‘demanding special support’ (verbatim translation from Finnish) has been used when describing such praxis in Finland, yet ‘significant support’ is more in line with international literature (e.g. McCabe et al. 2020) and emphasises the accessibility of the interprofessional support in all support tiers.

The concept of significant support is recognised in the legislation of Vocational Education (531/2017) yet not included in the ECEC or primary school legislation (Act on Early Childhood Education and Care (540/2018); Act of Basic Education (628/1998)), and was also not included in the 2022 Law Reform in ECEC either. However, the current working methods for support emphasise planning, individuality, dialogue, systemic thinking, and interprofessionalism, which are the practices of significant support. Yet the support teams are implemented in ECEC in varying degrees and with different structures (Heiskanen et al. 2021).

The ECEC curriculum in Finland (FNAE, 2022) refers to interprofessional collaboration among different experts and administrative systems, such as basic education and healthcare (including child health clinics, speech or occupational therapists, and psychologists).

Moreover, interprofessional collaboration includes cooperation among ECEC professionals with various educational backgrounds, for example, ECEC teachers, ECEC social workers, ECEC nurses, and special education teachers (FNAE, 2022). Within this kind of collaboration, all parties are responsible for implementing children's support, each on the basis of their own competencies and training (FNAE, 2022). However, neither the law nor the curriculum defines the requirements or structures for interprofessional collaboration in ECEC (cf. student welfare groups in basic education). This challenges the implementation of systematic interprofessional cooperation in the ECEC context.

Autism and developmental disabilities are often identified during early childhood. Research in ECEC concerning children with a the need of significant support has mainly focused on interventions (e.g. enhancing social skills), behavioural matters (see Martinez et al. 2021), and inclusive practices (e.g. Olsen et al. 2019). Implementing support often requires functional interprofessional collaboration (Suhonen et al. 2019). Although previous studies have indicated inadequacies in the implementation of interprofessional collaboration (Bricker et al. 2022; Hart Barnett and O'Shaughnessy 2015), successful collaboration is possible; trust, mutual respect, and functional communication between the parties are prerequisites for promoting inclusive practices (Toros, Tart, and Falck-Ericksen 2021; Hart Barnett and O'Shaughnessy 2015). Currently, research on collaboration has strongly focused on cooperation with guardians (e.g. Kelly et al. 2021; Cameron and Tvei 2019), yet interest is growing in interprofessional collaboration in ECEC (Fukkink and van Verseveld 2020).

The coordination of services and permanent partnerships promote the best possible implementation of collaboration and child support (Brown, Klein, and McCrae 2014; McCrae et al. 2016). Educators often feel that they do not have the knowledge or capabilities to support these children (Nislin and Pesonen 2019; Saha and Pesonen 2022). Therefore, it is important to study how to enhance the implementation of support, the collaboration, the challenges the professionals face, and what constitutes ideal support.

Consequently, in this study, we answer the following research questions:

- (1) How do ECEC professionals approach the collaboration in the situation where they have a child with intellectual disability and autism?
- (2) What constitutes the ideal practices and support?

Methods

Participants

Participants (N = 104) were mostly early childhood special education teachers (n = 69, 66.3%) and ECEC teachers (n = 24, 23.1%). Other professionals (n = 11, 10.6%) included ECEC nurses, assistants, managers, special class teachers, project coordinators or ECEC social workers. Almost all participants were women (96%) and they were recruited through university-led in-service training and research project (2021–2022) focusing on significant support in ECEC in Finland. The project was advertised by the funder Finnish National Agency for Education and in social media (Twitter, Facebook). Participants who voluntarily signed up for the project's in-service trainings sought for professional development opportunities about significant support. The participants were aware of the term

'significant support' because the training programme's title included such a description that has been also recognised in the practices in the field. Participants were also aware that the training deals with interprofessional collaboration among other topics.

Procedure

Ethical principles, privacy, and data protection legislation (Privacy Protection Act 1050/2018) were followed. Before the project's first in-service training in November 2021, we asked all the participants (N = appr. 350) to complete a voluntary online survey including quantitative and open-ended questions. Informed consent was required.

