INFORMATION TO USERS

This manuscript has been reproduced from the microfilm master. UMI films the text directly from the original or copy submitted. Thus, some thesis and dissertation copies are in typewriter face, while others may be from any type of computer printer.

The quality of this reproduction is dependent upon the quality of the copy submitted. Broken or indistinct print, colored or poor quality illustrations and photographs, print bleedthrough, substandard margins, and improper alignment can adversely affect reproduction.

In the unlikely event that the author did not send UMI a complete manuscript and there are missing pages, these will be noted. Also, if unauthorized copyright material had to be removed, a note will indicate the deletion.

Oversize materials (e.g., maps, drawings, charts) are reproduced by sectioning the original, beginning at the upper left-hand corner and continuing from left to right in equal sections with small overlaps.

Photographs included in the original manuscript have been reproduced xerographically in this copy. Higher quality 6" x 9" black and white photographic prints are available for any photographs or illustrations appearing in this copy for an additional charge. Contact UMI directly to order.

ProQuest Information and Learning
300 North Zeeb Road, Ann Arbor, MI 48106-1346 USA
800-521-0600

UMI®

Downloaded from SHAREOK. Persistent Handle URL: https://hdl.handle.net/11244/388

University of Oklahoma

Graduate College

Transition Through Two Models of Early Childhood Special Services

A Dissertation

SUBMITTED TO THE GRADUATE FACULTY

in partial fulfillment of the requirements for the

degree of

Doctor of Philosophy

By

Rita Chandler
Norman, Oklahoma
2001

UMI Number: 3029615

UMI®

UMI Microform 3029615

Copyright 2002 by Bell & Howell Information and Learning Company.
All rights reserved. This microform edition is protected against
unauthorized copying under Title 17, United States Code.

Bell & Howell Information and Learning Company
300 North Zeeb Road
P.O. Box 1346
Ann Arbor, MI 48106-1346

Transition Through Two Models of
Early Childhood Special Services

A Dissertation APPROVED FOR THE
DEPARTMENT OF EDUCATIONAL PSYCHOLOGY

BY

Kathryn Haring

David R. Bolett

Goraine Dr

Christine Ormshee

Lisa Lawter

c Copyright by Rita G. Chandler 2001
All Rights Reserved

TABLE OF CONTENTS

Page

CHAPTER ONE 1

INTRODUCTION 1
Significance of study 5
Research Questions 7
Introduction to Theory 8
Family Systems Theory 9
Developmental Theories 11
Transition 16

CHAPTER TWO 24

LITERATURE REVIEW 24
Theoretical Application to Best Practice Models 24
Best Practice Models 27
Related Research 31
Definitions 40
Theoretical Concepts from General Systems Theory 40

CHAPTER THREE 41

METHODOLOGY 41
Purpose 43
Apparatus 45
Survey Instrument 45
Demographic Questionnaire 46
Consent Forms 46
Participants 47

CHAPTER FOUR 50

RESULTS 50
Description of Participants 51
Parents 51
Relationship to Child 51
Education 52
General Occupation 53
Race/Ethnic Origin 53
Marital Status 54

Child 55
Age 55
Diagnosis 55
Label 56
Gender 57
Therapy 58
Pregnancy Term 58
Siblings 59
Family 59
Qualification for State and Federal Assistance 59
Participants Perception: Survey Results 61
Legal Rights 62
Policies and Procedures 64
Parent Involvement 70
Parent Information 73
Program Satisfaction 77
Open-Ended Responses 78
Policies and Procedures 78
Program Satisfaction 80

CHAPTER FIVE 86

DISCUSSION 86
Participants Demographic Description 87

Perception of Parent's Experiences 89

Legal Rights 89

Policies and Procedures 90

Parent Involvement 91
Parent Information 92
Program Satisfaction 93

Specific Answers to Research Questions 95

Limitations 98
Conclusions 99

Implications for Future Research 102

REFERENCES 106

APPENDICES 113

Appendix A 114
Cover Letter to Families 115

Appendix B 116
Consent Form 117

Appendix C 118
Demographics 119

Appendix D 120
Survey 121

Appendix E 128
Administrator Letter 129

Appendix F 130
IRB Exemption Letters 131

Appendix G 133
Previous Research Chart 134

Appendix H 135
Best Practices Chart 136

Abstract

Parents of elementary age children with disabilities were surveyed to identify information and services to them as they and their children made transitions from early intervention and public preschool special education programs. Parents' concerns and favorite aspects of programs were also identified. Concerns included disagreements regarding the lack of choices given for services, lack of information provided on services, and lack of information provided on choices available. Differences between the first and second transition are discussed in terms of issues that improved over time and issues that worsened over time. Implications for improving communication and services during transitions are discussed. Recommendations for future research are also made.

Chapter One

Introduction

Landmark legislation, Public Law 94-142, passed in 1975 by Congress mandated the most significant changes in the history of special education. The Education for All Handicapped Children's Act (EAHCA) provided the foundation for all children ages 6-21 who have a disability to receive a free and appropriate public education. Subsequent amendments and reauthorizations clarified, renamed (Individual with Disabilities Education Act) and extended the requirements of the EAHCA, including service provision to children from birth through age two. As a result of these developments, early intervention was mandated to serve children from birth to three years old. In addition, P.L. 99-457 mandated that special education services be extended down to serve preschool children, beginning at age three, who are disabled or at risk of developing a disability. Provisions of this law recognized that the family system is the strongest and most stable proximal process (Bronfenbrenner & Morris, 1998) in the development of young children.

Public Law 99-457 gave the individual states the option of choosing the type of service model for serving children from birth to three. Home based models provided service to the child and family in their home, with the service providers traveling to the home sites. Center based models require the child and family to travel to a centralized location serving all children in the area from birth to three who have a disability or are at risk of developing one. Home based models provide an average of approximately one hour per week of one on one therapy or instruction to the child's family. Center based

provided an average of approximately 10 hours per week of individualized services from service providers (e.g., speech pathology, occupational and physical therapy).

Before the passage of P.L. 99-457, Oklahoma initially provided infant stimulation services through a center based model through the public schools, with children and their families receiving an average of 10 hours per week of services. In response to the federal mandate, Oklahoma chose to provide early intervention services using the home based model.

Across the span of three decades of legislation, parental involvement and lifelong transitions regarding individuals with disabilities have become popularized and progressively more important characteristics of educational programs. The concept of transition in special education for decades has primarily been associated with secondary students moving out of high school supported programs into independent living and employment environments. Changes in legislation (P.L.99-457, 1986; P.L.101-476, 1990; and P.L.105-17, 1997) regarding special education services extended the application of the transition paradigm across the life span of individuals with disabilities from birth to the grave. Transition became popularized as a concept used to describe the multiple changes across time, environments, and professionals that individuals with disabilities and their families encountered during their lifetime. By the time a child with a qualifying disability or developmental delay reached the age of six, they had already moved through at least two major program transitions mandated by federal law. These first two transitions included the movement from early intervention programs at age three into the public special education preschool and again at age five moving from preschool programs into kindergarten. Transitions in early childhood special education services were defined

and described (Chandler, 1992; Huntinger, 1981; Will, 1985; Wolery, 1989) in order to address the legal requirements of P.L.99-457, P.L.101-476 and P.L.105-17.

In response to federal mandates regarding early childhood special education, service providers and researchers began to use models of general and family systems development (Bank & Kahn, 1975; Becvar & Becvar, 1982; Broderick & Smith, 1979; Bronfenbrenner, 1979,1986; Bronfenbrenner & Morris, 1998; Carter & McGoldrick, 1980; Diamond, Spiegel-McGill & Hanrahan, 1988; Duvall, 1977; Jaffe-Ruiz, 1983; Lambie & Daniels-Mohring, 1993; Minuchin, 1974; Montgomery & Fewer, 1988; Patterson, 1985; Powell & Ogle, 1985; Rizzo, 1972; Von Bertalanffy, 1950, 1975) that described and defined family systems function and adaptations across time and environments. Developmental theories provided a solid foundation for defining and describing family life cycles in order to collect and analyze data in relation to developmental tasks, stage identification, and life transitions looking at the family as a self-contained system. Models of developmental and family systems foundational theories and frameworks enabled researchers to examine the needs of families who have offspring with a disability or were at risk of developing one.

Although theories provided a solid foundation for planning and implementing early childhood special services, few models were grounded in theoretical literature or data collection for program evaluation. In a review of literature, Rice and O'Brien (1990, p. 2) suggested, "No consistent theoretical framework has guided work in the area of transition although the need has often been recognized." The majority of program models were based on the 'best practices' paradigm designed to fulfill the legal requirements mandated in P. L. 99-457. Efforts to delineate exactly what 'best practices' constitutes

(Bruder & Chandler, 1993; Diamond, Spiegel-McGill & Hanrahan, 1988; Fowler, 1982; Hains, Fowler, & Chandler, 1988; Hains, Rosenkoetter & Fowler, 1991; Lazzari & Kilgo, 1989; Rice & O'Brien, 1990; Wheeler, Reetz & Wheeler, 1993; Wolery, 1989) have resulted in a number of publications and suggestions. Descriptions of model programs (Fowler, 1988; Hains, Fowler & Chandler, 1988; Hanline & Knowlton, 1988; Kilgo, Richard & Noonan, 1989) constituted what have become the most widely recognized 'best practices' transition programs in early childhood special education services.

Research on 'best practices' regarding early childhood transitions became imperative as P. L. 99-457 mandated that states provide preschool services to young children who had a qualifying disability. In combination with the strong financial incentives offered to states providing early intervention services to children age 0 to 2, components of this legislation made 1986 a pivotal year for changes in transition practices in early childhood special education. Public Law 99-457 and P.L.102-119 delineated expectations of the transition process including: (a) parent involvement, (b) discussions with and training of parents regarding future placement and other matters regarding the transition, (c) procedures for helping the child adjust to the change of environment, and (d) convening a conference including both programs and the parents. Despite these guidelines, relatively few research publications that focus on measurement of the parents' perspectives were available regarding early childhood special education transitions. McNaughton suggested, "The measurement of parent satisfaction is guided by a genuine interest in the opinions of parents, but has had limited empirical support and direction" (1994, p 40).

Overall findings of research measuring parent involvement and satisfaction (Fowler, Chandler, Johnson & Stella, 1988; Johnson, Chandler, Kerns & Fowler, 1986; Hamblin-Wilson & Thurman, 1990; Hanline, 1988; Kilgo, Richard & Noonan, 1989; McDonald, Kysela, Siebert & Chambers, 1989; Schmutz, 1995; and Speigel-McGill, Reed, Konig & McGowan, 1990) reported high levels of parent satisfaction in very few areas. Although these studies generally reported a positive view of early childhood special services, some factors made these results problematic. Comprehensive analysis of the reported findings was hampered by incomplete descriptions of the measurement tools used and the findings obtained.

Significance of Study

In order to evaluate early childhood special education program services, components of family systems theoretical foundations, previous research results, and federal mandates strongly support the need for more information regarding the amount and satisfaction of parent involvement. The general literature indicated a need for parent involvement throughout the entire life long special services process. Systematic and empirical measurement of parent involvement and satisfaction should contain a theoretical foundation to base measurement of the direct implications of federal mandates. Results of previous research indicated that parental involvement and satisfaction factors need to be examined to elicit much needed information about program effectiveness. Within the component of transition services, only one-model (Diamond, Spiedgel-McGill & Hanrahan, 1988) presented a foundation theoretically grounded, in this case applying concepts elucidated by Bronfenbrenner (1979, 1986). Application of this theoretical model to early childhood special education transitions provided a solid

foundation to systematically explore the parents' perceptions of their experiences and how that relates to the federal mandates. The steps of this model apply concepts clarified in order to enhance the interrelationships between the child's present and future educational environments as they related to the transition.

The purpose of this study was to systematically measure parental perspectives of how their transition experiences met their individual needs as well as the federally mandated components. The research questions of this study explored early childhood special services transition issues from the parents' perspective.

Research Questions

1). Were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age three, primarily ensuring preschool services to the extent that those services were offered and appropriate?

2). Were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age five, primarily ensuring elementary school services to the extent that those services were offered and appropriate?

3). Did the steps taken include: (a) parental discussions with and training regarding placement options, (b) procedures to prepare the child for service delivery changes, (c) steps to help the child adjust to the new environment, (d) parental knowledge of the child's skills required in the new environment, and (e) parental choice including observations of various preschool/school options?

4). Did the transition process include: (a) the transmission of information about the child to the new setting personnel, (b) evaluation and assessment information to both parents and the receiving professionals, and (c) a plan beginning at least 90 days before the transition?

5). Were there any differences in the first transition and the second transition regarding: (a) parent knowledge of legal rights, (b) the transition process, (c) amount of information provided to parents, (d) assistance provided to parents, and (e) parental choice and satisfaction?

Introduction to Theory

The roots of systems theories began with the inception of philosophy by the early Greeks and subsequently the descent of science. They were looking for an order or kosmos in the experienced world that was intelligible and controllable in thought and rational action. The Aristotelian worldview of holistic and teleological notions provided one formulation of cosmic order. Aristotle's statement "the whole is more than the sum of its parts" remains a valid definition of a basic system (Von Bertalanffy, 1975). The idea of general systems theory was first formulated by Von Bertalanffy and presented orally in the 1930's. "Systems theory is both a transdiciplinary field of study and a theoretical framework describing various microlevel approaches known as *systems theories*" (Whitechurch & Constantine, 1993 p. 325). Von Bertalanffy and his colleagues sought to explain the behavior of complex, organized systems throughout varied levels of sophistication. "General systems theory is a program of theory construction aimed at building concepts, postulates, principles, and derived theorems that apply universally across all domains of application" (Whitechurch & Constantine, 1993 p. 325). Within this theory, Von Bertanlaffy (1975a, p. 59) believed other contradictions could be explained by applying these universal principles to all domains of groupings of phenomena, or "systems," or sets of elements standing in interrelation among themselves and with the environment.

Systems have been further defined as either open with a capacity for inflow or outflow of materials or closed if no materials enter or leave it (Von Bertalanffy, 1950). All systems parts are said to be interconnected, forming a whole with limits to membership. Each system's part was identifiable and differentiated from external

elements. Although he was primarily a biologist, Von Bertalanffy saw the principles of organismic psychology as special instances of the theory of a general, open, and living system. General Systems Theory has made communication possible across disciplinary boundaries by eliminating compartmentalized and fragmented knowledge (Rizzo, 1972). The systems concept made it possible to include the science of psychology under a broad theoretical framework (Rizzo, 1972). From General Systems Theory, a conceptual framework emerged for the study of clinical and social problems and institutions of psychology (Rizzo, 1972). This branch of General Systems Theory was named the Family Systems Theory.

Family Systems Theory

While physical science systems and biological systems have common characteristics, the latter (persons, families, plants, and animals) differ in the ability to adapt to information (Montgomery & Fewer, 1988). The open system properties and characteristics in general classify a family as a unique system. A family system was defined as a collection of individual people with interrelated behavior creating relationships among the individuals (Montgomery & Fewer, 1988). Broderick and Smith (1979) suggested that after family boundaries are identified and the system set off from the surrounding environment, each system could be classified on a continuum from open to closed based on boundary permeability.

Becvar and Becvar (1982) suggested that in order to understand each family system member, research should focus on how each person is in relation to every other family member. In addition, to maintain consistency with the systems perspective, the same framework should be used to view the families in general as a component or

subsystem of a larger network of systems labeled the *suprasystem*. Each family should be studied in its relationship with other families in their broader societal and cultural contexts (Becvar & Becvar, 1982).

Families are considered human systems consisting of the interactions among parents (physically present or not) and children. Families are categorized as separate systems that accept input from outside and within, which is then processed through the system, emitting acts or behavior as outputs (Becvar & Becvar, 1982).

Minuchin (1974) defined the building blocks of family structure as subsystems within the family. Traditional nuclear families are said to consist of four subsystems: spousal, sibling, parental, and extrafamilial. Each subsystem was shown to have roles and functions common to all family systems. Spousal subsystems had the primary role of providing for the functional needs of the family, along with the emotional and sexual needs of husband and wife. Tasks of the parental subsystem were primarily oriented around nurturing, teaching, and disciplining children while sibling subsystems served as the primary socialization agents in the development of children. In the lifespan of the family, the sibling subsystems were a key component as the most long lasting and most influential relationships (Powell & Ogle, 1985). Bank and Kahn (1975) proposed that siblings provide an identification network, forming values, carrying out negotiations with parents, and supporting or clarifying perceptions of the outside environments. Furthering that belief, Powell and Ogle (1985) said siblings teach each other social skills through long-term interactions creating infinite opportunities to learn sharing, companionship, loyalty, rivalry, and expression of feelings. Finally, extrafamilial subsystems were determined to represent those parts of the family system that interfaced with the outside

world (Bronfenbrenner, 1986). In order to provide systematic and empirical research on family systems, foundational theories and general frameworks began to emerge in literature.

Developmental Theories

During the lifespan of a family, adaptations become necessary as changes in family context and relationships evolve (Montgomery & Fewer, 1988). Families have times of imbalance, reacting to stress with nonproductive interactions (Lambie & Daniels-Mohring, 1993). In essence, "A change in any part of the system reverberates throughout, all the while moving toward greater complexity and diversity or stagnation and dysfunction" (Jaffe-Ruiz, 1983, p.81). Studies have shown that events that trigger change may come from either outside or inside the family, but from a different systems level. Loss of a job or disasters would be considered a transactional trigger outside the family. Inside the family, triggers such as the maturation of children, death of a member, or changes of parental support resulted in changes in individual members or relationships (Montgomery & Fewer, 1988).

Sociologist, E. M. Duvall (1977) was the first to describe family development from the systems theory perspective of individual relationships. She developed a framework describing eight stages of family life cycle characteristics beginning when the family is formed by marriage. Other theorists followed Duvall's lead and proposed various models describing predictable events and stages that occurred throughout the life-span development of families. These stages were collectively termed *the family life cycle*.

Particular events are said to occur at each stage of the family life cycle, ushering in the next phase of development (Lambie & Daniels-Mohring, 1993). The family life

cycle operated in patterns, including plateaus, transitions, and tasks and changes. Each stage included 'plateau' and 'transitional periods' of relative stability when the family operated within roles and functions predictably. Occasional life events led to changes in the structure or function of the family, resulting in transitional periods. Normative events served to usher in new life cycle stages when a family experiences; marriage, childbirth, entrance into school, adolescence, adulthood, grandchildren, retirement, and old age (Carter & McGoldrick, 1980). Families maintained stability through appropriate changes in the developmental stages of individuals and of the system as a whole (Becvar & Becvar, 1982). Unexpected events such as miscarriage, divorce, illness, disability, death, relocation, socioeconomic status shifts, and catastrophes resulted in changes to the normal cycle of the family (Patterson, 1985). Overall, specific family developmental tasks were required at each stage of the family life cycle and each stage required a change in family goal orientation and direction (Jaffe-Riuz, 1983).