We used the method of empathy-based stories (MEBS) as part of the open-ended questions in the survey (see also Kultalahti et al. 2015; Pesonen et al. 2021). MEBS is a qualitative data collection method that produces data describing e.g. participants' perceptions, and sociocultural representations of a certain phenomenon. MEBS uses frame stories that often oppose each other (e.g. negative vs positive scenarios) and prompt participants to produce short stories (Wallin, Koro-Ljungberg, and Eskola 2019). The frames describe events or situations that professionals can relate to, either based on personal experiences or by imagining themselves in the events (Wallin, Koro-Ljungberg, and Eskola 2019). Thus, MEBS does not necessarily focus on actual lived experiences, as the writings can also portray possible connections and perceptions based on participants' imagination (Wallin, Koro-Ljungberg, and Eskola 2019). MEBS is theoretically based on relativist and constructivist epistemologies, in which reality is contextually and socially produced, and reality and what is told is presumed to reflect and imitate each other (Wallin, Koro-Ljungberg, and Eskola 2019; see also Berger and Luckmann 1984; Bruner 2004; Eskola 1998).

The survey was completed by 200 participants consisting their produced stories. The online survey software Webropol randomly distributed either a negative or a positive frame story to the respondent. In total, we used four frames in the survey (negative and positive of a child with intellectual disability and autism, and negative and positive of a child with behavioural issues) of which we focused on the frames about a child with intellectual disability and autism in this study. The ECEC professionals were asked to write stories about their potential actions and thoughts after reading one of the two frames:

(1) In your group, there is a child with an intellectual disability and autism. The child does not communicate with speech. You feel that the child is well, learns, and gets involved in the group. You know how to work with the child yourself, and you get enough help to do this. Describe the situation, your own actions, and your thoughts in more detail.

(2) In your group, there is a child with an intellectual disability and autism. You feel that the child is not well, does not have the opportunity to learn, and does not get involved in the group. You do not know how to work with the child in the best possible way, and you do not get enough help to do this. Describe the situation, your own actions, and your thoughts in more detail.

We were interested in narratives within the professionals' written stories. Narratives are personal and cultural and include broader reflections of the phenomenon in society or, for example, in a certain social context (Caine, Estefan, and Clandinin 2013; Spector-Mersel 2010). They are also multi-voiced, meaning one's narrative includes their experience and voice, while, at the same time, including those of others from reference groups, institutions, communities, and culture (Bakhtin 1986; Hermans 2001). Narratives are not facts or the

straight experiences of narrators, but in narrative processes, people work with their experiences and thoughts about the phenomena (Bruner 1986). According to Bruner and Lucariello (2006), narratives include two landscapes: the landscapes of action and of consciousness. The first involves what the narrator wants to say about the phenomenon, and the second includes the narrator's hopes, fears, wishes, and so on. In narrative processes, as in our study, when writing positive and negative stories, people produce, repeat, strengthen, and rework their narratives (Bruner 1986; Bruner and Lucariello 2006). In this study, 'story' is used to refer to our two frame stories and participants' productions, while 'narrative' refers to multi-voiced and shared narrative expressions that can be recognised in participants' stories.

Data analysis

The data comprised positive ($n = 47$) and negative stories ($n = 57$) (25 pages, Times New Roman, 12 pt) averaging of approximately 56 words. The ECEC professionals wrote the stories in Finnish, and the material was translated into English.

We analysed the data using inductive content analysis (Elo and Kyngäs 2008; Schreier 2012), discursive positioning (Wetherell 2003), and narrative approaches (Polkinghorne 1995, 2007). The research questions were initially used in categorising the data and in identifying thematic framework. The coding resulted in the data being organised into categories and subcategories, which were further combined into main themes (e.g. collaboration, pedagogic, own competence, and inclusion). We further analysed the main themes by focusing on the positioning of interprofessional actors and the descriptions of their responsibilities in supporting children (see Wetherell 2003). This phase resulted in various professional networks and responsibilities.