Developmental theories provided a solid foundation for defining and describing family life cycles for collection and analysis of data in relation to developmental tasks, stage identification, and life transitions looking at the family as a self-contained system. In order to explore the family as a system in a more global perspective, Bronfenbrenner (1979) developed an ecological model based on systems theory. His concept promoted a triad of the developing person, the environment and the interaction between the two. The ecological environment was visually seen as a set of nested structures, each inside the next with the innermost level containing the developing person.

Bronfenbrenner (1979) also identified a phenomenon pertaining to all levels of the ecological environment. Settings within any culture or subculture tended to be very

much alike, however they were distinctly different between cultures. These differences in settings were also analyzed as individual structures using systems theory.

Remaining consistent with systems theory, developmental family transitions defined as shifts in roles and settings were labeled *ecological transitions*. The developmental importance of these ecological transitions was attributed to the involvement of changes in role expectations of positions in society. Bronfenbrenner (1979) applied equal importance to connections between others present in the setting, nature of linkage, and indirect influence on the developing person through interaction with individuals on intimate contact levels. Within the immediate setting, the complex of interrelations was labeled the *microsystem*, while *mesosystems* referred to the interconnectedness application to linkages between settings with the developing person. Events affecting the immediate environment without the presence of the developing person were termed the *exosystem*. Generalized nested and interconnected systems labeled *macrosystems* were viewed as overarching patterns of ideology, biology, and organization of the social institutions of cultures or subcultures.

Bronfenbrenner (1986) later revised his ecological theory by addressing how intrafamilial processes are affected by extrafamilial conditions. At a most basic level, research models varied simultaneously along two dimensions: 1) how the structure of the external systems affected the family and the manner of influence; and 2) the degree of explicitness and differentiation accorded to intrafamilial processes influenced by the external environment.

Bronfenbrenner (1986) further distinguished research theory in terms of environmental systems that serve as sources of external influences on families. Human

development primarily takes place within the context of the family. The family is one of several settings in which developmental processes took place. Sources of external influences on development were events at home affecting the child's progress at school, events at school affecting the child's progress at school, Individualized Education Program meetings, school board decisions, parents' employment, and local and national legislation.

In the revised model, a new piece, the *chronosystems* models, was added, representing a frame of reference for studying psychological and developmental changes within individuals as they aged. Thus, ensuring maturation could be accounted for within the system. Chronosystems models focused around life transitions, including normative (school entry, puberty, marriage) and non-normative antecedents (death, severe illness, divorce).

Bronfenbrenner (1986) used another triad to explain how research theories could be differentiated at successive levels with respect to explicitness and complexity. At the first level, *social address model* " limited the comparison of developmental outcomes for children or adults living in contrasted environments as defined by geography" (Bronfenbrenner, 1986 pp. 724). At the second level, assessing the impact of the external environment was facilitated by explicit paradigms. These paradigms assessed the impact of the external environment on a particular process. This second level titled, *process-context,* was based on an unstated assumption, that the impact of the external environment on the family was the same regardless of the personal characteristics of individual family members, including the child. Finally, the third level *person-process-context model* added a new third element to the system, the dimension of parents' or child

characteristics in determining the positive or negative impact of the external environment on the family processes and their developmental outcomes.

Most recently, Bronfenbrenner and Morris (1998) expanded and integrated significant changes in the ecological model. Bronfenbrenner's former theory of development (1986) focused on empirical and theoretical roots of the ecological model used to center on the role of environment in shaping development. The most recently integrated model contrasted the former by focusing toward the future where data are not yet available. Rather than making a claim to a paradigm shift, the latest version introduced a marked shift in the center of gravity of the former models (Bronfenbrenner & Morris, 1998). Defining properties of the model involved four principal components and the dynamic, interactive relationships among them. The new *bioecological model* made a critical distinction between the concepts of *environment* and *process* with the latter occupying a central position and applying a specific meaning. Properties of this model were defined in terms of two major propositions that are theoretically interdependent and subject to empirical testing.

An operational research design permitting simultaneous investigation was redesigned and renamed as the *Process-Person-Context-Time model.* First, throughout the lifespan, with emphasis on early phases "human development takes place through processes of progressively more complex reciprocal interactions between an active, evolving biopsychological human organism and the persons, objects, and symbols in its immediate external environment" (Bronfenbrenner & Morris, 1998, p. 996). Second, the person was one of four elements influencing form, power, content, and direction, which in turn influenced the proximal processes effecting development. This varies

systematically as a joint function of the characteristics of the developing *person* and *environment*, the nature of *developmental outcomes* (labeled context) and social continuities and changes occurring over *time*. Bioecological developmental theory provided a multidimensional model for exploration of family systems on a continuum of individual to global perspectives.

Proximal processes were deemed extremely important to a child's development, as they are experienced repeatedly over time, such as reading to a child, playing with a child, learning new skills, feeding and comforting a child, and daily interactions with teachers, and daily interactions with peers at school. "To be effective, the interaction must occur on a fairly regular basis over extended periods of time" (Bronfenbrenner & Morris, 1998, p. 996).

Models of developmental and family systems foundation theories and frameworks have enable researchers to study families who have children with special needs. Over the last decade, this has become an increasingly critical research issue as P. L. 99-457 and P. L. 105-17 (the most recent reauthorization of IDEA) increased services and supports to individuals with disabilities and their families. Subsequently, research became more important as: "The diagnosis of a child with intellectual, emotional, sensory, or physical disabilities is a significant life stressor that will affect the future development of the family at all levels" (Lambie & Daniels-Mohring, 1993, p. 21).

Transition

After the passage of special education legislation, early childhood transitions emerged as a prominent theme in special education. President Gerald Ford signed the Education for All Handicapped Children Act (EAHCA) of 1975 into law, P.L.94-142

combining an educational bill of rights with the promise of federal financial incentives. P.L.94-142 facilitated "The most significant increase of the federal government in special education to date" (Yell, 1998). The EAHCA required participating states to provide: a free and appropriate public education (FAPE) to all qualified students with disabilities, between the ages of 3 and 18 no later than September 1, 1978, and for all qualifying students up to age 21 by September 1, 1980. In addition, P.L.94-142 mandated the rights of students with disabilities, including (a) non-discriminatory testing, evaluation, and placement procedures; (b) education in the least restrictive environment; (c) procedural due process, including parent involvement; (d) a free education; and (e) an appropriate education. The EAHCA provided a foundation for the basic principles of special education and related services in the public schools. Subsequent legislation since 1975 has served to clarify and extend the original mandated requirements of EAHCA. One of the most significant changes passed in the 1990 amendments, reauthorized and renamed P.L.94-142 to the Individuals with Disabilities Education Act (IDEA). The major provisions of IDEA are: (a) zero reject; (b) free and appropriate public education; (c) least restrictive environment; (d) identification and evaluation; (e) confidentiality and information; (f) procedural safeguards; (g) technology-related assistance; (h) personnel development; and (h) placement in private schools.

In 1986 congress passed an amendment to the EAHCA, P.L.99-457, Education of the Handicapped Amendments, adding part H to the law and revising part B. Part B of the Education of the Handicapped Amendment of 1986 mandated preschool special education services for children ages 3 to 5 who meet the eligibility. Public Law 99-457 emphasized the need for transition programs for three-year-old children as they leave

early intervention to enter preschool special education services. Part H supported infant and toddler programs serving children from birth to age 2 by providing federal incentives grants to states choosing to set up early intervention programs. At age 3, children with qualifying disabilities are entitled to receive services under part B. The enactment of P. L. 99-457 part H highlighted the role of transitions in regard to the overall planning and provision of appropriate educational services for young children with disabilities and their families (Rice & O'Brien, 1990). The guidelines of part H required individualized transition planning for every child served under this legislation. Subsequent legislation, the reauthorization of IDEA, P. L. 102-119 expanded transition planning by mandating a statewide system to support transition planning for individual children and their families. The system required states to outline specific policies for transitions in their applications for federal funds under both early intervention (part H) and preschool (part B).

Most recently (1997), the amendments in P.L.105-17 further classified, restructured, and extended IDEA. The original EAHCA was divided into nine subchapters. The 1997 amendments of IDEA restructured the law into four subchapters. Part A contains the general provisions of the law. Part B details the grant programs that required states receiving federal assistance under IDEA to ensure a free and appropriate public education to all qualifying children and youth with disabilities; and contains the procedural safeguards protecting children and youth with disabilities. Parts C and D are discretionary or support programs with Part C (originally part H) extending Part B protections to infants and toddlers with disabilities and strengthens incentives for states to provide services to infants and toddlers. Part D mandated national activities to improve education of children with disabilities.

Rosenkoetter, Hains and Fowler (1994) outlined the regulations from P. L. 99-457 Part H (Sec. 303.344) on transition content of the Individual Family Service Plan (IFSP).

(1) The IFSP must include the steps to be taken to support the transition of the child, upon reaching age three, to-
   (i) Preschool services under Part B to the extent that those services are considered appropriate; or
   (ii) Other services that may be available, if appropriate.

(2) The steps required in paragraph (h) (1) of this section include-
   (i) Discussions with, and training of, parents regarding future placement and other matters related to the child's transition;
   (ii) Procedures to prepare the child for changes in service delivery. Including steps to help the child adjust to, and function in, a new setting; and
   (iii) With parental consent, the transmission of information about the child to the local education agency to ensure continuity of services, including evaluation and assessment information required in Sec. 303.322, and copies of IFSP's that have been developed and implemented in accordance with Sec. 303.340 and Sec. 303.346.

Rosenkoetter, Hains and Fowler (1994) also summarized provisions regarding early childhood transition, from the IDEA Amendments of 1991 (P. L. 102-119). The state policies and procedures required:

(1) Definition of how the state will ensure a smooth transition at age 3 [Part H Sec. 678(a) (8)], including a method of ensuring that when a child turns 3 an IEP (or age 3-5 IFSP) has been developed and is being implemented by the child's third birthday [Part B Sec. 613(a) (15)].

(2) Description of how families will be included in transition planning [Part H Sec.678 (a) (8)].

(3) Description of how the 0-2 lead agency will notify the local education agency and convene a conference, with the approval of the family, at least 90 days before the child is eligible for the preschool program under Part B in accordance with state law. The conference is to include representatives of the two agencies and the family and is intended to:
   (i) Review the child's program options from the third birthday through the rest of the school year and;
   (ii) Establish a transition plan [Part H Sec. 678(a) (8)].

(4) Families are to be included in transition planning [Part H Sec. 678(a) (8)].

Transition was defined as "An instance or process of changing from one form, state, subject, or place to another" (American Heritage Dictionary, 1983, p. 718). Transition practices for very young children with disabilities were defined as "strategies and procedures that are planned and employed to ensure the smooth placement and subsequent adjustment of the child as he or she moves from one program into another" (Huntinger, 1981, p. 8). In relation to the field of early childhood special education, transition was described as the process of moving from one program to another, or from one service delivery mode to another (Chandler, 1992). Will (1985) defined transition as an outcome oriented process, including key elements of planning and cooperation. Wolery (1989) defined three types of transition that may occur in early childhood special education programs. First, *developmental transitions,* includes movement from extended hospitalization to home and infant programs, movement from infant to preschool programs, and movement from preschool programs to school age programs. Second, *nondevelopmental transitions* involve movement from one program to another that varies on dimensions of restrictiveness and extent of contact with peers. Third, *within-class transitions,* occur in center-based programs and focus on movement from one activity to another.

Presently, three formal program transitions can occur for families of children receiving early childhood special services in the United States. First, after birth and possible neonatal intensive care services, children and their families transition from hospital to home services. Next, at age three, children transition from early intervention to special education preschool services in their local schools. Finally, children transition into kindergarten school programs at age five. Other informal transitions between

services, programs, and individual providers may also occur during the early childhood years. Transition should fulfill four goals outlined by Wolery (1989): (a) ensure continuity of services; (b) minimize disruptions to the family system by facilitating adaptation to change; (c) ensure that children are prepared to function in the receiving program; and (d) fulfill the legal requirements of P. L. 99-457. Although transitions present new opportunities for growth and development (Bruder & Chandler, 1993) they are also a time of vulnerability and risk for preschoolers with disabilities and their families (Rice & O'Brien, 1990).

Families of children with special needs face transitional events in the early childhood years that are unique to the experience of having a child with a disability. By the time their child reaches kindergarten, families have been through at least two distinctly different types of service delivery programs. Research and model demonstration projects addressed the issue of minimizing disruptions to family systems by facilitating adaptations to changes suggested by Wolery (1989).

Theoretical models provided a framework for transition processes through descriptions of the child's development in relation to the environment. Bronfenbrenner (1979) described a process, in which the child's immediate environment at birth is that of the family, including combinations of parents, siblings, and other immediate family members. As the child ages, it is said his or her environment expands and extends beyond the family to include peers, community, and school. In families of children with disabilities, all of the environments should become the focus of intervention (Diamond, Spiegel-McGill & Hanrahan, 1988), because they are all the child's *microsystems*. Using Bronfenbrenner's (1979) ideas, these reciprocal relationships between the *microsystem*

environments encompassing the child and the environment constitute a *mesosystem*. When a child moves from one service program to another, the receiving program becomes the new environment or *microsystem,* while the relationship between the programs and/or the family is the *mesosystem*. As previously noted, families of young children with disabilities experience these types of transitions numerous times by the time the child reaches age six.

Further analysis of this transition process suggested viewing the movement of a child from one setting to another is consistent with the three-step process described by Bronfenbrenner (1986). First, is the pre-existing, intersetting relationship before the transition, including previous interactions such as information, attitudes, and expectations of both systems. The second step occurs after the child has entered the new setting. The family system must reorganize to accommodate the child's transition into a new role in a new setting (Bronfenbrenner, 1986). Finally, after the transition occurs, changes take place in the relationships existing between the child's various environments, possibly including shifts over time in the "nature and extent of linkages between the family and other principal settings in which the child spends his or her time" (Bronfenbrenner, 1986, p. 734).

Another theoretical framework regarding early childhood issues was developed by Gallimore, Weisner, Kaufman and Bernheimer (1989) but outlined and cited in Rice and O'Brien (1990). This model, titled, *The Ecocultural Niche,* viewed the child as a member of a family that is part of a broader social and cultural community. Within the model, families are considered agents of change rather than passive in relation to outside social and economic forces. Families were described as taking individual and collective

action to modify or counteract these influences. These *Ecocultural Niches* included features that supported a conceptual framework for transitions, such as: (a) influences on families and children being multidimensional and interconnected; (b) the families' view of circumstances being most important, with judgements of bad or good determined by a family's social construct of events; (c) some ecocultural domains having a greater priority of impact, indicating a hierarchy of influences on families; (d) each family's daily activity settings and routines reflecting features; (e) families accommodating to changes in their ecocultural niche by changing daily activities or routines; and (f) sustainability of daily activities in family routines over time, serving as a better predictor of intervention outcomes for children and families.

These conceptual frameworks provided a foundation for transition models and programs. Both theories viewed family system functioning and subsequent child development in relation to the environment. Application of these theories becomes particularly important in families of children who are born with a disability or are at risk of developing one. Understanding the complexity of the interactions between the child, family, and immediate environments is a key component in planning and implementing optimal transitions during early childhood special education services. Transitions through special education services are an example of a proximal process as the process is experienced repeatedly over time. Professionals continued to improve services over time as families' needs are evaluated. Bronfenbrenner's (1986) model facilitated sharing the transition process between the child, family, preschool, and public school personnel (Diamond, Spiegel-McGill & Hanrahan, 1988).

Chapter Two

Research on 'best practices' became imperative as P. L. 99-457 mandated that states provide preschool services to young children who had a qualifying disability. In addition, this mandate provided financial incentives to states choosing to provide early intervention services to infants and toddlers age zero to three who have a disability or are at risk of developing one. Both components of this legislation made 1986 a pivotal year for changes in service provisions and research on young children with disabilities and their families. Research publications, regarding early childhood special education transitions, subsequent to passage of this legislation, reflected attempts to measure 'best practices' designed to meet the intent of the law.

Theoretical Application to Best Practice Models

Although theories provided a solid foundation for planning and implementing early childhood special services, very few models were grounded in theoretical literature or data collection for program evaluation. In a review of literature, Rice and O'Brien (1990, p. 2) suggested, "No consistent theoretical framework has guided work in the area of transition although the need has often been recognized." The majority of program models were based on the 'best practices' concept designed to fulfill the legal requirements mandated in P. L. 99-457. Efforts to delineate exactly what 'best practices' constitute resulted in a number of publications and suggestions. Fowler (1982) provided one of the first descriptions and recommendations on transitions within the spectrum of early childhood special education services. This description focused on analyzing the differences between the program the child is presently receiving services from and the

potential new environment. Fowler (1982) generated a set of questions to assess the child and family's needs according to issues concerning: the new environment; personnel; scheduling; procedures; academic skills; support systems; movement preparations; and communication. However, this description did not provide any timelines or checklists for transition planning and implementation.

Hains, Fowler and Chandler (1988) suggested the roles of the child, family, teachers, and educational agency are key issues involved in planning transitions within early childhood special education service programs. Wolery (1989) clearly described early childhood special education service transitions in terms of: (a) three types, labeled developmental, nondevelopmental, and within class; (b) definition; (c) related terms and services; (d) rationale for studying and planning; (e) theory base; and (f) needs and assessment in transition procedures and issues. Wolery (1989) stated: "Smooth transitions are accomplished by assessing the needs of infants/children and families, establishing communication between families and sending and receiving programs, including families in decision making, and ensuring information exchange and coordinated procedures between the sending and receiving program." This review of literature cited and briefly described checklists or guideline questions prepared by other researchers, that facilitated the transition process however, no timelines were described or recommended.

Lazzari and Kilgo (1989) advocated a lifelong approach to the transition process. The important prerequisite to success suggested in this approach was the adoption of a continual rather than a time bound approach that must be incorporated by both parents and professionals. The recognition and importance of early transition skills was viewed

as a lifelong process. By establishing and teaching skills early, it is believed parents can apply those skills to subsequent transitions in their child's life. Lazarri and Kilgo (1989) gave an overview of the procedure that should take place, and provided a guide for analyzing program differences and similarities. Broad goals were identified and a calendar of events was included to help parents establish a timeline. Outcomes from a comprehensive transition plan were also identified.

Hains, Rosenkoetter and Fowler (1991) examined family concerns during transitions from early intervention programs to preschool services. Concerns identified were transfer of friendships, changes in service delivery, and discrepancies in eligibility. Suggestions were made on supporting family involvement in transition planning through a system of phases. During each phase a list of topics or discussion and procedures completed by participants was provided. In addition, sample questionnaires were included assessing parents perceptions of their needs for access to information, desired level of participation, sharing information with receiving program, and transition evaluation.

Wheeler, Reetz and Wheeler (1993) advocate an approach based on communication and collaboration between parents and professionals. This publication provided a model of current transition services from early intervention to preschool in a rural setting. The program described implementing parent involvement at each stage of transition services. Interview forms were provided to elicit information from parents and inform them of the available options. This model did not include any timelines or stepwise procedures for the transition process.

The Council for Exceptional Children, Division of Early Childhood published recommendations for service provisions in early childhood special education. Bruder and Chandler (1993) briefly reviewed literature regarding transitions and made the following recommendations for 'best practices.' Development of comprehensive, formal transition procedures would require several components that could influence the success of the transition. These should include: (a) state and local agencies' interactions; (b) sending and receiving program communication and participation; (c) families and other caregiver participation; and (d) identification of the child's skills in reference to those needed in the new environment. Additional recommendations were made on the importance of administrative support, personnel training, and evaluation of transitions.

Diamond, Spiegel-McGill and Hanrahan (1988) presented the only early childhood transition model designed to meet the requirements of P. L. 99-457, with the foundation theoretically grounded by using Bronfenbrenner's (1979, 1986) ecological-developmental model. The steps of this model "apply the concepts elucidated by Bronfenbrenner (1979, 1986) to enhance interrelationships between the child's current environments and future educational program," (Diamond, Speigel-McGill & Hanrahan, 1988). The steps of this model began the process by building upon relationships between the family and service providers developed over the course of time. This plan addressed major transition issues, including preliminary plans, initiating contacts with the school district, developing placement options, process continuation, and follow up. The entire process was broken down into a sequential 15-step process emphasizing the interactions between the various environments in which, the child was expected to function.

Best Practice Models

Other models presented planning and implementation of transition through the 'best practices' approach. Three of these 'best practice' models became the most widely recognized in the field of early childhood special education, regarding transitions from preschool special education programs into kindergarten. These models provided a unified foundation through their exemplary practices in planning and coordinating transitions through early childhood special education services.

Hains, Fowler and Chandler (1988) described guidelines for three main areas of focus, interagency planning, program planning, and family planning, for facilitating transitions between programs. First, interagency planning suggested each agency develop a written transition plan with an outline of the activities required in the change of a child's services and placement, as well as an approximate timeline of each activity, communication between the sending and receiving teams, and evaluations of the transition from both the family and the program personnel. Second, program planning involved the sending team's responsibility for preparing the child for the next environment. This was accomplished through gathering basic information such as the new program's philosophy, schedule, routine, curriculum, and skills expected. In addition, the sending team introduced the family to the new program personnel and prepared the family for changes in the levels of family involvement and support. Finally, family planning provided the families with the option to participate in all phases of the transition planning, including decisions regarding placement. Hains, Fowler and Chandler (1988) believed families should be provided a timeline and be informed of the anticipated sequence of events required for completing the transition, as well as visit the new placement options and help prepare their child by taking them for pre-service visits.

Finally, they stated parents should be included in the identification and prioritization of their child's and personal family needs.

Fowler (1988) described the most widely recognized early childhood special education transition plans. Building Effective School Transitions (BEST) emphasized advanced planning and communication between the sending and receiving programs. This model was developed for children moving from preschool special education programs into kindergarten. The program provided a manual, including guidelines and sample formats for developing interagency agreements, communication between the family and the service program, which involved families, constructing timelines, identifying local agencies, preparing for change of program, and program evaluation. Parents received a transition planner to assist them in identifying and prioritizing their needs in relation to the transition. Both sending and receiving teams completed a skill readiness survey to identify similarities and differences in program expectations.

Fowler (1988) also described Sequenced Transition to Education in the Public Schools (STEPS), designed for seamless transitions from preschool special education programs into kindergarten. STEPS outlined a community-wide interagency approach to helping families of preschool children facilitate successful transitions into kindergarten or elementary programs. This project was developed among diverse preschools working in collaboration with the public school system. These preschools served children in programs, including: children with severe disabilities, integrated programs, Head Start, and children who are at risk. This project model included a manual for replication of procedures to establish interagency groups, and procedures for negotiating and implementing transition timelines. Sample forms were included as well as strategies for

staff development in both the sending and receiving schools. Within this model, the parent involvement component was presented in a multilevel approach.

Fowler (1988) described a third model, Transitioning into the Elementary Education Mainstream (TEEM), that enabled the schools to establish and implement a transition planning process. The design of this model addressed concerns expressed by both families and professionals regarding the child's entry into public school programs. This model promoted implementation of best practices and facilitated the transition of all children with disabilities into the least restrictive, mainstream environments in regular kindergarten and elementary programs. This model encompassed two major components. First, the model delineated best practices across a timeline beginning with establishing a transition, through the placement and into monitoring, supporting, and considering future transitions. Second, guidelines were provided to develop a transition process, including a system-wide commitment, written procedures based on best practices, and identifying and obtaining training and resources. The previous models described early childhood special education transition as the child moves from preschool to kindergarten placements. The following models described the transition from early intervention, home based services into preschool, center-based services.

Hanline and Knowlton (1988) elaborated on Supported Transition to Integrated Schools (STIP) in collaboration with the early intervention program, San Francisco Special Infant Services (SFSIS). The major goal of this project was to deliver individualized and comprehensive transition support to families as their children entered the preschool special education program. Both the sending and receiving teams combined resources and expertise to ensure an optimal transition. The timeline prepared the family

in phases, such as preparation, school district in-take assessment, IEP meeting, placement, and follow-up. This model encompassed a wide range of services designed to provide parents with the information and skills needed to make informed decisions on an appropriate educational placement for their child. Parents are also assisted in their adjustment to new and different types of services.

Kilgo, Richard and Noonan (1989) presented a future oriented transition model designed to support families of children who are moving from early intervention to preschool programs in their local education agencies. The Preschool Preparation and Transition (PPT) project was a model with parent education as one of the major components. The entire transition planning and implementation process revolved around assessment of the parents' needs and addressed those at each stage. After determination of the family's preferences, abilities, and needs, parents were prepared for the transition through future planning, support, information, assistance, and knowledge. Parental strengths were used to build skills needed to increase the amount of independence, participate on the intervention team, and make informed decisions about the child's placement. Parent involvement was supported by ensuring they had a thorough knowledge of the child's needs, the ability to communicate those needs, and an awareness of the options available in the community. The PPT model identified transition skills needed by both parents and professionals to support a gradual, ongoing approach. Functional goals for the child were to prepare him or her to participate more independently in present and future environments.

Related Research

The following review of research delineates attempts to measure different aspects of transition after the passage of P. L. 99-457.

McNaughton (1994) reviewed current practices in the measurement of general parent satisfaction of early intervention including but not limited to the issue of transition. This literature search and review examined articles published in peer reviewed journals between January 1986 and December 1992. The year 1986 was designated as the starting point to reflect the impact of P. L. 99-457 amendments of that year. Fourteen studies meeting the criteria for the review were examined and documentation was made of the measurement methodologies, number of respondents, recruitment, response rate, time of measurement, and results. Of these 14 studies, six (Conn-Powers, Ross-Allen & Holburn, 1990; Hamblin-Wilson & Thurman, 1990; Hanline, 1988; Hanline & Knowlton, 1988; Johnson, Chandler, Kerns & Fowler, 1986; and Spiegel-McGill, Reed, Konig & McGowan, 1990) contained data relating to parent satisfaction of transition. Results of the review indicated all of the studies reported high levels of parent satisfaction in few areas.

Johnson, Chandler, Kerns and Fowler (1986) interviewed 19 parents of children who had recently transitioned from preschool special education programs into public school. The interviews were designed to elicit what the parents perceived as major issues during the transition process. Parents were given the opportunity to discuss both concerns and satisfactions about the transition, their roles as decision-makers in the transition, and the effects of the transition on their family. Results of this limited sample indicated typical responses were expressed by parents in the following areas: (a) concerned about parent involvement; (b) sought and received information from a variety of sources; (c)

visited the receiving program and teachers; (d) desired more planning and communication opportunities with educators; (e) participated in program selection and educational planning; (f) confronted unique issues regarding education and placement; (g) expressed general satisfaction in meeting needs; and (h) experienced various degrees of stress. The questions parents indicated as concerns regarded the timeline, sequence, personnel responsible, family preparation, and program characteristics.

In response to the identification of transition related stress, Fowler, Chandler, Johnson and Stella (1988) developed two transition planners, with rating scales and open ended questions to assist parents in planning their child's transition from preschool to an elementary program. Thirty parents participated in this multidimensional study designed to measure the parents' perceptions of their needs, involvement, and ranking of issue importance. The first interview required the parents to rank categories in order to identify and prioritize information they desired about the transition. In the second interview, parents rated and ranked items designed to help them select the child's new educational environment. Open-ended questions were also included to give parents the opportunity to express concerns about the process. Results reported by category indicate 80 percent of the parents rated the following items from the first interview as very important:

Interview I

1. General Transition Information
   A). Skills child is expected to have in public schools
   B). Contact people in the school system
   C). Assessment and testing for public schools
2. Sources of Program Information
   A). Talking to child's teacher
3. Parent Participation Levels
   A). Helping the teacher learn about the child's needs
   B). Select goals
   C). Keeping track of progress at home
4. Sources of Child's Progress Information

A). Meeting with the child's teacher

Interview II

1. General Description of Receiving Program
   A). Types of classrooms available
2. Sources of Program Information
   A). Talking to child's teacher
   B). Visiting the classroom
3. Parent's Participation in Receiving Program
   A). Visit the potential schools and classrooms
   B). Help identify child's needs in the new environment
   C). Contact school for appointments
4. Specific Features of Receiving Programs
   A). Allow communication with the child's teachers/administrators
   B). Provide special education services needed by child
   C). Meeting the child's educational and social needs
   D). Knowledgeable staff supportive of the child's needs
   E). Participation in IEP and parent/teacher meetings
5. Teacher Characteristics
   A). Warm and caring
   B). Communication with parents
   C). Discipline fairly and effectively
   D). Effective teaching skills
   E). Clear expectations of children
   F). Reward good behavior
6. Classroom Characteristics
   A). Time for small group instruction
7. Description of Classmates
   A). Child can be a friend with
8. Criteria for Selecting Receiving Program
   A). Special Services

Analysis of the open-ended questions indicated 44 percent of the parents did not understand the transition process; 42 percent were not comfortable with what is involved; 87 percent wanted to share the transition responsibility with teachers; 93 percent wanted to work with the child at home on necessary skills; 67 percent were comfortable with understanding what is involved in decision making about the new environment; and 79 percent wanted to use a checklist to help guide visits to the receiving environments.

Identification of parent needs for education and services, as well as concerns, were gathered from 92 families. This study, completed by Hanline (1988), examined and

compared the needs of the parents before and after the transition process, from early intervention infant services into preschool special education programs. Parents of 38 children in various early intervention programs and 54 parents of children receiving services in self-contained special education programs completed the surveys. Overall the major concerns of the parents were lack of information about services offered, anxiety about unfamiliar agencies, uncertainty about appropriate services, separation anxiety, reduction of parent involvement, classroom size, exclusion from decision making, and control over daily activities. Information and services both sets of parents indicated would be helpful, included the knowledge to participate as an active member in the decision making process. Differences between the parents were noted as parents of preschoolers rated information about community services and child development as a higher priority than the parents of infants did. Conversely, parents of infants rated information about preparing children for preschool, visiting preschools, and parent involvement as more important than parents of preschoolers did. Hanline (1988) suggested the differences in responses might have been a result of the design of the study reflecting the parents' present needs.

Kilgo, Richard and Noonan (1989) reported results from a study searching for patterns among the times parents expressed they were ready to begin planning for transition from infant early intervention programs into preschool. Data, from an unreported methodology, were gathered from 77 mothers and 31 fathers and analyzed for patterns. Results indicated the peak time for thinking about transition planning was 24 to 29 months. In addition, transition readiness was directly related to the severity of the child's needs.

In a similar study, McDonald, Kysela, Siebert, McDonald and Chambers (1989) administered a questionnaire on transition planning, through the use of an interview format, to 25 families in an infant program in Edmonton, Alberta. The families responded to both open-ended and closed-ended questions relating to their exit from the early intervention program. Sixty-four percent of the respondents expressed a desire to begin planning six months to one year in advance of the transition. Of those participants who had begun planning, 64 percent indicated they had begun between six months and one year. Parents were satisfied with transition planning beginning at six months and all wanted to be involved. Information needed by parents for preparation resulted in 88 percent of the parents identifying descriptions of other programs as the most important. This was followed by tours of the programs (72 percent) and parent support groups (56 percent).

Hamblin-Wilson and Thurman (1990) designed a study to expand upon the results from Johnson, Chandler, Kerns and Fowler (1986) and Hanline (1988) through a more comprehensive view of parental perceptions of the transition process. The investigation looked at the perceptions of parents with children who had moved from placement in early intervention programs into the public schools special education. Previous study results influenced the four areas of focus in this study including satisfaction with the transition; importance of service relationships; support and explanation received; and importance of their preparation for transition. Questionnaires completed by 91 families included demographic information as well as ratings of their satisfaction. Analysis of the results indicated 60 percent of the respondents reported they received more support from the early intervention programs compared to only 2 percent of the respondents reporting

more support from the schools. In addition, 68 percent of the respondents reported that they were involved in the transition process while 58 percent had been involved in the program planning process. Hamblin-Wilson and Thurman (1990, p. 60) suggested, "What still remains to be determined is the exact nature of parental involvement and the degree to which parents involvement is instrumental in effecting specific outcomes within the transition process."

Speigel-McGill, Reed, Konig and McGowan (1990) reported on a case study of seven families that participated in an educational workshop, designed to facilitate the transition from an early intervention program to a preschool special education program. Parents evaluated the effectiveness of the transition program by completing a survey. Overall, the parents found the program to be very useful, specifically with preparation in understanding what to expect, understanding their role in placement meetings, what to expect in the preschool program, and how to be a better advocate for their child.

Schmutz (1995) administered questionnaires in an interview format to 20 parents to identify the causes of stress and anxiety during the transition of their child from an early intervention program into preschool. In addition to the stress factors, the questionnaires determined the parent's knowledge, involvement, and satisfaction with the transition. Sixteen of the parents reported both very high anxiety and stress. All parents reported no assistance from school personnel on paperwork, no opportunities to view placement, and an absence of team meetings between sending and receiving teams. Six parents requested the opportunity to view the placement before their child was transitioned, but were denied by preschool administrators. One other major concern shared by 70 percent of the parents was the explanation of the due process rights. The parents reported they found the

explanation to be very unclear. Eighty percent of the parents indicated they felt the transition should start at least six months before placement into preschool.

Research on 'best practices' regarding early childhood transitions became imperative as P. L. 99-457 mandated that states provide preschool services to young children who had a qualifying disability. In combination with the strong financial incentives offered to states providing early intervention services to children age 0 to 2, components of this legislation make 1986 a pivotal year for changes in transition practices in early childhood special education. P.L.99-457 and P.L.102-119 delineated expectations of the transition process, including: (a) parent involvement; (b) discussions with and training of parents regarding future placement and other matters regarding the transition; (c) procedures for helping the child adjust to the change of environment; and (d) convening a conference including both programs and the parents. Despite these guidelines, relatively few research publications that focused on measurement of the parents' perspectives were available regarding early childhood special education transitions.

Overall findings of this research measuring parent involvement and satisfaction (Fowler, Chandler, Johnson & Stella, 1988; Hanline, 1988; Hamblin-Wilson & Thurman, 1990; Johnson, Chandler, Kerns & Fowler, 1986; Kilgo, Richard & Noonan, 1989; McDonald, Kysela, Siebert & Chambers, 1989; Schmutz, 1995; Speigel-McGill, Reed, Konig & McGowan, 1990) reported high levels of parent satisfaction in very few areas. Although these studies generally reported a positive view of early childhood special services, some factors made these results problematic. Comprehensive analysis of the

reported findings was hampered by incomplete descriptions of the measurement tools used and the findings obtained.

In order to evaluate early childhood special education program services, components of family systems theoretical foundations, previous research results, and federal mandates strongly supported the need for more information regarding the amount and satisfaction of parent involvement. The general literature indicated a need for parent involvement throughout the entire life-long special education process. Systematic and empirical measurement of parent involvement and satisfaction should contain a theoretical foundation to base measurement and the direct implications of federal mandates. Results of previous research indicated parental involvement and satisfaction factors needed to be examined to elicit much needed information about program effectiveness. Within the component of transition services, only one model (Diamond, Spiedgel-McGill & Hanrahan, 1988) presented a foundation theoretically grounded, in this case applying concepts elucidated by Bronfenbrenner (1979, 1986). Application of this theoretical model to early childhood special education transitions provided a solid foundation to systematically explore the parents' perceptions of their experiences and how they relate to the federal mandates. The steps of this model applied concepts clarified in order to enhance the interrelationships between the child's present and future educational environments as they relate to the transition.

Definitions

Transition

Strategies and procedures that are planned and employed to ensure the smooth placement and subsequent adjustment of the child as he or she moves from one program into another (Huntinger, 1981).

Theoretical Concepts from General Systems Theory

Microsystems A smaller set of subsystems environments in which, a child functions (the child's immediate family, peers, community, early intervention team, and preschool).

Mesosystem Reciprocal relationships between microsystem environments encompassing the child and the environment (relationship between the child's sending and receiving programs and the family system).

Microsystem The new environment (receiving program in a transition) a child is moving into.

Step I Pre-existing intersetting relationship before the transition, including previous interactions such as information, attitudes, and expectations of both systems (Bronfenbrenner, 1986).

Step II After the child has entered the new setting, the family must reorganize to accommodate the child's transition into a new role in a new setting.

Step III After the transition has occurred, changes take place in the relationships existing between the child's various environments possibly including shifts over time.