Finally, following Polkinghorne's (1995) concept of narrative analysis, we combined the analyses and discussed the networks and teacher responsibilities in relation to the main themes, which resulted in formulating four narratives: 1) self-survival and lonely responsibility, 2) interprofessional collaboration as a core method, 3) one's own and the team's competence supporting the child, and 4) pedagogical practices in constructing inclusion. We constructed the illustrative narratives from the data by selecting extracts from all of the participants stories, and that most adequately described the main themes, professional networks, and teacher responsibilities (see also Polkinghorne 1995, 2007; Pesonen et al. 2021). MS Word and Atlas.ti 9 software were used to ensure systematic analysis and assess codes in relation to other coded material and the entire dataset. To ensure trustworthiness, researcher triangulation (Patton 2015) was used to discuss the coding, categories, main themes, and constructed narratives. Five data validation meetings (Given 2008) were held, at which the analysis phases were discussed with all authors until consensus was reached.

Results

ECEC professionals' stories resulted in four example narratives which were divided under two subheadings. The stories are followed by a closer examination of the illustrated main themes. The original extracts are identified with quotations and codes of ECEC professionals (i.e. SET8P = early childhood special education teacher, id number 8, Positive story; ET = ECEC Teacher and O = other professional, such as project coordinator in ECEC, consultative early childhood special education teacher, special class teacher or ECEC social worker).

Polarised approaches to collaboration

Self-survival and lonely responsibility

It is my responsibility to start searching for support, organise conversations, and observe the child's situation in detail. I feel inadequacy and burdened with the child's situation and my own powerlessness. I'm going to pick up tips from the family, the counsellor from developmental disability services, and the child's speech therapist to create a better connection between the child and the group. I will contact the municipality's developmental disability services and ask the parents for a meeting. I certainly need consultation from more experienced professionals than me. Of course, I would increase the use of AAC methods in my group. I would find more activities for the child, supporting them in cooperating with other children.

Figure 1. Narrative of self-survival and lonely responsibility.

In the first narrative (Figure 1), negative stories were emphasised due to the significant phenomenon of negative feelings and self-survival in the stories. When the situation was experienced as unsuccessful and support as unfunctioning, the professional's own individual work and responsibility to overcome the challenges were emphasised. The ECEC professionals described their overall feelings more often in the negative stories than in the positive ones. Feelings of incompetence were mentioned in half of the negative stories (23), and feelings generally were mentioned in only six positive stories, indicating that feelings were less apparent in positive stories, regardless of whether there was less positive story material being analysed. Furthermore, the professional's own responsibility of discovering support for the child was found in 47 negative stories. The professionals' stories in the unfunctional situation seemed to emerge from their own feelings of powerlessness and incompetence: 'I feel inadequacy, and the child's situation as well as my own powerlessness in the situation is annoying and stressful' (O13N). The child's feelings were also addressed: 'The situation is frustrating and burdensome for the child' (SET31N).

The stories focused on one's own individual work and responsibility and their actions in the situation. In the majority of the negative stories, one's own actions were described with expressions such as *I would discuss, I would find out, I must reflect, I try, I would observe, and I need to look for ways.*

The ECEC professional took full responsibility for organising the support when the situation was unfunctional. The actor in the negative stories was the writer alone, and the

feelings were addressed with strong descriptions, such as, 'My feeling is awkward' (SET28N), 'I find the situation exhausting and unfair' (ET51N), or 'I would experience a bad conscience and anger' (ET19N). In addition, the following terms were also used: 'inadequacy' (O13N, SET18N), 'frustration' (SET31N, SET38N, O43N, SET48N, ET55N, SET12), and 'helpless' (O22N, ET50N). The professionals alone seemed to take full responsibility for the situation: 'The most challenging thing is to make the other staff understand that the child is not intentionally awkward' (SET26N). Asking for consultation or advice was experienced as a means of support, but it remained the responsibility of the professional alone:

As an employee, I have to be brave to point out my own lack of professional skills and seek support for it. I would certainly also feel some shame and jealousy for those who know how to work with a child. I would still try to follow the work of others and get tips on it. I would also seek information on the child's support needs and means. (SET57N)

Interprofessional collaboration as a core method

We have planned the child's support together with the parents, the whole staff, and interprofessional team of social worker, speech therapist, and psychologist. Understanding the situation and the collaboration of the whole team is important. Working closely, openly, and with confidence with the family supports the child, and through that, we can take advantage of well-functioning practices at home and in ECEC. Trustful professional collaboration with various actors supports the child's development, learning, and communication. We meet regularly.