Chapter III Methodologies

The basic nature of educational research involves diverse approaches in the use of methodologies. Scientific inquiry into education is strongly supported by the underlying epistemological issues. Epistemology is defined as the branch of philosophy studying the nature of knowledge and the processes through which knowledge is acquired and validated (Gall, Borg & Gall, 1996). Philosophers who investigated scientific inquiry developed schools of thought influencing different disciplines, including social science research. In addition, individual researchers have identified with their own theoretical positions about how research should be done within their disciplines. Most educational research involves investigations to learn about individual persons or groups, aspects of their social environments, and the interactions between the two. The purpose of this study was to investigate individuals/groups, aspects of social environments, and interactions between the two, regarding early childhood special service transitions for children who have disabilities and their families.

Odom (1988) examined the most frequently used methodologies and paradigms in early childhood special education research. He began by using quantitative measures, including randomized group designs, to answer questions relevant to early childhood special education such as the effectiveness of early intervention. Quasi-experimental design examples included the review of programs while single group designs demonstrated the effectiveness of programs. Correlation designs were used for psychometric analysis of assessment instruments, to demonstrate validity of instruments, relationships between processes and procedural measures, and relationships between

'organismic' variables (demographic variables) and dependent variables. Single subject designs were intervention oriented and demonstrated effectiveness of a program or procedure. General qualitative methodologies were used to investigate aspects of family systems and the reciprocal influences of the individual with a disability. Interviews and questionnaires have been designed and used to gather parental perception information on a wide variety of issues the family faces in special education (Odom, 1988).

These measures have become critical in the application of information to services for families. Odom (1988, p.2) identified research in early childhood special education as "a complex world in which a range of factors influence both the feasibility and the direction of research activity." Two factors that impacted the research were the contexts where the research occurred and the consumers intended to use the information. Early childhood special education is an applied discipline, therefore related research has often been designed to answer pragmatic questions (Odom, 1988). Sociopolitical contexts have influenced early intervention and early childhood special education research support, acceptability, activity and impact. This in turn has affected the impact on social policy regarding early intervention, early childhood special education, and family involvement programs. Consumers of early childhood special education research included researchers, teachers, teacher educators, policy makers, economists, psychologists, numerous health related professions and parents (Odom, 1988). In order for these consumers to make optimal use of research into practice, research designs were chosen to yield results that were understandable to potential consumers. Most research in early childhood special education responded to the information of multiple consumer groups and sources. Thus, research in this area generated many questions, which no

single design or methodology was able to answer (Odom, 1988). The use of multiple sources served to strengthen the initial research and resulting consumer information.

In relation to early childhood special service transitions, chapter one described family systems and developmental theories, in particular Bronfenbrenner (1979, 1986) and Bronfenbrenner and Morris (1998). Application of these researchers' theories were clearly and accurately delineated (Diamond, Spiegel-McGill & Hanrahan, 1988) in relation to early childhood special service transition experiences. Although well supported in theory and models, empirical, systematic investigations into early childhood special services regarding parent/guardian perceptions of their transition were limited.

Purpose

The overarching purpose of this study was to systematically examine family perceptions of their experience transitioning between programs in early intervention and early childhood special education services. Oklahoma chose to provide families with two distinctly different service models in early childhood special education services. Families who were among the first to receive early intervention in a home-based model and early childhood in a center-based model have aged into elementary school education programs. In order to provide effective transition services to families, professionals must have an understanding of each family's needs. Results were generalizable only to services in Oklahoma. However, the results may provide support for other states seeking to improve service provision in transition from home-based early intervention and center-based, preschool early childhood special education services.

This study included three separate objectives necessary to achieve the main goal. The first objective was to determine if differences existed in the components and

characteristics between the child's transition from early intervention into preschool and the child's transition from preschool into kindergarten. The second objective was to identify key components in both levels of transition service delivery in order to meet the dynamic needs of the family as the child ages into public school systems. The final objective of the study examined factors of early childhood transition service provision the families identified as successful and those most in need of revision, in order to provide optimal services meeting their dynamic needs. This study provided a systematic investigation of the families' expressed needs at each level of development.

Research of this nature required data from a large sample base across a wide geographic area in Oklahoma representing the state demographics as closly as possible. In order to achieve this goal, questionnaires were the optimal data collection tool. Questionnaires are used in quantitative research to elicit responses from a larger group size to further support data from smaller sets. Refined theory or hypotheses are put into a standardized and highly structured format of questions. Questionnaires provide a quicker method for gathering data, while providing the subjects with anonymity (Gall, Borg & Gall, 1996). Questionnaires allow the subject to respond by writing answers or more commonly by marking a standard answer sheet. Advantages include the ability to reach a larger number of people and anonymity. One disadvantage is the subjects' and or researchers' lack of expansion or clarity on questions that are ambiguous. Common selection type items that serve a wide variety of purposes include multiple-choice, true-false, matching, and interpretive exercise (Fraenkel & Wallen, 1996). The main purpose of survey research is to describe the characteristics of a population. Researchers can infer a description of the whole population from the carefully selected samples.

Characteristics can be identified and described through quantification (Fraenkel & Wallen, 1996).

This study identified and described the characteristics and perceptions of families who received early childhood transition services in special education, in relation to the federally mandated guidelines of transition services.

Apparatus

A survey instrument was used as the primary data collection source to identify these perceptions as they relate to specific transition activities outlined in P.L.99-457 and P.L.102-119. A family demographics instrument included with the survey also supplied secondary data to identifying possible variable differences among the participants including: family size, child's gender and age, socio-economic status, culture, parental education, and severity of the child's disability. These individual variables are critical in studies of family systems, particularly those families of individuals with disabilities, in order to determine differences among families in service availability and delivery.

Survey Instrument

The survey instrument was the data collection source for this investigation. (See appendix D). The survey questions described in detail were designed to measure the parent/guardian perception of the transition issues outlined in federal law. The instrument was divided into five categories that requested parental/guardian responses on their views of the following issues: a) parent/guardian legal rights, b) transition policies, c) parental involvement, d) parental information, and e) program satisfaction. The design of the instrument included both scaled questions, whereby participants selected a response, and open-ended questions, whereby participants wrote a short response to the question.

Demographic Questionnaires

Demographic questionnaires (see appendix C) were also included in the survey packet, which gathered data on the families' size, age of child, gender, identification of and severity of their child's disability, supplemental service qualifications, parental relationships to the child, and parental education.

Consent Forms

Parents received a consent form in their packet of information (see appendix B) detailing the reasons for the study and their rights as subjects. Participation in the study served as their consent as their confidentiality rights were protected and maintained.

This study utilized a hybrid mix of methodologies using aspects of both quantitative and qualitative approaches. The survey was the data collection source for both quantitative and qualitative questions. The survey was designed to answer issues surrounding the transition services as mandated. These issues were divided into five categories: a) parent/guardian legal rights, b) transition policies, c) parental involvement, d) parental information, and e) program satisfaction. The survey design included both scaled questions, whereby participants selected a response, and open-ended questions, whereby participants wrote short responses to the question.

Data analysis on the quantitative portion of the survey was descriptive, reported in frequencies and percentages of those items. The resulting data provided a description of the context of the participants.

The qualitative portion allowed the parents to elaborate on some of their answers through the use of open-ended expansion questions about their experiences or feelings. Most families answered at least part of the qualitative questions. General qualitative

methodologies were used to investigate aspects of the families' perceptions of their transition experiences and the reciprocal influence on their children with disabilities. The open-ended expansion questions on the survey were designed to gather information on parental perception of the transition issues previously outlined. The qualitative questions allowed parents to briefly expand upon issues that could not be answered through the use of a scaled score. In these cases, the concepts and relationships of the parents' perceptions were generated and tested. The cases of these families' experiences were developed by using comparative analysis in which the cases were compared among families. Relative sampling is critical to theory concerning particular populations such as the ones in this study. Therefore, the survey was sent to a large portion of the population with young children who have disabilities across Oklahoma. This study used techniques, including open and axial coding, pattern matching and identification of categories. The open coding involved a general process of breaking down, examining, comparing, conceptualizing, and categorizing data concerning the transition. The axial coding further refined the data concepts by making connections between categories.

Participants

Subjects were parents of 75 children who received special education services in both transitions. Surveys were sent to families of children in the age range of kindergarten to fifth grade, across a wide geographic sampling in Oklahoma. The Oklahoma State Department of Education child count data for 1999 indicated a total of 5,774 children ages three to five were served in preschools while 37,472 children were served by IDEA-B, P.L.105-17 in the age range of 6-11. The IDEA-B total covered 13 categories of disabilities. Of these categories, two served the greatest number of children

ages 6-11, speech/language impairment (12,892) and specific learning disability (16,120). Another 1,413 were served under the label serious emotional disturbance. Ten categories (mental retardation, hearing impairment, deafness, visual impairment, orthopedic impairment, other health impairment, deaf-blindness, multiple disabilities, autism, and traumatic brain injury) combined served 7,047 children. The sampling of this survey was drawn from these 10 categories. Children in these categories had a much higher probability of early detection of the disability and meeting the qualification criteria for services in early intervention and preschool as outlined in Sooner Start and IDEA-B. Specific learning disability, speech/language impairment, and serious emotional disturbance were excluded. Children in these categories had a much greater chance of not qualifying for early childhood special education services designed for children with more severe disabilities. Families identified for this study were the first group to receive services in both early intervention until age three and preschool until age five. The majority sampling of families had completed both of the early childhood special service transitions as mandated. The remainder completed at least one transition.

All children are guaranteed a free and appropriate public education, regardless of the severity of their disability through the EAHCA, P.L.94-142 also known as IDEA, P.L.101-476. Parental rights outlined in P.L.94-142 and further refined in P.L.102-119 guarantee their right to confidentiality concerning their child's services in special education. In order to protect these rights and reach a large population, the survey packets were sent to elementary schools throughout Oklahoma after receiving permission. The schools then cooperated in distributing the research packets. Surveys were sent to representatives from many counties to include a wide geographic representation across

Oklahoma. Additionally, parent support and advocacy agencies mailed survey packets to families in their databases. These were mailed to the parents through the agency to protect their confidentiality. The individual packets included a cover letter to the parents describing the purpose (see appendix A), informed consent form (appendix B), demographic questionnaire (appendix C), the survey instrument (appendix D), and a postage paid envelope for the families to return the survey. The administrators also received a cover letter explaining the purpose of the study and their role in the distribution (appendix E). Numerous agencies participated in identification and distribution of surveys. These included: Oklahoma City Public Schools, Norman Public Schools, Mid-Del Public Schools, Little Axe Public Schools, Jenks Public Schools, Lawton Public Schools, Altus Public Schools, Fox Public Schools Cooperative, Oklahoma Parent Center, The Center for Learning and Leadership (formerly University Affiliated Program) Oklahoma Parent Network, Special Care, and the Developmental Disabilities Council.

Chapter Four

Results

Results of the analyses are presented in three sections. The first section provides a description of the participants, (parent/guardian) including their relationship to the child, highest levels of education, general occupation, race/ethnic origin and marital status. Additionally, this section provides a description of the children's age ranges, diagnosis, special education labels, gender, type of therapy received, pregnancy term status (full or pre term), insurance coverage status, and state and federal program assistance. The second section reports the participants' perceptions of the early childhood transitions. This section is further broken down into five subsections. These subsections were derived from P. L. 99-457, previously described and defined (a) parent/guardian legal rights, (b) transition policies and procedures (c) parent involvement (d) parent information, and (e) program satisfaction. The third section presents results of parental satisfaction. This section gave parents the opportunity to further amplify their responses regarding their satisfaction and general feelings through qualitative questions.

Survey packets were distributed through various agencies including public schools, private day care, parent support group databases, and state and federal parent support agencies. A total of 1,183 packets were distributed through these volunteer agencies. Surveys from the parents were returned to the University of Oklahoma in postage paid envelopes enclosed in their packets. One hundred-three surveys were returned. Twenty-eight were disqualified based on the following guidelines: (a) the subject did not complete the early childhood transition or (b) more than one-half of the questions were not answered (excluding open-ended questions). Additionally, questions

with unclear answers (e.g., more than one answer circled on scaled questions) were disqualified. The parents were clearly asked not to identify themselves on any part of the survey or envelope. However, approximately half of the participants chose to make statements that included the child's first name, name of the school or a teacher's name. Additionally, seven parents contacted the researcher by telephone to further discuss their experiences. Three parents attached letters further detailing their experiences and feelings.

Additionally, many participants chose not to answer all the questions. Those that were not answered were analyzed for patterns among responses. The non-response rate appeared to be random. Participants skipped either (a) a single question containing answers to both the first and second transition, (b) the first half of a question relating to the first transition, (c) the second half of the question relating to the second transition or (d) an entire page (one participant).

I. Description of Participants

Parents

Relationship to the Child

Information on the maternal and paternal relationships to the child is found in Table 1. Results showed the overwhelming majority (88%) of maternal participants were biological parents. The remaining maternal relationships consisted of foster parent (1.3%), stepparent (1.3%), adopted (2.7%), and grandparent (6.7%). Grandparents participating in the survey indicated they were raising the child with little or no help from the biological parent. Paternal relationships were reported primarily as the biological parent (62.7%). The remainder were foster parent (1.3%), step parent (17.3%), adopted

(1.3%) and grandparent (5.3%). The biggest noted difference in maternal and paternal relationships was the higher percentage of maternal biological parents as compared to an increased percentage of paternal stepparents. All participants reported a maternal relationship to the child while 9 (12%) of the paternal relationships were not reported.

Table 1
Frequency and (Percent) of Maternal and Paternal Relationships to Child

Maternal Relationship	Maternal Frequency (Percent)	Paternal Frequency (Percent)
1. Biological parent	66 (88)	47 (62.7)
2. Foster parent	1 (1.3)	1 (1.3)
3. Stepparent	1 (1.3)	13 (17.3)
4. Adopted parent	2 (2.7)	1 (1.3)
5. Grandparent	5 (6.7)	4 (5.3)
(Not reported)	0	9 (12)

Education Levels

Results of the maternal and paternal education levels are found in Table 2. Results of the maternal education levels show a distribution including elementary grades 1-8 (8%), high school grades 9-12 (36%), college 1 to 4 years (41.3%), and graduate school (13.3%). Paternal education levels were similarly distributed including elementary grades 1-8 (6.7%), high school grades 9-12 (40%), college 1 to 4 years (28%), and graduate school (12%). However participants reported more of the fathers' highest education levels at the high school level as compared to the mothers who reported more at the college and graduate school levels. One (1.3%) of the maternal education levels and 10 (13.3%) of the paternal education levels were not reported.

Table 2
Frequency and Percent of Educational Levels

Education Level	Maternal Frequency (Percent)	Paternal Frequency (Percent)
1. Grade school (1-8)	6 (8)	5 (6.7)
2. High school (9-12)	27 (36)	30 (40)
3. College (13-16)	31 (41.3)	21 (28)
4. Graduate school (16+)	10 (13.3)	9 (12)
(Not reported)	1 (1.3)	10 (13.3)

General Occupation

General occupation of both the maternal and paternal participants are found in Table 3. General categories were drawn form the 2000 U.S. Bureau of Census. Twenty-two maternal caregivers (29.3%) reported no present employment. Six paternal caregivers (8 %) were reported as unemployed and two as disabled and not working. However, none of the paternal caregivers were reported as a full time parent, including those retired, disabled or unemployed. Seven (9.3%) of maternal and 16 (21.3%) of paternal employment status were not reported. None of the paternal reports indicated that the father was a full time parent in spite of reporting unemployed or disabled.

Table 3
Frequency and Percent of General Occupation

Occupation Categories from the U.S. Bureau of Census	Maternal Frequency (Percent)	Paternal Frequency (Percent)
Executive, administrative, and managerial	1 (1.3)	1 (1.3)
Professional specialty	25 (33.3)	15
Technician and related support		1 (1.3)
Sales	2 (2.6)	1 (1.3)
Administrative support	3 (4)	
Private household (self-employed)	1 (1.3)	5 (6.6)
Protective service		5 (6.6)
Service	7 (9.3)	3 (4)
Farming, forestry, and fishing		1 (1.3)
Precision product, craft, and repair		1 (1.3)
Machine operators, assemblers, and inspectors	2 (2.6)	2 (2.6)
Transportation and material moving	1 (1.3)	2 (2.6)
Handlers, equipment cleaners, helpers, and laborers	2 (2.6)	11 (14.6)
Unemployed		6 (8)
Full time parent	22 (29.3)	
Retired	1 (1.3)	1 (1.3)
Student	1 (1.3)	1 1.3)
Not reported	7 (9.3)	16 (21.3)

* Note one father reported as deceased.

Race/Ethnic Origin

Results of the maternal and paternal race/ethnic origin are presented in Table 4. Maternal origins were reported as Caucasian (62.7%), African American (17.3%), Hispanic (6.7%), and Native American (9.3%). Paternal ethnic origins were reported as

Caucasian (56%), African American (14.7%), Hispanic (2.7%), Chinese (1.3%), and Native American (8%). Thirteen cases (17.3%) of the paternal ethnic backgrounds were not reported while only 3 (4%) of the maternal ethnic backgrounds were not reported. The column on the far right of Table 5 indicates the demographic characteristic of race in Oklahoma from the 2000 U.S. Census Bureau data. Data from this sample are close representation of Oklahoma's race distribution. One race is of notable difference. The African American sample of this study for both the maternal and paternal frequency is double the 2000 Census Bureau percentage for Oklahoma.

Table 4
Frequency and Percent of Ethnicity

Ethnicity	Maternal Frequency (Percent)	Paternal Frequency (Percent)	Oklahoma Demographics 2000 Census by (percent)
Caucasian	47 (62.7)	42 (56)	(76.2)
Hispanic	5 (6.7)	2 (2.7)	(5.2)
African American	13 (17.3)	11 (14.7)	(7.6)
Chinese	0 (0)	1 (1.3)	(.2)
Native American	7 (9.3)	6 (8)	(7.9)
(Not reported)	3 (4)	13 (17.3)	

Marital Status

Results of the maternal marital status are presented in Table 5. Marital status of the participants was limited to the mother's (primary caregiver) status. Results indicated that the majority were presently married (60%) with the remaining participants reporting single (20%), divorced (18.7%), and separated (1.3%). It is important to note that the survey did not indicate whether the participating primary maternal caregiver was married to the child's natural father. All participants reported a marital status.

Table 5
Frequency and Percent of Maternal Marital Status

Maternal Marital Status	Frequency	Percent
Married	45	60
Single	15	20
Divorced	14	18.7
Separated	1	1.3
(Not reported)	0	0

Child

Age Ranges

Results of the child's birth year are in Table 6. The birth years of the children range from 1986 to 1997 with the majority falling between 1989 to 1994. The distribution ranges as follows 1986 (1.3%), 1988 (5.3%), 1989 (12%), 1990 (8%), 1991 (13.3%), 1992 (20.0%), 1993 (12%), 1994 (8%), 1995 (8%), 1996 (2.6%), and 1997 (4%). Three (4%) families did not report a birth date.

Table 6
Frequency and Percent of Child's Birth Years

Birth Years	Frequency	Percent
1986	1	1.3
1988	4	5.3
1989	9	12
1990	6	8
1991	10	13.3
1992	15	20
1993	9	12
1994	6	8
1995	6	8
1996	2	2.6
1997	3	4
(Not reported)	3	4

Diagnosis

Parents reported a wide variety of diagnoses of their child's condition or disability. Results of the diagnosis are found in Table 7. Sixteen cases (21.3%) did not report a diagnosis for their child.

Table 7
Frequency and Percent of Child's Diagnosis

Diagnosis	Frequency	Percent
Down's Syndrome	6	8
Autism	6	8
Mental Retardation (MR)	5	6.7
Developmental Delay	3	4
Cleft Pallet	1	1.3
Speech Delay	1	1.3
Cerebral Palsy (CP)	5	6.7
Microcephaly	0	0
Hydrocephalus	2	2.7
Fragile X	0	0
Muscular deficiency	1	1.3
Attention Deficit Hyperactivity Disorder (ADHD)	0	0
Attention Deficit Disorder (ADD)	0	0
Traumatic Brain Injury (TBI)	3	4
Hearing Impairment (HI)	2	2.7
Chemical Exposure (e.g., crack, FAS, FAE)	1	1.3
Spina Bifida	1	1.3
Chromosome Abnormality Unspecified	2	2.7
Seizure Disorder (SD)	1	1.3
Dandy Walker Syndrome	1	1.3
Autism/MR	1	1.3
DD/MR	2	2.7
Myotonic Dystrophy/Autism	1	1.3
Fragile X/Autism	1	1.3
Hydrocephalus/CP/MR	1	1.3
Microcephaly/SD	1	1.3
CP/MR/SD/ADHD	1	1.3
MR/ADHD	1	1.3
ADHD/TBI	1	1.3
DD/CP	1	1.3
CP/SD	1	1.3
Hydrocephalus/CP	1	1.3
Atrophy of the Brain	1	1.3
Pervasive Developmental Disorder (PDD)	1	1.3
PDD/SD	1	1.3
Deaf/CP	1	1.3
(Not reported)	16	21.3

Label

Parents were asked to report the special education label under which their child receives services in the public schools. Results are found in Table 8. Oklahoma recognizes 14 categories: developmental delay, mental retardation, hearing impairment, speech or language impairment, orthopedic impairment, other health impairment, specific

learning disability, deaf-blindness, multiple disabilities, autism, traumatic brain injury. Of these categories, parents reported having a child with the labels developmental delay (8%), mental retardation (26.7%), hearing impairment (2.7%), speech or language impairment (2.7%), orthopedic impairment (5.3%), other health impairment (4%), multiple disabilities (13.3%), autism (18.7%), traumatic brain injury (4%), and deaf-blind (1.3%). Nine parents (12%) did not report a label.

Table 8
Frequency and Percent of Child's Label

Label	Frequency	Percent
Developmental Delay	6	8
Mental Retardation	20	26.7
Hearing Impairment	2	2.7
Deafness	0	0
Speech/Language Impairment	2	2.7
Visual Impairment	0	0
Serious Emotional Disturbance	0	0
Orthopedic Impairment	4	5.3
Other Health Impairment	3	4
Specific Learning Disability	1	1.3
Deaf-Blindness	1	1.3
Multiple Disabilities	10	13.3
Autism	14	18.7
Traumatic Brain Injury	3	4
(Not reported)	9	12

Gender

Results of the child's gender status are found in Table 9. The majority of children were males (61.3%) while the remaining number (37.3%) were females. One (1.3%) did not report a gender status for their child.

Table 9
Frequency and Percent of Child's Gender

Gender	Frequency	Percent
Male	46	61.3
Female	28	37.3
(Not reported)	1	1.3

Therapy

Results of the reported therapy received are found in Table 10. Oklahoma offers services in occupational therapy, physical therapy, speech therapy on an individual basis according to the child's needs. Additionally, other therapy services including biofeedback, Applied Behavior Analysis, medication, and listening therapy were reported by the participants. Each Individual Education Program (IEP) team determines the need for therapy and delineates the type and amount of therapy. Twenty families (26.7%) did not report the current status or absence of the therapy their child received. The majority of families (65%) reported that their child received therapy, while (8%) reported that they received none. Several families reported services in terms of "what the school provides" or "at school". These were not reported in the therapy results Table 10, as these were not clear.

Table 10
Frequency and Percent of Child's Therapy

Therapy	Frequency	Percent
Occupational Therapy (OT), Physical Therapy (PT), Speech Therapy (ST), Applied Behavior Analysis, Neuro, Biofeedback, Medication	49	65
None	6	8
(Not reported)	20	26.7

Pregnancy Term

Results of the mother's pregnancy term are found in Table 11. Parents were asked to report whether their child was born premature or full term as children born premature are at greater risk of having a disability or developing one. Parents of 51 children (68%) reported their children were born full term, while parents of 16 children (21.3%) reported their children were born pre term. Eight parents (10.7%) did not report a term status.

Table 11
Frequency and Percent of the Mother's Pregnancy Term

Term	Frequency	Percent
Full Term	51	68
Premature	16	21.3
(Not reported)	8	10.7

Siblings

Results of the number of siblings are found in Table 12. Parents were asked to report the number of sibling that their child had. The results ranged from none to six, with the majority reporting either one (37.3%) or two (22.7%) siblings.

Table 12
Frequency and Percent of the Siblings

Number of Siblings	Frequency	Percent
None	11	14.7
1	28	37.3
2	17	22.7
3	8	10.7
4	4	5.3
6	3	4
(Not reported)	4	5.3

Family

Qualifications for State/Federal Assistance Programs

Parents were asked to report on the child's eligibility for state and federal assistance programs (e.g., free lunch, insurance/medical coverage, and DHS daycare). Some programs were available to all qualifying children, with or without a disability. The remaining were available only to qualifying children with disabilities (e.g., supplemental security income, respite care, waivered services, Medicaid, Medicare). Results of the free lunch eligibility, reported in Table 13, indicated that 60% qualified for the free lunch program while 34.7% did not. Four families (5.3%) did not report a free lunch qualification status.

Results of the child's medical coverage status are reported in Table 14. The overwhelming majority of parents (89.3%) reported their child had medical coverage while 9.3% did not have coverage. A breakdown of the medical coverage provider is provided in Table 15. The largest percent of coverage (23.8%) was reported to be the parent's employment. The second largest coverage provider (22.7%) was reported to be Medicaid. Other providers of significance were Soonercare (12.5%) and Medicare (5.6%). Combinations of coverage were noted in each area by reporting coverage in each area. Thus the total number of reported coverage, 88, exceeds the total number of participants.

Results of the supplementary aids and services are found in Table 16. The majority of the parents, 41 (54.7%) reported that their child did not qualify for supplemental services. However, 20 families (26.7) reported that they received supplemental security income. The status of those not reporting is found at the bottom of each table.

Table 13
Frequency and Percent of the Free Lunch Eligibility

Free Lunch	Frequency	Percentage
Yes	45	60
No	26	34.7
(Not reported)	4	5.3

Table 14
Frequency and Percent of the Medical Coverage Status

Medical Coverage	Frequency	Percentage
Yes	67	89.3
No	7	9.3
(Not reported)	1	1.3

Table 15
Frequency and Percent of the Medical Coverage Provider

Medical Coverage Provider	Frequency	Percentage
Private	6	6.8
Employment	21	23.8
Medicaid/Medicaid	20	22.7
Medicare	5	5.6
Soonercare	11	12.5
Shriner's Hospital	1	1
(Not reported)	7	7.9

Table 16
Frequency and Percent of the Supplementary Aids and Services

Supplementary Aids and Services	Frequency	Percent
Supplemental Security Income (SSI)	20	26.7
Waivered Services	5	6.7
DHS Daycare	3	4
Respite Care	0	0
None	41	54.7
SSI/Daycare	2	2.7
SSI/Daycare/Waivered	1	1.3
SSI/Daycare/Respite	1	1.3
SSI/Waivered/Respite	1	1.3
(Not reported)	1	1.3

II. Participant's Perceptions: Survey Results

The data presented in Tables 17-24 addresses the research questions regarding the parents' perception of their experiences in early childhood special services transitions. Specifically, these data address the roles and participation regarding the transitions as perceived by the parents. The primary issues were (a) legal rights, (b) policies and procedures, (c) parental involvement, (d) parental information, and (e) parental satisfaction. However, parental satisfaction is addressed through qualitative data presented in separate tables. Specific questions designed to answer each research question are delineated in each section. However, several questions are additionally woven through several sections. Thus a discussion of specific answers to research questions is addressed in the next chapter.

The data in Tables 25 to 32 and qualitative summaries in chapter four address the primary issues of parental satisfaction as perceived by the parents. As noted in chapter one, these areas form the basis for the early special service transitions as regulations outlined in P. L. 99-457 Part H (Sec. 303.344) and P. L. 102-119 [Part B Sec. 613 (a) (15)] and [Part H Sec. 678 (a) (8)].

Legal Rights

Data for legal rights are shown in Tables 17 and 18 for the first and second transitions respectively. The answers to the questions regarding their legal rights indicated that 46 parents felt their legal rights were explained resulting in their understanding somewhat (18.7%) or understood well (42.7%) during the first transition from early intervention to preschool. These results were the same for the parent's report on this issue regarding the second transition from preschool to kindergarten. Forty-two parents felt their questions were answered either a fair amount (25.3%) or extensively (29.3%). This changed very little during the second transition as most parents either answered a fair amount (30.7%) or extensively (25.3%). Again the majority, 46 parents, indicated that the differences between the IFSP and the IEP were explained so they either somewhat understood (21.3%) or understood well (40%). The overwhelming majority, 46 parents, indicated yes (61.3%) they understood the IEP would be used for their child in the public school setting during their first transition. Finally, the parents reported that they understood the IEP better after the first transition by reporting that they understood somewhat (22.7%) and that they understood well (37.3%) as compared to the second transition where they reported that they understood the IEP somewhat (14.7%) and understood the IEP well

(48%). The number of parents that did not answer these questions is shown in the far right column of Tables 17 and 18.

Table 17
Frequency and (Percent) for Legal Rights Questions
Early Intervention to Preschool

Question	No	Not well	Somewhat understood	Understood well	Not Answered
1. LR explained	10 (13.3)	7 (9.3)	14 (18.7)	32 (42.7)	12 (16.)
3. Explained differences between IFSP & IEP	10 (13.3)	11 (14.7)	16 (21.3)	30 (40)	8 (10.7.)
5. Understood IEP	9 (12.)	12 (16.)	17 (22.7)	28 (37.3)	9 (12.)
Question	**Not at all**	**Very little**	**A fair amount**	**Extensively**	**Not Answered**
2. Answered questions about LR	11 (14.7)	10 (13.3)	23 (30.7)	19 (25.3)	12 (16.)
Question	**Yes**	**No**			**Not Answered**
4. Understood IEP used for school	46 (61.3)	21 (28.)			8 (10.7)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

Table 18
Frequency and (Percent) for Legal Rights Questions
Preschool to Kindergarten

Question	No	Not Well	Somewhat Understood	Understood Well	Not Answered
1. LR explained	6 (8.)	10 (13.3)	14 (18.7)	32 (42.7)	13 (17.3)
5. Understood IEP	3 (4.)	14 (18.7)	11 (14.7)	36 (48.)	11 (14.7)
Question	**Not at all**	**Very little**	**A fair amount**	**Extensively**	**Not Answered**
2. Answered questions about LR	10 (13.3)	12 (16.)	19 (25.3)	22 (29.3)	12 (16.)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

1. Our legal rights concerning the transition into the new program were explained in a way that we could understand.

	EI to P	P to K
No	10 (13.3%)	6 (8%)
Not well	7 (9.3%)	10 (13.3%)
Somewhat understood	14 (18.7%)	14 (18.7%)
Understood well	32 (42.7%)	32(42.7%)
(Not answered)	12 (16%)	13 (17.3%)

2. The teachers helped us by answering questions about our legal rights.

	EI to P	P to K
Not at all	11 (14.7%)	10 (13.3%)
Very little	10 (13.3%)	12 (16%)
A fair amount	23 (30.7%)	19 (25.3%)
Extensively	19 (25.3%)	22 (29.3%)
(Not answered)	12 (16%)	12 (16%)

3. The teachers explained the differences in the Individual Family Service Plan (IFSP) and the Individual Education Program (IEP).

	EI to P
No	10 (13.3%)
Not well	11 (14.7%)
Somewhat understood	16 (21.3%)
Understood well	30 (40%)
(Not answered)	8 (10.7%)

4. We understood that we would be using an Individual Education Program in the school program instead of the Individual Family Service Plan.

	EI to P
Yes	46 (61.3%)
No	21 (28%)
(Not answered)	8 (10.7)

5. We understood what the Individual Education Program was and how it worked.

	EI to P	P to K
No	9 (12%)	3 (4%)
Not well	12 (16%)	14 (18.7%)
Somewhat understood	17 (22.7%)	11 (14.7%)
Understood well	28 (37.3%)	36 (48%)
(Not answered)	9 (12%)	11 (14.7%)

Transition Policies and Procedures

Results of the parent's perceptions of their experiences regarding the policies and procedures are shown in Tables 19 and 20 for the first and second transitions respectively. Forty-four indicated that the professionals explained the changes as

indicated by their understanding ratings, somewhat (21.3%) or understood well (37.3%) as compared to 12 reports of no (16%) and 8 reports of not well (10.7%) during the first transition. During the second transition, this appeared to improve over time as 45 parents indicated that the professionals explained the changes as indicated by their understanding ratings, somewhat (17.3%) or understood well (42.7%) as compared to 8 reports of no (10.7%) and 9 reports of not well (12%). The majority, 40 parents, reported they were given a list of transition steps (53.3%). However, 28 parents also reported that they were not (37.3%) given a list of steps. This did not improve with the second transition as 38 parents were given a list (50.7%) while 25 were not (33.3%). Most parents, 44 during the first transition and 43 during the second transition reported they met with the new teacher. Conversely, during the first transition reports 11 parents (14.7%) indicated that the parents did not meet with the new teacher during the first transition. Eight parents (10.7%) indicated that they did not meet with the new teacher during the second transition.

Perhaps most significant, is the report that one third of the parents (33.3%) during the first transition and one third of the parents (32%) during the second transition were not given a choice on the type of program their child would attend. The remaining parents either reported involvement in program choice during the first transition (37.3%) or the second transition (38.7%). Reported opportunities to visit to the school improved slightly from the first transition (58.7%) to (64%) during the second transition. However, 15 parents during the first (20%) and 9 parents during the second (12%) transition reported they did not visit the new school. Thirty-four parents (45.3%) reported the transition began six months early during the first transition and 29 (38.7%) during the second

transition. Conversely, 23 parents (30.7%) indicated that the transition did not begin early for the first transition. This did not improve with the second transition as 24 parents (32%) indicated that the transition did not begin six months early.

Issues that did improve were the parents' reports of feeling comfortable with the staff. This increased after each staff change with 48 parents (64%) reported feeling comfortable with the early intervention staff, 50 parents (66.7%) reported feeling comfortable with the preschool teacher, and 55 parents (73.3%) reported feeling comfortable with the kindergarten teacher. Very few parents, 3 (4%) during the first transition and 6 (8%) during the second transition, reported a delay in the move. The majority of participants reported that for both the first 49 (65.3%) and the second 45 (60%) transitions their child did not experience a delay in the move. Again, very few participants 7 (9.3%) during both the first and second transitions reported that their child experienced a lapse in services during the transition. The majority of both the first 48 (64%) and second 46 (61.3%) reported that their child did not experience a lapse in service. Parents reported the number of months the transition services began before their child's move ranged from 1 to 6 months. These results are shown at the bottom of Tables 19 and 20 for both the first and second transitions respectively. The numbers of parents not reporting on each question are shown in the far right column in Tables 19 and 20.