Figure 2. Narrative of interprofessional collaboration as a core method.

Collaboration was an emergent theme when the situation was functioning (Figure 2). Successful collaboration was emphasised in half (23) of the positive stories. Trust, confidence, and open interaction were themes often mentioned together with collaboration. In meaningful collaboration and functional child support, the collaboration network was close, the communication flow was easy and open, the cooperation was close and concise, and the responsibility was shared. For example, participants stated, 'Collaboration and understanding of the whole team is important to maintain consistency' (SET8P), and 'Our team works smoothly together, and most likely we have external work guidance and support from the supervisor in everyday changing situations' (SET11P). Consulting assistance from an early childhood special education teacher or other experts and intensifying multidisciplinary collaboration were perceived as important factors in the well-functioning situation.

Collaboration with guardians was seen as an essential part of functional support: ‘With the parents, we have a confidential and open relationship’ (ET42P). The dialogue and open discussions were important:

We invite guardians and potential partners (therapists) to participate in a discussion in which we plan, update, and set goals together. I believe it is important to have a joint discussion and the involvement of guardians. (SET45P).

The methods of functional practices of interprofessional collaboration were described that the meetings are held ‘about four times a semester’ (SET31P) and everyone’s point of views are taken into account. The importance on agreeing on policies and goals as well as pleasant spirit of collaboration were emphasised. The following quotation summarises the collaboration in functional situations:

Collaboration with our own team and early childhood special needs teacher is functional, and interprofessional collaboration is also structured, and the flow of information works. We solve situations together in the best interests of the child. Collaboration with parents also works great! (ET49P)

Ideal and functional practices to the support

One’s own and team’s competence supporting the child

We have good pedagogical competence and skills for using AAC methods in our group, so the child can communicate and participate. The staff knows signs supporting communication, and picture communication symbols are our daily routine. The staff needs training and consultation frequently, but I have enough knowledge and skills so that I’m able to support my colleagues, too. Creativity and ingenuity are often required, based, of course, on knowledge, experience, and consultation, to find suitable models and practices for the child’s individual needs. I share my knowledge with others.

Figure 3. Narrative of one’s own and team’s competence supporting the child.

Utilising expertise and knowledge, awareness of one’s own skills and strengths, and strengthening them were present in the narrative of competence (Figure 3). The stories suggest that, when ECEC professionals and the entire team have competence, the child’s situation appears well-functioning.

ECEC professionals' competence, the expertise of other adults, and sufficient training were meaningful in practices that work: 'Often the adults of our group need in-service training and consultation services' (SET10P) or 'the whole team has received training in how to act to support the child's learning and development' (SET28P).

The element of competence was often approached from the viewpoint of the whole staff; for example, 'pedagogical knowledge is well and we work together' (SET38P) or 'staff is professional' (SET46P). In addition, sharing one's own knowledge with others was a meaningful factor: 'I share my know-how with others' (SET8P). Competence was also described with desire, motivation, or actions:

The teacher in the group is motivated to practise alternative ways of communicating and interacting with the child, and he/she actively seeks information and help when needing it from therapists and from me as an early childhood special needs teacher. (SET31P)

Well-functioning collaboration, both within the team and with an interprofessional network, was emphasised in relation to the competence narrative. The enhancement of competence is thus twofold: support for both the child and the professional.

Pedagogical practices in constructing inclusion.