Table 19
Frequency and (Percent) for Policies and Procedures Questions
Early Intervention to Preschool

Question	No	Not well	Somewhat understood	Understood well	Not Answered
1. Professionals explained changes	12 (16.)	8 (10.7)	16 (21.3)	28 (37.3)	11 (14.7)
Question	**1 month**	**2 months**	**3 months**	**4 months**	**6 months**
3-E. Number of months before move (EI to P)		6 (8.)	3 (4.)	2 (2.7)	
Question	**Yes**	**No**			**Not Answered**
2. Given list of steps	40 (53.3)	28 (37.3)			7 (9.3)
3-A. Met with new teachers	44 (58.7)	11 (14.7)			20 (26.7)
3-B. Choice on program type	28 (37.3.)	25 (33.3)			22 (29.3)
3-C. Visit new school	44 (58.7)	15 (20.)			16 (21.3)
3-D. Began six months early	34 (45.3)	23 (30.7)			18 (24)
3-F. Delay in move	3 (4.)	49 (65.3)			23 (30.7.)
3-G. Service lapse	7 (9.3)	48 (64)			20 (26.7.)
5-A. Comfortable with EI staff	48 (64)	11 (14.)			16 (21.3)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

Table 20
Frequency and (Percent) for Policies and Procedures Questions
Preschool to Kindergarten

Question	No	Not well	Somewhat understood	Understood well	Not Answered
1. Professionals explained changes	8 (10.7)	9 (12.)	13 (17.3)	32 (42.7)	13 (17.3)
Question	**1 month**	**2 months**	**3 months**	**4 months**	**6 months**
3-E. Number of months before move (PS to K)	3 (4.)	5 (6.7)	2 (2.7)	2 (2.7)	1 (1.3)
Question	**Yes**	**No**			**Not Answered**
2. Given list of steps	38 (50.7)	25 (33.3)			12 (16)
3-A. Met with new teachers	43 (57.3)	8 (10.7)			24 (32)
3-B. Choice on program type	29 (38.7)	24 (32.)			22 (29.3)
3-C. Visit new school	48 (64)	9 (12.)			18 (24)
3-D. Began six months early	29 (38.7)	24 (32.)			22 (29.3)
3-F. Delay in move	6 (8.)	45 (60)			24 (32)
3-G. Service lapse	7 (9.3)	46 (61.3)			22 (29.3)
5-B. Comfortable with PS teacher	50 (66.7)	12 (16.)			13 (17.3)
5-C. Comfortable with K teacher	55 (73.3)	7 (9.3)			13 (17.3)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3. Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

1. The Sooner Start staff and teachers explained the changes in our child's education program clearly.

	EI to P	P to K
No	12 (16%)	8 (10.7%)
Not well	8 (10.7%)	9 (12%)
Somewhat understood	16 (21.3%)	13 (17.3%)
Understood well	28 (37.3%)	32 (42.7%)
(Not answered)	11 (14.7%)	13 (17.3%)

2. We were given a list of the steps that would happen before and during the move to the new education program.

	EI to P	P to K
Yes	40 (53.3%)	38 (50.7%)
No	28 (37.3%)	25 (33.3%)
(Not answered)	7 (9.3%)	12 (16%)

3. Please circle yes or no if the following steps were included in the list provided to you.

A. A meeting with teachers from the current and new programs to plan your child's move.

	EI to P	P to K
Yes	44 (58.7%)	43 (57.3%)
No	11 (14.7%)	8 (10.7%)
(Not answered)	20 (26.7%)	24 (32%)

B. You were given a choice on the type of programs your child could attend.

	EI to P	P to K
Yes	28 (37.3%)	29 (38.7%)
No	25 (33.3%)	24 (32%)
(Not answered)	22 (29.3%)	22 (29.3%)

C. You were given an opportunity to visit the new school(s).

	EI to P	P to K
Yes	44 (58.7%)	48 (64%)
No	15 (20%)	9 (12%)
(Not answered)	16 (21.3%)	18 (24%)

D. The activities for the move started about six months early.

	EI to P	P to K
Yes	34 (45.3%)	29 (38.7%)
No	23 (30.7%)	24 (32%)
(Not answered)	18 (24%)	22 (29.3%)

E. If no, please tell us how many months before the move they began to prepare you and your child.

	EI to P	P to K
1 month		3 (4%)
2 months	6 (8%)	5 (6.7%)
3 months	3 (4%)	2 (2.7%)
4 months	2 (2.7%)	2 (2.7%)
6 months		1 (1.3%)

F. Did you experience a delay in the move?

	EI to P	P to K
Yes	3 (4%)	6 (8%)
No	49 (65.3%)	45 (60%)
(Not answered)	23 (30.7%)	24 (32%)

G. Did your child go without services for any length of time during the move?

	EI to P	P to K
Yes	7 (9.3%)	7 (9.3%)
No	48 (64%)	46 (61.3%)
(Not answered)	20 (26.7%)	22 (29.3%)

4. Please briefly explain the reasons for the educational setting you chose for your child. (Results reported in section 3).

5. The teachers made you feel comfortable when sharing your concerns and goals for your child.

	EI to P	P to K	K
Yes	48 (64%)	50 (66.7%)	55 (73.3%)
No	11 (14.7%)	12 (16%)	7 (9.3%)
(Not answered)	16 (21.3%)	13 (17.3%)	13 (17.3%)

Parent Involvement

Results of parent involvement are shown in Tables 21 and 22 for the first and second transitions respectively. Parents were asked to further define their levels of involvement by answering questions regarding their perceptions of their participation in meetings and decisions regarding their child. Additionally, the parents were asked to report their opinion on how well the teams helped them with the required paper work during both transitions and how the early intervention team met their individual needs.

The participants were asked to indicate whether they did or did not attend all team meetings, meet with personnel, visit the new school and participate in decisions regarding their child. Regarding the issue of attending all meetings 49 (65.3%) parents reported attended all meetings while 9 (12%) did not during the first transition, while 58 (77.3%) reported they attended all meetings and only 4 (5.3%) reported not attending all meetings during the second transition.

Specific questions and answers regarding the second transition are summarized as follows: 62 (82.7%) met with the current teacher while 11 (14.7%) did not; 54 (72%) met with the new teacher while 19 (25.3%) did not; 60 (80%) met with administrators (e.g., principal or special education director) with 13 (17.3%) reporting that they did not; 47 (62.7%) indicated they visited the new school while 26 (34.7%) did not; 57 (76%) attended the IEP meeting while 16 (21.3%) reported they did not; 48 (64%) reported they were given a choice on the label their child received while 25 (33.3%) indicated that they

were not given a choice; 50 (66.7%) reported a choice of programs and services while 23 (30.7%) were not given any choices; and 42 (56%) were given a choice on the location of the services while 30 parents (40%) were not given a choice of location. This information indicated many parents did not participate in critical, key issues regarding their child, including the IEP, decisions regarding their child's label, decisions regarding the type of services, decisions regarding the location of services and meeting new personnel.

Reports regarding assistance with filling out mandatory paperwork were more favorable during the transitions. Forty-two parents reported either a fair amount (22.7%) or extensive assistance (33.3%) during the first transition, while 19 reported either none (20%) or very little (5.3%). Results were virtually the same during the second transition as 41 reported either a fair amount (24%) or extensive assistance (30.7%), while 19 reported either none (17.3%) or very little (8%). While results should be interpreted with caution, any number of parents reporting none or very little assistance with the mandatory, special service paper work should be seen as a significant issue in need of improvement.

Table 21
Frequency and (Percent) for Parent Involvement Questions
Early Intervention to Preschool

Question	Not at all	Very little	A fair amount	Extensively	Not Answered
3. Paperwork help	15 (20)	4 (5.3)	17 (22.7)	25 (33.3)	14 (18.7)
Question	**Not at all**	**Somewhat**	**Relatively well**	**Very well**	**Not Answered**
4. EI team met families needs	10 (13.3)	8 (10.7)	14 (18.7)	32 (42.7)	11 (14.7)
Question	**Yes**	**No**			**Not Answered**
1. Attended all team meetings	49 (65.3)	9 (12.)			17 (22.7)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

Table 22
Frequency and (Percent) for Parent Involvement Questions
Preschool to Kindergarten

Question	Not at all	Very little	A fair amount	Extensively	Not Answered
3. Paperwork help	13 (17.3)	6 (8.)	18 (24.)	23 (30.7)	15 (20)
Question	**Yes**	**No**			**Not Answered**
1. Attended all team meetings	58 (77.3)	4 (5.3)			13 (17.3)
2-A. Met with current teacher	62 (82.7)	11 (14.7)			2 (2.7)
2-B. Met with new teacher	54 (72)	19 (25.3)			2 (2.7)
2-C. Met with administrators	60 (80)	13 (17.3)			2 (2.7)
2-D. Visited new school	47 (62.7)	26 (34.7)			2 (2.7)
2-E. Attended IEP	57 (76)	16 (21.3)			2 (2.7)
2-F. Choice on label	48 (64)	25 (33.3)			2 (2.7)
2-G. Choice of program and services	50 (66.7)	23 (30.7)			2 (2.7)
2-H. Location decision	42 (56)	30 (40.)			3 (4)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

1. Were you told about and invited to attend all of the team meetings about your child's education program?

	EI to P	P to K
Yes	49 (65.3%)	58 (77.3)
No	9 (12%)	4 (5.3%)
(Not answered)	17 (22.7)	13 (17.3%)

2. Circle the ways you participated in decisions regarding your child's program change.

	Yes	No	Not Answered
A. Meeting with the current teacher.	62 (82.7%)	11 (14.7%)	2 (2.7%)
B. Meeting with the new teacher.	54 (72%)	19 (25.3%)	2 (2.7%)
C. Meeting with the administrator.	60 (80%)	13 (17.3%)	2 (2.7%)
D. Visiting the new school.	47 (62.7%)	26 (34.7%)	2 (2.7%)
E. Attending the IEP meeting.	57 (76%)	16 (21.3%)	2 (2.7%)
F. The decision on what category your child would receive special education services for.	48 (64%)	25 (33.3%)	2 (2.7%)
G. Making a decision on the category of program and services for your child.	50 (66.7%)	23 (30.7%)	2 (2.7%)
H. Making a decision on where your child would receive services.	42 (56%)	30 (40%)	3 (4%)

3. How much help did the professionals from the new program give you to complete the paperwork?

	EI to P	P to K
None	15 (20%)	13 (17.3%)
Very little	4 (5.3%)	6 (8%)
A fair amount	17 (22.7%)	18 (24%)
Extensively	25 (33.3%)	23 (30.7%)
(Not answered)	14 (18.7%)	15 (20%)

4. How do you feel the early intervention team met your family's need during the move?

	EI to P
Not at all	10 (13.3%)
Somewhat	8 (10.7%)
Relatively well	14 (18.7%)
Very well	32 (42.7%)
(Not answered)	11 (14.7%)

Parent Information

Data for parent information is shown in Tables 23 and 24 for the first and second transitions respectively. Parents were asked to indicate how they shared information regarding their child. Questions were designed to elicit responses on the way information was shared as well as the type of information shared. First parents indicated whether or not they shared information through specific methods including phone calls, letters,

newsletters, home visits, and invitation to visit new school. Thirty-seven parents (49.3%) reported that they received phone calls while 26 (34.7%) did not during the first transition. This did not improve during the second transition as 34 (45.3%) reported they did receive a phone call while an equal number of parents, 34 (45.3%), reported they did not. Responses regarding letters home indicated 33 parents (44%) reported they received letters while 30 (40%) did not during the first transition. This improved over time as 48 parents (64%) indicated they received letters while only 20 (26.7%) reported not receiving letters during the second transition. The majority of parents for both the first transition 53 (70.7%) and the second transition 51 (68%) reported they did not receive a newsletter from their child's teacher. Conversely, 10 parents (13.3%) during the first transition and 17 (22.7%) during the second transition reported that they did receive newsletters from their child's teacher. Home visits decreased over time as 20 (26.7%) of parents indicated they received a home visit from the teacher during the first transition, while only 8 (10.7%) reported they received a home visit during the second transition. The data indicated home visits were not completed for 43 (57.3%) during the first transition while this increased to 60 (80%) during the second transition. Conversely data for invitations to visit indicated improvement over time. Initially 26 parents (34.7%) reported that they received an invitation to visit the new school while 37 (49.3%) reported that they did not. During the second transition 38 (50.7%) reported an invitation to visit while 30 (40%) reported that they did not.

Data on the information shared regarding the services available revealed an area of significant weakness according to the parent's report. Additionally, this did not improve during the second transition. Thirty-five parents reported either no (30.7%) they

were not provided with information or the information was provided not well (16%). Eight (10.7%) reported that they understood the information somewhat and 16 (21.3%) indicated they understood well. During the second transition the number of those reporting receiving no information 27 (36%) and the information was not provided "well" 13 (17.3%) increased. Five families reporting that they understood somewhat (6.7%) and 19 reported that they understood well (25.3%). This remained relatively close to the first transition reported numbers.

Data regarding explanations of the disability type were more favorable. During the first transition 48 parents reported that they either understood the explanation somewhat (12%) or the disability explanation was understood well (52%). Few reported no they did not understand (8%) the disability explanation or they did not understand well (4%) during the first transition. Fifty-four reported that either they understood the disability explanation somewhat (12%) or understood the explanation well (60%) during the second transition. Again very few reported either no 5 (6.7%) they did not understand the explanation or did not understand the explanation well 3 (4%).

Finally, the overwhelming majority for both transitions 47 (62.7%) for the first and 52 (69.3%) for the second agreed with their child's label (e.g., mental retardation, autism). However, 7 (9.3%) during the first transition and 10 (13.3%) during the second transition did not agree with their child's label. Tables 23 and 24 include a column of data showing the number of missing responses for each question.

Table 23
Frequency and (Percent) for Parent Information Questions
Early Intervention to Preschool

Question	No	Not well	Somewhat understood	Understood well	Not Answered
2. Information on services available	23 (30.7)	12 (16.)	8 (10.7)	16 (21.3)	16 (21.3)
3. Explained disability type	6 (8.)	3 (4.)	9 (12.)	39 (52)	12 (16.)
Question	**Yes**	**No**			**Not Answered**
1-A. Received phone calls	37 (49.3)	26 (34.7)			12 (16)
1-B. Received letters home	33 (44.)	30 (40)			12 (16)
1-C. Received newsletters	10 (13.3)	53 (70.7)			12 (16)
1-D. Received home visits	20 (26.7)	43 (57.3)			12 (16)
1-E. Received invitation to visit	26 (34.7)	37 (49.3)			12 (16)
4. Agree with child's label	46 (61.3)	7 (9.3)			22 (29.3)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

Table 24
Frequency and (Percent) for Parent Information Questions
Preschool to Kindergarten

Question	No	Not well	Somewhat understood	Understood well	Not Answered
2. Information on services available	27 (36.)	13 (17.3)	5 (6.7)	19 (25.3)	11 (14.7)
3. Explained disability type	5 (6.7)	3 (4.)	9 (12.)	45 (60)	14 (18.7)
Question	**Yes**	**No**			**Not Answered**
1-A. Received phone calls	34 (45.3)	34 (45.3)			7 (9.3)
1-B. Received letters home	48 (64.)	20 (26.7)			7 (9.3)
1-C. Received newsletters	17 (22.7)	51 (68)			7 (9.3)
1-D. Received home visits	8 (10.7)	60 (80.)			7 (9.3)
1-E. Received invitation to visit	38 (50.7)	30 (40)			7 (9.3)
4. Agree with child's label	51 (68.)	10 (13.3)			14 (18.7)

Key:
Yes=1, No=2
No=1, Not well=2, Somewhat understood=3, Understood well=4
Not at all=1, Very little=2, A fair amount=3, Extensively=4
N/A=Not applicable to question

Abbreviations:
LR=Legal Rights
IFSP=Individual Family Service Plan
IEP=Individualized Education Program
EI=Early Intervention
PS=Preschool
K=Kindergarten

1. Please circle the ways that your teachers from the new program shared information with you.

EI to P	Yes	No	Not Answered
Phone calls	37 (49.3%)	26 (34.7%)	12 (16%)
Letters home	33 (44%)	30 (40%)	12 (16%)
Newsletters	10 (13.3%)	53 (70.7%)	12 (16%)
Home visits	20 (26.7%)	43 (57.3%)	12 (16%)
Invitation to visit	26 (34.7%)	37 (49.3%)	12 (16%)
P to K	Yes	No	Not Answered
Phone calls	34 (45.3%)	34 (45.3%)	7 (9.3%)
Letters home	48 (64%)	20 (26.7%)	7 (9.3%)
Newsletters	17 (22.7%)	51 (68%)	7 (9.3%)
Home visits	8 (10.7%)	60 (80%)	7 (9.3%)
Invitation to visit	38 (50.7%)	30 (40%)	7 (9.3%)

2. Were you provided with information on services offered in the new program?

	EI to P	P to K
No	23 (30.7%)	27 (36%)
Not well	12 (16%)	13 (17.3%)
Somewhat understood	8 (10.7%)	5 (6.7%)
Understood well	16 (21.3%)	19 (25.3%)
(Not answered)	16 (21.3%)	11 (14.7%)

3. The teachers explained what category of disability your child was in special education for.

	EI to P	P to K
No	6 (8%)	5 (6.7%)
Not well	3 (4%)	3 (4%)
Somewhat understood	9 (12%)	9 (12%)
Understood well	39 (52%)	45 (60%)
(Not answered)	18 (24%)	13 (17.3%)

4. Did you agree with the special education category your child was put in?

	EI to P	P to K
Yes	47 (62.7%)	52 (69.3%)
No	7 (9.3%)	10 (13.3%)
(Not answered)	21 (28%)	13 (17.3%)

Program Satisfaction

1. Were there things about the move that made you unhappy?
   (Results reported in section 3)

2. What could the teachers or care providers have done to improve your child's move? (Results reported in section 3)

3. What were the best aspects of home based early intervention? (Results reported in section 3)

4. What were the best aspects of the preschool? (Results reported in section 3)

5. What were the best aspects of the kindergarten program? (Results reported in section 3)

III. Open Ended Questions

The following is a summary of the qualitative codes identifying topics and patterns from the parents' responses. Each response was coded using a number system to identify repeated topics and identify patterns among the responses.

Policies and Procedures

Parents were asked to clarify the following questions regarding issues in the policies and procedures.

1. Did your child experience a delay in the move? Briefly explain.

2. Did your child go without services for any length of time? Briefly explain.

3. Briefly explain the reasons for the educational setting you chose for your child.

Results of parent responses to why their child experienced a delay are shown in Table 25. In regard to explanations of why their child experienced a delay, the most common response was that the family was engaged in a dispute or disagreement with the school. Additionally, one family stated that in spite of her enrolling the child, the school did not know her child was coming. Conversely, some reasons involved issues out of the school's control such as the family moving or the child was in the hospital.

Table 25 Delay in move

Parent Response	Either Transition
1. Family moved.	1
2. Family in dispute with the school.	4
3. School not prepared for child.	1
4. Parent chose not to send child to school.	1
5. Child was in the hospital.	1
6. Early intervention changed from school to Sooner Start.	1

Results of parents' response to why their child experienced a lapse in service are shown in Table 26. Very few parents reported that their child went without services for any length of time. The reasons reported were that the school program closed and the school delayed the child's entrance into the program. Both of these were issues directly under the school's control.

Table 26 Child went without services

Parent Response	Either Transition
1. Program closed.	1
2. School delayed child's entrance into program.	1

Results of parent's responses to why the chose an educational setting are shown in Table 27. Parent's responses to the reason they chose an educational setting were clear, concise and did not change from the first transition to the second. Overwhelmingly, more parents chose the program based on their perception that it was the best program available to meet the needs of their child. Additional responses of interest were location and inclusion with typical peers. A few parents chose the setting based on the availability of a specific therapy or program (e.g., autism) for their child. Nine parents reported in the first transition, that they were not given a choice or that the school made the choice for them. Six indicated that this was also true during the second transition. As previously stated, this violated the policy mandated in P. L. 99-457.

Table 27 Choice for educational setting

Parent Response	EI to Preschool	Preschool to K
1. Distance/Location	5	5
2. Inclusion	7	7
3. No choice offered	6	6
4. Program chosen by school	3	1
5. Best program available	14	13
6. Program designed for specific disability	2	1
7. Specific therapy	0	2
8. Teacher/parent communication	0	1

Program Satisfaction

Parent Satisfaction was reported through a series of qualitative questions. The respondents answered open-ended questions allowing them to elaborate as needed to clarify their answers.

1. Were there things about the move that made you unhappy? Please describe.
2. What were the things about the move that made you happy? Briefly describe.
3. What could the teachers or care providers have done to improve the move?
4. What were the best aspects of Early Intervention?
5. What were the best aspects of the preschool?
6. What were the best aspects of Kindergarten?

Parents' responses analyzed through tabulation of the frequency of responses. In general, the two most frequently mentioned issues in the qualitative response section were inclusion and the best program available.

Responses varied widely regarding the parents' statements about things that made them unhappy. Results are shown in Table 28. Very few issues were stated by more than one parent. Those included the school was less flexible than early intervention, lack of communication with personnel, disagreements with the school, class size, disagreements over teaching skills, and professional attitudes. One parent indicated that her child had a

hearing impairment and the school did not allow American Sign Language services for her child.

Table 28 Things that made parents unhappy

Parent Response	EI to Preschool	Preschool to K
1. Parents did not like school personnel.	1	0
2. Parents did not like school policies.	1	1
3. School was less flexible than early intervention.	3	0
4. Too much focus on sensory integration.	1	0
5. Not enough focus on 1:1 teaching.	1	0
6. Child did not make improvements.	1	1
7. Lack of specific therapy.	1	1
8. Lack of specific therapy goals.	1	0
9. Lack of communication with school personnel.	2	0
10. Pushed child into program too fast.	1	0
11. Teacher lacked knowledge of child's specific disability	1	1
12. All problems treated as discipline.	0	1
13. Program/transition did not meet the child's needs	1	0
14. American Sign Language was not allowed.	1	0
15. Disagreement with school.	0	2
16. Class size.	0	2
17. Length of service.	0	1
18. Environmental disruptions.	0	1
19. Disagreement over teaching skills.	0	3
20. Professional attitude.	0	2
21. Child pulled from class.	0	1

Responses to things that made parents happy were more concise. These results are shown in Table 29. Most parents reported that their children were included in school with children who did not have disabilities. The next most frequently mentioned issue was that they believed their child was in the best program available and the services were good. Other less frequently mentioned issues were that the child liked the program, information

was shared with the parents, teachers communicated with the parents, and the parents like the staff members.

Table 29 Things that made parents happy

Parent Response	EI to Preschool	Preschool to K
1. Distance/Location.	0	1
2. Inclusion.	4	7
3. Parents liked staff.	2	2
4. Supportive staff.	1	1
5. Best program/good services.	3	4
6. Program designed for specific disability.	2	1
7. Specific therapy	1	0
8. Teacher/parent communication.	3	2
9. Information shared with parent.	2	0
10. Child liked the program.	3	1
11. Child made improvements.	1	0

Parents were then asked to identify things that could have been done to improve the transition. These responses varied widely and are shown in Table 30. Issues suggested more than one time were, providing teacher training on specific disabilities, increase communication between parents and teachers, more individual attention to their child, explain the programs available, and explain the services available. Issues reported individually included: (a) allowing transition visits before the move, (b) adding options for inclusion, (c) eliminate fighting with school, (d) more concern from personnel, (e) ensure all therapy available, (f) share more information with the family, (g) increase the length of services, (h) use specific programs such as Applied Behavior Analysis, (i) both team members attend the IEP meeting, provide accurate assessment, and (j) transfer information efficiently.

Table 30 Things to improve the move

Parent Response	EI to Preschool	Preschool to K
1. Allow transition visits before moving child.	0	1
2. Add options for inclusion.	1	0
3. Eliminate fighting with parents.	0	1
4. Personnel show more concern.	1	0
5. Change the system.	1	0
6. Ensure teacher training on child's specific disability.	0	2
7. Ensure all therapy available.	1	0
8. Increase teacher/parent communication.	3	3
9. More information shared with family.	0	1
10. Increase length of service time.	1	0
11. More individual attention.	0	2
12. Use Applied Behavior Analysis.	1	1
13. Explain programs.	3	0
14. Explain services.	2	0
15. Both teams attend IEP.	0	1
16. Provide accurate assessment.	0	1
17. Transfer information efficiently.	0	1

Parents were then asked to indicate the best aspects of the programs. These were broken down further into early intervention, preschool and kindergarten. First, responses to the early intervention program, shown in Table 31, revealed that most parents were happy that the services were provided in their home. Many parents also were pleased that programs involved the parents with therapy, they were provided assistance with referrals, and the staff was supported. Other less frequently mentioned items were parents liked the staff, the program was individualized, communication between the parent and staff, information shared with parents, the child liked the program and the child made improvements.

Second, the best aspect of the preschool reported overwhelmingly by the parents was the inclusion of their child in school with other children who did not have disabilities. Three other frequently mentioned items were the parents liked the staff, the

staff cared about the child, and the communication between teachers and parents. Issues mentioned less frequently included: (a) professional knowledge, (b) length of service, (c) specific therapy availability, (d) information was shared with parents, (e) child and parent liked the routine, (f) the child was taught independence skills, and (g) the individualized program.

Third, most parents reported that the best aspect of the kindergarten was inclusion of their child in programs that had children without disabilities. Other important issues that made them happy were professional knowledge, the length of service, communication between parents and teachers, and the individualized program. Issues reported less frequently were information shared with the parent, the child and parent liked the structure, class size, and parent involvement.

Table 31 Best aspects of Early Intervention

Parent Response	Early Intervention	Preschool	Kindergarten
1. Location/home setting	9		
2. Parent involvement with therapy/program	4		2
3. Parents liked staff	2	7	3
4. Supportive staff	5		
5. Individualized program.	3	1	3
6. Assistance with referrals/information	5		
7. Specific therapy	0	3	
8. Staff/parent communication	1	5	3
9. Information shared with parent	3	3	1
10. Child/parents liked the program	2		
11. Child made improvements	2		
12. Inclusion		14	9
13. Staff cared about child		6	3
14. Staff/professional knowledge about child		4	4
15. Length of service		1	3
16. Child liked the routine		2	2
17. Taught child independent skills		2	
18. Class size			1

Approximately one third of the parents chose to share information by writing comments by a particular question, at the end of the survey or with an attachment. Those

were summarized and synthesized as other parent comments. Results of the other parent comments are shown in Table 32. The most frequent comment regarded the lack of information. Other issues mentioned several times by parents included: (a) parents wanted better advocates for their child (b) parents disagreed with the child's label (c) parents disagreed with the school regarding the child's program, and (d) unprofessional behavior. Several items mentioned one time included: (a) barriers to services, (b) no choices offered, (c) lack of service explanation, (d) lack of help with paperwork, (e) more than one IEP per year, and (f) oversized classes.

Table 32 Other comments

Parent Response	Both Transitions
1. Barriers to services (e.g., income, location)	1
2. Parents wanted better advocates for child	3
3. No choice offered	1
4. Disagreed with child's label	3
5. Disagreed with school regarding child's program	3
6. Unprofessional behavior	3
7. Lack of service explanation	1
8. Lack of information	5
9. Lack of help with paperwork	1
10. More than one IEP per year	1
11. Oversized classes	1

Chapter Five

Discussion

The research questions guiding this study were:

1). Were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age three, primarily ensuring preschool services to the extent that those services were offered and appropriate?

2). Were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age five, primarily ensuring elementary school services to the extent that those services were offered and appropriate?

3). Did the steps taken include: (a) parental discussions with and training regarding placement options, (b) procedures to prepare the child for service delivery changes, (c) steps to help the child adjust to the new environment, (d) parental knowledge of the child's skills required in the new environment, and (e) parental choice including observations of various preschool/school options?

4). Did the transition process include: (a) the transmission of information about the child to the new setting personnel, (b) evaluation and assessment information to both parents and the receiving professionals, and (c) a plan beginning at least 90 days before the transition?

5). Were there any differences in the first transition and the second transition regarding: (a) parent knowledge of legal rights, (b) the transition process, (c) amount of information provided to parents, (d) assistance provided to parents, and (e) parental choice and satisfaction?

To address those questions, the research relied on self-reported data in the form of a survey that included questions with both scaled responses and open-ended qualitative responses allowing the respondents to expand on their satisfaction. The sample population for this survey was derived from the parents of young children, ages 4 through 15 with disabilities who received services in both early intervention and preschool in Oklahoma.

First the discussion of the results focuses on the demographic description of the participants and their perceptions of their experiences during both early childhood special services transitions. The transitions included both the first from early intervention to preschool and the second from preschool to kindergarten. Questions for the survey were framed by general guidelines for early childhood special service transition federal mandates outlined in P. L. 99-457 Part H [(Sec. 303.344)]; P. L. 102-119 [Part H Sec. 678 (a) (8)]; and P. L. 102-119 [Part B Sec. 613 9a) 15]. Next, conclusions were drawn from this discussion addressing early childhood special services, specifically (a) the transitions from early intervention to preschool and the transition from preschool to kindergarten (b) the role of the parents in both these transitions and (c) present policy regarding these transitions. Finally, implications for future research are presented again, focusing on aspects of the transitions, specifically the roles of the parents in the transitions and present policy regarding transition.

Participants' Demographic Description

Although not directly addressing the research questions, information on the participants' demographic qualities was gathered to provide a description of the participants and a context for their responses. Issues regarding the demographic responses

did not appear to influence the results. First, the majority of children were reported as males. While this is not a normal population distribution, it is typical of a population of individuals with disabilities or children receiving services in special education.

Second, several issues regarding the diagnosis and label categories are important. Parents reported a wide variety of diagnoses for their child's condition or disability. Among those, six reported a diagnosis of autism for their child. However, in the area of the child's special education label for school, parents chose from the mandated list of 14 categories used by the Department of Education. Within this category, 14 parents reported that their child received services under this label. While other disability categories or diagnosis fell under general labels such as mental retardation (e.g., Down's syndrome, hydrocephalus, Dandy Walker syndrome, cerebral palsy) or multiple disabilities (e.g., dual diagnosis- cerebral palsy and hydrocephalus), autism does not. Autism is one individual category of the 14 under the Department of Education, special education labels. Additionally, autism is an individually recognized diagnosis in the Diagnostic and Statistical Manual- 4th edition. Another notable result of the diagnosis category was that 14 parents reported their child had a dual diagnosis.

Third, three categories were added to elicit information regarding the families' current status regarding supplementary aids (e.g., supplemental security income, waivered services) and social services (e.g., free lunch, DHS daycare). The majority of parents reported that their child qualified for the free lunch program through the public schools. As this is determined by the family size and income, this indicated that this population fell into the free lunch income bracket. However, the majority of families also reported that their child had medical coverage either through their employment or

through Medicaid. This population characteristic was noted as normal for a population exclusively of families with a child with a disability. Additionally, a sample of this nature would be expected to have more families who received supplemental services for individuals with disabilities. The opposite was indicated in this survey as 40 families reported that they did not receive supplemental aids or services. However, many supplemental aids are provided through waivered services. Presently in Oklahoma children are eligible to apply for services at age three however, these services require a wait of undetermined length. Therefore, many of these young children may indeed be on the "waiting list" for waivered services but are not yet receiving funds.

Perceptions of Parent's Experiences in Early Childhood Special Service Transitions

To examine participants' perceptions, participants were asked to respond to the survey instrument regarding their transition experiences and perceptions of their roles during both early childhood special service transitions first from early intervention to preschool and subsequently from preschool to kindergarten. Findings are described in general for each area including legal rights, policies and procedures, parent involvement, parent information and parent satisfaction. These issues are then discussed again in general regarding how these responses answered the research questions.

Legal Rights

The majority of parents understood their legal rights concerning the transition as explained to them by their child's teacher. Additionally, the parents understood the difference between the IFSP and the IEP, and that the IEP would be used for planning and implementing their child's school program. Explanations of legal rights and understanding of the IEP improved over time as more parents reported that they

understood these well during the second transition. More parents indicated that the teachers answered questions about their legal rights during the second transition. However, many participants indicated that the teachers explained these legal rights either not at all or very little. This did not improve during the second transition.

Policies and Procedures

The majority of parents indicated that the professionals explained the changes well regarding their child's education for both transitions. The participants indicated whether or not they participated in specific issues were addressed in activities during both transitions. The majority of parents indicated that they (a) met with the new teachers during both transitions, (b) visited the new school during both transitions, (c) did not experience a delay in the transition, (d) did not experience a lapse of services, and (e) they felt comfortable with the professionals working with their child, including early intervention, preschool, and kindergarten teachers.

However, two issues in the policies and procedures section raised concern. More parents reported that they were given a list of steps for both the first and second transitions, but many also reported that they were not given this list. This did not improve during the second transition. Federal law mandated procedures to prepare the child for the changes in service delivery including steps to help the child adjust to and function in a new setting [P. L. 99-457 Part H (Sec. 303.344)]. Additionally, 24 parents reported they were not given a choice on the type of program their child could attend during the first transition and 23 parents reported they were not given choices during the second transition. Again [P. L. 99-457 Part H (Sec. 303.344)] mandated that the steps of the

transition include discussions with, and training of, parents regarding future placement relating to their child's transition. These results indicated problems in service delivery.

Previous research, Hamblin, Wilson and Thurman (1990) reported that 54% of parents were involved in program planning, 37% were involved in selecting a classroom and 68% visited the potential classroom. Schmutz (1995) reported 20 parents were not given opportunities to view future placements. McDonald, Kysela, Seibert, McDonald and Chambers (1989) reported that 25 parents identified descriptions of options and tours of operations as a priority and 64% indicated that they wanted at least six months prior planning.

Although P. L. 102-119 specifically mandates a 90-day lead-time for the first transition, Fowler, Chandler, Johnson, and Stella (1988); Hanline (1988); Kilgo, Richard, and Noonan (1989); McDonald, Kysela, Siebert, McDonald, and Chambers (1989); Schmutz (1995) recommend that transition services start six months before the move. In this survey slightly more parents reported that transition services began six months prior to the move, than those that said this did not occur. This did not change over time from the first to the second transition.

Parent Involvement

In this section parents reported their perceptions regarding their involvement in making choices about the move to the new program. More parents reported that they (a) attended all team meetings regarding their child's educational program, (b) met with the current teacher, (c) met with the new teacher, (d) met with either the principal or special education director, (e) visited the new school, (f) attended the IEP meeting, (g) participated in decisions regarding their child's label, (h) participated in decisions on the

type of program and services for their child, (i) received help to complete the paper work, and (j) that the EI team met the parents during the transition move. These results indicated that the parents were involved in a variety of activities to help facilitate their involvement.

The issue regarding parent involvement in decision making revealed three areas of concern. First, only slightly more parents indicated that they participated in making a decision regarding where their child received services. Second, and a number of parents, 25, did not participate in the decision regarding their child's label. Third, 23 parents did not participate in the decision regarding the type of program and services for their child. As previously stated P. L. 99-457 mandated that the transition steps required discussions with the parents regarding future placement and other matters relating to the child's transition. Clearly, the type of programs, services available, location of services and the child's label were issues regarding future placement. P. L. 99-457 requires parents have an active role in decisions governing their child's disability category and school placement.

Previous research by Hanline (1988) identified separation and reduction of parent involvement as an important concern. Schmutz (1995) reported that all 20 participants received no assistance from the school on paperwork and all reported an absence of meetings between the sending and receiving teams.

Parent Information

A majority of parents were not provided with information regarding services offered in the new programs (e.g., therapy, transportation, and child teacher ratio). This did not improve over time, as more parents reported either "no" or "not well" in responses

regarding the second transition. P. L. 99-457 Part H (sec. 303.344) clearly mandated that the IFSP must include steps taken to support the transition of the child upon reaching age three, to preschool and other services that may be available, if appropriate. Additionally, P. L. 102-119 [Part H Sec. 678 (a) (8)], mandated that the lead agency, with parental approval, notify the local education agency to convene a conference including representatives of both agencies 90 days prior to the third birthday. The purpose of the conference is to review the child's program options from the third birthday through the rest of the year and establish a transition plan. The participants' responses clearly indicated that the majority of parents were not provided with information as mandated by law. Additionally, previous literature (Fowler, 1988; Fowler, Chandler, Johnson & Stella 1988; Hanline 1988; Hanline & Knowlton 1988; Kilgo, Richard & Noonan 1989; Wheeler, Reetz, & Wheeler 1993) clearly supported providing the parents with information to facilitate informed decision-making regarding their child's services.

A majority of parents reported that they understood the teacher's explanation of the type of disability that made their child eligible for services in special education. Additionally, the majority of parents agreed with the special education label (e.g., mental retardation, autism, and multiple disability) their child was given.

Previous research by Hanline (1988) reported that parents' priority concerns were lack of information about services that were offered, anxiety about working with an unfamiliar program and uncertainty regarding appropriate services for their child.

Parent Satisfaction

Parent satisfaction was reported through a series of open-ended questions. The respondents answered these questions allowing them to elaborate as needed to clarify

their answers. Parents' responses analyzed through frequency counts, were summarized based on patterns in the answers. The most frequently mentioned issue in the open-ended response section was inclusion. Parents reported several other important issues when answering the parent satisfaction questions. Items mentioned more than once were (a) no choices offered, (b) best program available for their child, (c) communication, (d) staff support, (e) staff knowledge, and (f) information. Additionally, some of these items were mentioned in more than one concept. For example staff support was mentioned in terms of both good and poor support to the parents. Communication was also mentioned in terms of good communication and a lack of communication. Primarily staff knowledge was mentioned in terms of a lack of knowledge regarding a particular disability or treatment. A few parents mentioned that the staff understanding their child was a source of support. Reports regarding information were primarily mentioned as concerns (e.g., not provided, incomplete). However, parents occasionally noted that information sharing was a positive aspect of a program.

The items identified here provide further support for previously noted best practice models (Diamond, Spiegel-McGill & Hanrahan, 1988; Hanline & Knowlton, 1988; Kilgo, Richard & Noonan, 1989; Wheeler, Reetz & Wheeler, 1993) for example: (a) the option of inclusion, (b) individualized programs, (c) staff support, and (d) referral information. Items clearly in need of improvement include: (a) lack of choices regarding programs, (b) no choices offered regarding programs or services, (c) information sharing to support informed decisions, and (d) delay in services due to dispute with school.

Specific Answers to Research Questions

Answers to the stated research questions are interwoven into the results, discussion and conclusion of this chapter. This section clearly delineates specific answers to each question.

1). First, were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age three, primarily ensuring preschool services to the extent that those services were offered and appropriate? The results of this study indicate that steps were taken by age three, but the steps did not ensure parental involvement and knowledge during the transition. Conversely, this was the area with the most concerns regarding policy violations.