In our group, we use AAC methods with every child, and inclusive values are important for us. The support of executive functioning is an element that works in our pedagogy. Routines, consistency, and a structured daily schedule support the whole group. We concentrate on the children's strengths in our pedagogy. It is very important that the child who needs support understands the symbolic function of the images, and the pictures gradually strengthen the child's initiatives in using them independently. We guide other children in the group, to interact with the child with limited communication skills. The child can experience participation, and their views are valuable.

Figure 4. Narrative of pedagogical practices in constructing inclusion.

When a child's support works, the stories illustrate aspects of inclusion and belonging: 'The child is a child among all children and participates as others' (O3P). Sensitivity, presence, and encountering the child are important, and the atmosphere

of the learning environment and interaction in the group are important elements in functional support (Figure 4). Pedagogy is constructed on the understanding of inclusion: 'We think inclusively' (SET43P). Altogether, 30 positive stories included descriptions of pedagogy that supports inclusion.

The professionals reinforced the idea that working in a peer group is an important part of the support: 'There is a good team spirit in the group, and a lot of time has been spent practising social and emotional skills. Every child feels part of a group, and they have friends' (SET12P). Organising support for the whole group is described as a concrete method: 'We practise interaction skills in different situations, and it is important that adults take into account the child's own initiatives for communication and interaction and also help other children take these into account' (SET17P).

Structure is meaningful: 'Familiar routines and daily structure support the whole group, but also this child' (SET8P). Furthermore, concentrating on the strengths and difficulties of a child was emphasised. The child's strengths and individuality were emphasised in functional practices, such as 'goal setting according to a child's capabilities, using strengths to support learning and action' (SET25P).

Methods used in pedagogy were described in the positive stories in multiple ways but strengthening communication and interaction with the child and finding AAC methods was the theme that emerged from the stories: 'In our group, we all are able to use AAC methods by which the child can communicate' (SET7P). AAC, signs, symbols, and pictures were mentioned most often as specific means and methods, in addition to structured and predicted schedules and flexible grouping:

In the group, we use visual aids, signs, and images that are used with all children. The group works as much as possible in small groups, which means that individual attention is better and the group's noise level remains moderate. All employees in the group act consistently and value each other. (SET34P)

Discussion

In this study, we investigated how ECEC professionals approach the collaboration and what constitutes ideal support for children with intellectual disabilities and autism in ECEC. Our findings offer a timely and novel contribution to the literature for further understanding the importance of interprofessional collaboration as a method of significant support in ECEC.

The findings demonstrate that, effective and ideal support was described as working collaboratively, and the need to expand professional networks for support was specifically described when the support was insufficient. In the self-survival narrative, the professionals positioned themselves as the ones responsible for overcoming the challenging nature of the situation. This is understandable considering the trust and autonomy of educators in the Finnish context (see Sahlberg and Walker 2022). Feelings and loneliness were often present in the stories describing ECEC professionals' actions in response to the situation they found to be negative and unfunctional. This suggests that the situation was perceived as lonely and a 'dead end'. However, when the situation was perceived as positive, the professionals' approach was more pedagogy-oriented and active, and they described the support as working closely together. In the pedagogy- and collaboration-

related narratives, the support was described as a shared matter where the inclusive thinking and inclusive values and attitudes drive all the staff to develop methods that support the child and support the development of all the children in the group. Competence was illustrated both as an individual and shared matter. It appears that, when the child's situation is experienced as challenging, the responsibility lies with the professional alone to organise particularly significant support, but in the positive scenario, it is vastly collaborative.

Child groups and the working culture and atmosphere of ECEC centres were highlighted in the ideal and functional practices of the support. Peer groups are fundamental for learning, and they can play a key role in the chain of actors in children's support. This strengthens the idea of an inclusive operating culture and the principles of inclusive education, which are valued in the ECEC context where belonging, participating, and being included play a prominent role (see also Saha and Pesonen 2022). Even though the support is targeted for a child who has a legislative right to it, the effective implementation of support often requires that support measures be taken into account in the pedagogical practices in the whole child group (see also Martinez et al. 2021; Olsen et al. 2019).

Support also emphasises all aspects (e.g. pedagogical, structural, and rehabilitative) of quality-driven ECEC. The practices in a group of children should be meaningful from a pedagogical point of view (e.g. support for communication is used throughout the group of children, professionals are competent, they can participate in training, the resources are in order, and the forms of care in the ECEC plan are implemented). Early childhood healthcare services, primary healthcare, specialised medical care, developmental disability services, and social services are involved in a wide range of activities in the child's life to support the flow of ECEC and other aspects of life (Äikäs and Pesonen 2022), and these entities are also guided by legislation (*Act on Early Childhood Education and Care (540/2018)*). The praxis of significant support is therefore provided in all tiers of the support system in ECEC that emphasises interprofessional collaboration for children's learning and development based on their individual needs (Äikäs and Pesonen 2022).

Altogether, interprofessional collaboration is emphasised with various healthcare and social services to support children's growth (see also Berridge, Mackintosh, and Freeth 2010; Reeves et al. 2010; Anderson 2013). Our findings clearly indicate that teamwork and multidisciplinary and interprofessional collaboration should be enhanced in ECEC professional training (see also Anderson 2013; Bricker et al. 2022).

The results indicate polarisation in the approaches to collaboration and a strong narrative of lone responsibility in Finnish ECEC with regard to children who require significant support. This reflects the situation in which the arrangements of interprofessional collaboration have been left to local ECEC providers when the subject is not regulated in the legislation or curricula (see Eskelinen and Hjelt 2017). Therefore, a more document-driven conceptual basis for interprofessional collaboration would likely guide the local structures of support and thus contribute to the implementation of inclusive and equal ECEC through the praxis of significant support (see also Heiskanen et al. 2021; Äikäs and Pesonen 2022). Clearer processes and more systematic collaboration would also help overcome the central challenge of professionals feeling lonely and hopeless in situations where a child needs significant support. In this way, the structure

of practices would also support the well-being of all ECEC employees and, above all, guarantee children that the statutory right to receive support is exercised in practice.

Limitations and future research

This study has its limitations. Although the data are extensive and present all the occupational ECEC groups, the material represents particularly the experiences of ECEC special education teachers who mainly participated in the training. However, focusing on special education teachers' perceptions is important, as they are fundamental in ensuring children's support. Our results showed that they experienced limitations in arranging support, which potentially suggests that other professionals may have even greater challenges. Moreover, the ECEC professionals were in in-service training on the matter, which further indicates that they are already interested in developing practices in their units, and the challenges might be greater in those units where the staff does not necessarily participate in such training. Furthermore, the data were collected as part of a nationwide project reaching across Finland. Even though the data were collected prior to the training, the participants were already interested in the topic, and thus to some extent familiar and interested in the theme. We did not collect the age nor the educational background of participants which makes it difficult to say whether the data is biased in this sense. Regarding the reasonable response rate (approximately 57%), the results can be seen to picture the ideas of the training programme participants quite well.

MEBS, as a data collection method, also has limitations. The method was used to capture potential experiences in the organisation of significant support and approaches to collaboration in ECEC (see also Wallin, Koro-Ljungberg, and Eskola 2019). Thus, the ECEC professionals' stories do not necessarily reflect their actual lived experiences of ensuring support for the child; however, the imaginary narratives do include one's personal and cultural experiences (e.g. values, ECEC institutional practices, etc.) (see Caine, Estefan, and Clandinin 2013; Spector-Mersel 2010). Although the data included both negative and positive stories, we purposefully analysed the data as whole, as we wanted to have an open mind in analysing the material without having a prior idea of the results as prevailing negative or positive. Our future studies are taking into consideration of dividing the material into negative and positive stories before analysis. Further, in the future, it would be important to study the support process from the perspectives of interprofessional collaborators and guardians, who might have various perceptions of collaboration with ECEC when a child needs significant support. The children's own experiences in ECEC are also a subject that should be explored.

Disclosure statement

No potential conflict of interest was reported by the author(s).

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