2). Second, were steps taken to ensure parental involvement and knowledge during the transition of their child upon reaching age five, primarily ensuring elementary school services to the extent that those services were offered and appropriate? Again, the results of this study indicate that steps were taken at age five, but the steps did not ensure parental involvement and knowledge during the transition. This did not improve over time. Conversely, this was the area with the most concerns regarding policy violations.

3). Third, did the steps taken include: (a) parental discussions with and training regarding placement options, (b) procedures to prepare the child for service delivery changes, (c) steps to help the child adjust to the new environment, (d) parental knowledge of the child's skills required in the new environment, and (e) parental choice including observations of various preschool/school options? The results of this study indicate that steps were taken, but parents were not always included in discussions with and training regarding placement options. Parents were not always given a list of steps regarding

service delivery changes or information regarding the skills required in the next environment. Additionally, parents were not always provided with a choice of options nor were they always allowed to observe or visit a new setting.

4). Fourth, did the transition process include: (a) the transmission of information about the child to the new setting personnel, (b) evaluation and assessment information to both parents and the receiving professionals, and (c) a plan beginning at least 90 days before the transition? Results of this study indicated that parents were primarily satisfied with the transmission of information concerning the child. Results indicated that most parents reported they were provided opportunities to share this information through meetings with new teachers, meetings with administrators and through visiting the new setting. Most parents also reported they understood the IEP process, understood and agreed with the category their child was placed in. Additionally, results indicated that the majority of parents reported that a plan began at least 90 days before their child's transition.

5). Fifth, were there any differences in the first transition and the second transition regarding: (a) parent knowledge of legal rights, (b) the transition process, (c) amount of information provided to parents, (d) assistance provided to parents, and (e) parental choice and satisfaction? Results of the differences between transitions were reported in each section on an individual question basis. In general, the explanation of legal rights remained the same from the first to the second transition while the help with answering questions improved during the second transition. More parents indicated that they understood the IEP well during the second transition.

Examination of the policies and procedures questions indicated improvement in the second transition regarding explanation of the child's education program, choice on the type of program, and opportunities to visit the new school. Results also indicated that parents' comfort with sharing goals and concerns increased at each step of program transition (e.g., early intervention, preschool, kindergarten). Policy and procedural issues that worsened were the frequency of meetings with the current and new teachers, activities starting six months prior and providing a list of steps for the transition.

Two comparisons were made regarding parent involvement. First, invitations and attendance regarding all team meetings improved by the second transition. Second, parents' reports indicated that they did not receive more help with completing paper work during the second transition.

The area of parent information identified some areas of concern regarding improvement over time. First, regarding the ways that teachers shared information, phone calls, and home visits worsened over time, while letters home newsletters and invitations to visit improved during the second transition. Second, the parents' understanding of the disability category explanation and category agreement by parents both improved during the second transition. However, information on services offered in new programs was worse during the second transition and remained heavily skewed towards the "no" and "not well" answers.

Parents' responses to the satisfaction questions identified a number of issues that changed over time. Issues that improved during the second move were communication and inclusion. Areas that indicated a decline in satisfaction were information shared with

parents, the distance their child traveled to receive services, parent involvement and location of the services.

Limitations

The primary limitation of this study was the relatively small sample size. Substantial efforts were made to reach the estimated target sample of 7,047. However, a much smaller number of packets, 1,183, were distributed with a return rate of 103. Twenty-eight of these were disqualified for the factors previously explained. The sample size of this study was affected by several factors. First, data collection was difficult, as many small school districts did not respond to the letter requesting assistance. The State Department of Education deferred all decisions regarding assistance with research to each individual district. Additionally, several school districts required additional approval from their own internal research review boards.

Second, assistance from parent support agencies was either extremely slow (e.g., Oklahoma Parent Center, local education agencies), very limited (e.g., Oklahoma Parent Center, Developmental Disabilities Council), or non-existent (e.g., Interagency Coordinating Council). Parents Reaching Out in Oklahoma had the most comprehensive database of families of children with disabilities at the onset of the study. Shortly after initiation of data collection, PRO-Oklahoma closed after the loss of federal funding support. Subsequently they reorganized, reopened as Oklahoma Parent Center, and started a new database. Legal issues impaired the use of the former comprehensive database. Therefore, data sources obtained were not optimal.

Third, the lack of an organized, state funded parent advocacy organization or centralized parent support network may have affected the data collection process. The

Center for Learning and Leadership assisted with location of parent support and parent advocacy organizations. However, Oklahoma does not have an organized comprehensive parent advocacy organization. This hindered comprehensive data collection and appears to affect the resulting lack of parent training and support opportunities.

Results were difficult to interpret due to the large number of questions without a response. The lack of responses was difficult to analyze as the non-responses were randomly distributed across the questions and sections. Results indicated that two questions appeared to be misunderstood by most of the participants. These included the type of therapy their child received and the educational setting their child was placed in.

Additionally, information regarding the number of non-English literate parents was unavailable to the researcher. Therefore, this sample excluded any parents requiring assistance with interpretation to their native language.

Conclusions

Previous research identified a number of issues supported in this study. Hamblin, Wilson and Thurman (1990) reported that slightly more than half of parents interviewed were involved in program planning, only one third were involved in selecting a classroom, however the majority, 68% visited the potential classroom. In this study, parents met with the new teachers during the (58.7%) first and (57.3%) second transitions, most parents were also involved in selecting a classroom during the first (37.3%) and second (38.7%) transitions and the majority (62.7%) also visited the new classroom.

Schmutz (1995) reported all 20 participants were not given opportunities to view future placements, received no assistance from the school on paperwork and reported an

absence of meetings between the sending and receiving teams. In this study the majority (62.7%) were given the opportunity to visit the new classroom, many (33.3%) first and (30.7%) second transitions received extensive help with the paper work, and the majority met with the current (82.7%) and new (72%) teachers.

McDonald, Kysela, Seibert, McDonald and Chambers (1989) identified parental priorities as description of options and tours of operations. The majority of parents also indicated that they wanted at least six months prior planning. Hanline (1988) identified important concerns including separation and reduction of parent involvement, lack of information about services offered, anxiety about working about an unfamiliar program, and uncertainty regarding appropriate services. This study identified inclusion, best program availability, location, staff attitudes and communication as important issues.

This study indicated problems exist with the structure and implementation of transitions from early intervention to preschool and from preschool to kindergarten. Improving transition issues that violate federal law would require generating and implementing a system of check lists and timelines for both parents and service providers. It is imperative to involve parents in the development and implementation of a comprehensive guide to transition. Additionally, it is equally imperative to examine service models and theoretical foundations regarding the design. Service models offer examples of working models from other states, while theoretical foundations offer information on family structure as well as relationship structures (Bronfenbrenner, 1998).

First and foremost, it is not acceptable for any system to make a choice for a parent or not allow involvement in decision making regarding the child's placement, type of services and location of services. It is also unacceptable to deny parents the right to

visit a new setting before making a choice or moving their child. Additionally, parents must be provided with information regarding all available special education services, programs, and locations in order to make informed decisions regarding their child. In this study parent's responses clearly identified these areas as violations of specific issues mandated in federal law P. L. 99-457 Part H (Sec. 303.344) and P. L. 102-119 [Part B Sec. 613 (a) (15)] and [Part H Sec. 678 (a) (8)]. Second, many parents were not provided with a list of steps for both the transition from early intervention to preschool and the transition from preschool to kindergarten. Again, in order to ensure provisions of federal law, all parents should be provided with a checklist. Parents should have the opportunity to evaluate the services provided to them and the effectiveness of those services. Finally, all parents should know and understand that an IEP is used in services for school age children, rather than the IFSP that is used in early intervention.

Conversely, results of the parents responses indicated that many things were done to their satisfaction including: (a) explaining their legal rights, (b) answering questions regarding legal rights and concerns for their child, (c) understanding what an IEP was and how it worked, (d) changes in the education programs, (e) explaining the type of disability, and (f) agreement of their child's label required for services.

From a theoretical view this study indicates that problems occurred in the communication and or interactions in the *mesosystems*, which were the interactions between settings that a child participates in. However, improving the problems in these systems requires systemic changes at the *macrosystems* level (e.g., state and federal legislation, state advocacy organizations). This in turn affects the *exosystems* level (e.g., IEP meetings, school district policy). Presently, Oklahoma does not have an official

parent advocacy organization, although numerous support groups exist (e.g., Oklahoma Parent Center, Autism Society, Center for Learning and Leadership).

Provisions of P. L. 99-457 acknowledged the family as the strongest and most stable proximal process in the development of young children (Bronfenbrenner & Morris, 1998). This supports the interaction of parents at every level of their child's development, including all major transitions.

Several parents contacted the researcher by phone to share information about experiences, provided that their statements would not be shared individually with their child's school. All of these phone calls consisted of a parent wanting to express their concerns in a confidential manner that in turn may assist other parents.

Implications for Future Research

Based on the results of this study, recommendations for future research addresses the inclusion of parents in decision making at every level including *microsystems*, *mesosystems, exosystems* and *macrosystems.* Professionals involved in early childhood transitions are environmental systems that are sources of external influence on development. As this study was limited by data sources, future research should focus on obtaining a larger sample. A larger sample would provide the data necessary to examine early childhood special service transitions using the components of Bronfenbrenner's (1986) model to differentiate at successive levels with respect to explicitness and complexity. The first level, the social address model would compare the developmental outcomes of the children with special needs "living in contrasted environments as defined by geography" (Bronfenbrenner, 1986, pp. 724). This would allow a statewide comparison of children based on their developmental expectations for kindergarten. At

the second level, explicit paradigms facilitate assessing the external impact of the environment. The second level, *process-context,* assesses the impact of the external environment on a particular process. Regarding the proposed future research, the external influence of early childhood special service transitions should include (a) local education agency teachers and administrators, (b) early intervention professionals, and (c) state and federal policy makers. Future research should examine these external influences at this level which, assumes the external influences are the same regardless of the personal characteristics of the family and child. The third level, *person-process-context model,* should examine the dimension of the parents' and child's characteristics in determining the positive or negative impact of the external environment of the family process and developmental outcomes of the child. These three levels examine the external influences from a multi-dimensional aspect that may allow researchers to make conclusions at all levels. Diamond, Spiegel-McGill, and Hanrahan's (1998) model for this research design was previously discussed.

Additionally, future research should involve components of the most recent bioecological model (Bronfenbrenner & Morris, 1998). Primarily the process occupies the central position rather than the environment. The proximal process is an enduring, complex, reciprocal interaction. Regarding early childhood special services, examples of important proximal processes are daily exchanges of information between professionals and parents and teacher child activities. The form, power, content and direction of these proximal processes vary systematically as a joint function of the developing child, their environment, the nature of their developmental outcomes and the changes occurring over time. Thus these proximal processes are a critical component in the transitions of the

child, as these processes have the potential to change the transition process. Additionally, these processes have the potential to influence future environments, particularly regarding the parent involvement and development of the child. One example of the time component in early childhood special service transitions, is the how feelings and perceptions of both transitions may impact satisfaction with school programs. Future research on the parent's feelings and perceptions of the transition may provide information on how these issues impacted the report regarding subsequent satisfaction with the school program. Furthermore, an implementation study is needed on the duration and intensity of early intervention services and the parent's perception of their subsequent affects on future environments.

Future research based on theoretical models would allow parents to evaluate components of their child's education, at all levels of involvement. Most importantly, research should focus on the parent's ability to evaluate a program, report problems and make contributions in policy making without fear of retributions to either themselves or their child. This could be accomplished through an observational, qualitative study of families identified in early intervention. Research should include interviews, review of records, and attendance at transition meetings.

Additional research is needed to obtain the local education agency teachers and early intervention provider's perceptions of the transition process. This should then be triangulated with the results of this study. Triangulation may provide insight into why the results of this study indicated that communication with teachers was reported to be better than communication with early intervention providers.

Finally, rights governed by state and federal law include protection of the parents and child's right to privacy. This in turn makes involvement of parents in components of research and development extremely difficult to accomplish. The results of this study clearly support the need for a more centralized, proactive parent organization, support system, and training. Additionally, Oklahoma presently funds and operates a data base system for referrals. However, this study supports the need for a centralized data base for referral contact information, contact information for specific concerns, updated policy and procedural information, newsletters, a web site, access to a clearing house of information and toll free numbers for parents. Presently, one parent support group funds and maintains a web site for parents, however it is not centralized. A centralized database and formal newsletter would support comprehensive dissemination of a needs assessment survey for parents and provide a comprehensive list for future researchers.

References

American Heritage dictionary (based on second college ed.). (1983). New York, NY: Dell Publishing Co.

American Psychiatric Association. (1994) Diagnostic and statistical manual of mental disorders (4th ed.). Washington, DC: Author

Bank, S., and Kahn, M. (1975). Sisterhood-brotherhood is powerful: Sibling sub-systems and family therapy. Family Process, 14, (3), 311-339.

Becvar, R., and Becvar, D. (1982). Systems theory and family therapy. New York: University Press of America.

Broderick, C., and Smith, J. (1979). The general systems approach to the family. In Burr, W., Hill, R., Nye, F, Reiss, I. (Eds.), Contemporary theories about the family: General theories/theoretical orientations Volume II (112-129). New York: The Free Press.

Bronfenbrenner, U. (1979). The Ecology of human development: Experiments by nature and design. Cambridge: Harvard University Press.

Bronfenbrenner, U. (1986). Ecology of the family as a context for human development: Research perspectives. Developmental Psychology, 22, (6), 723-742.

Bronfenbrenner, U., and Morris, P. (1998). The ecology of developmental processes. In W. Damon and R. Lerner (Eds.), Handbook of child psychology (5th edition pp. 993-1027). New York: John Wiley and Sons.

Bruder, M., and Chandler, L. (1993). Transition. In Division of early childhood recommended practices: Indicators of quality in programs for infants and young children

with special needs and their families. Task force on recommended practices; Division for Early Childhood; Council for Exceptional Children.

Carter, E., and McGoldrick, M. (1980). The family life cycle: A framework for family therapy. New York: Gardner Press.

Chandler, L. (1992). Promoting young children's social competence as a strategy for transition to mainstreamed kindergarten program. In S.L. Odom, S. R. McConnell and M.A. McEvoy (Eds.) Social competence of young children with disabilities (pp. 245-276). Baltimore, MD: Brookes.

Conn-Powers, M., and Ross-Allen, J. (1990). Transition of young children into the elementary education mainstream. Topics in Early Childhood Special Education, 9. (4), 91-105.

Diamond, K., Spiegel-McGill, P., and Hanrahan, P. (1988). Planning for school transition: An ecological-developmental approach. Journal of the Division for Early Childhood, 12, (3), 245-252.

Duvall, E. (1977). Marriage and family development (5th edition). Philadelphia: Lippincott.

Education for All Handicapped Children Act of 1975, 20 U.S.C. 1401 *et seq*

Education of the Handicapped Amendments of 1986, 20 U.S.C. 1401 *et seq*.

Fowler, S. (1982). Transition from preschool to kindergarten for children with special needs. In K. A. Allen and E. Goetz (Eds.) Early childhood education: Special problems, special solutions (309-329). Rockville, MD: Aspen.

Fowler, S. (1988). Transition planning. Teaching Exceptional Children, 20, (4), 62-63.

Fowler, S., Chandler, L., Johnson, T., and Stella, M.E. (1988). Individualizing family involvement in school transitions: Gathering information and choosing the next program. Journal of the Division for Early Childhood, 12, (3), 208-216.

Fowler, S., Hains, A., and Rosenkoetter, S. (1990). The transition between early intervention services and preschool services: Administrative and policy issues. Topics in Early Childhood Special Education, 9, (4), 55-65.

Fraenkel, J. and Wallen, N. (1996). How to design and evaluate research in education. New York: McGraw-Hill, Inc.

Gall, M., Borg, W., and Gall, J. (1996). Educational research: An introduction (6th edition). White Plains, NY: Longman Publications.

Hains, A., Fowler, S., and Chandler, L. (1988). Planning school transitions: Family and professional collaboration. Journal of the Division for Early Childhood, 12, (2), 108-115.

Hains, A., Rosenkoetter, S., and Fowler, S. (1991). Transition planning with families in early intervention programs. Infants and Young Children, 3, (4), 38-47.

Hamblin-Wilson, C., and Thurman, S. K. (1990). The transition from early intervention to kindergarten: Parental satisfaction and involvement. Journal of Early Intervention, 14, (1), 55-61.

Hanline, M. (1988). Making the transition to preschool: Identification of parent needs. Journal of the Division for Early Childhood, 12, (2), 98-107.

Hanline, M., and Knowlton, A. (1988). A collaborative model for providing support to parents during their child's transition from infant intervention to preschool

special education public school programs. Journal of the Division for Early Childhood, 12, (2), 116-125.

Haring, K. (1996). Family systems project. Final Report to Congress. ERIC and The University of Oklahoma.

Haring, K. (1998) Final report: Family systems project. U. S. Department of Education, OSERS, Washington, D.C.

Hutinger, P. (1981). Transition practices for handicapped young children: What the experts say. Journal of the Division for Early Childhood. 2, 8-14.

Individuals with Disabilities Education Act Amendments of 1997, P. L. 105-17, 105th Cong., 1st sess.

Individuals with Disabilities Education act of 1990, 20 U.S.C. 1400 *et seq.*

Jaffe-Ruiz, M. (1983). A family systems look at the developmentally disabled. In Schreiber, Meyer (Ed.), Siblings of mentally retarded and developmentally disabled persons. Proceedings of the annual national seminar, New York, N. Y., May 19-20. (ERIC Document Reproduction Service no. 260-548).

Johnson, T., Chandler, L., Kerns, G., and Fowler, S. (1986). What are parents saying about family involvement in school transitions? A retrospective transition interview. Journal of the Division for Early Childhood, 11, (1), 10-17.

Kilgo, J., Richard, N., and Noonan, M. (1989). Teaming for the future: Integrating transition planning with early intervention services for young children with special needs and their families. Infants and Young Children, 2, (2), 37-48.

Lambie, R., and Daniels-Mohring, D. (1993). Family systems within educational contexts: Understanding students with special needs. Denver, CO: Love Publishing Co.

Lazzari, A., and Kilgo, J. (1989). Practical methods for supporting parents in early transitions. Teaching Exceptional Children, 22, 40-43.

McDonald, L., Kysela, G., Siebert, P., McDonald, S., and Chambers, J. (1989). Parent perspectives. Teaching Exceptional Children, 22, 4-8.

McNaughton, D. (1994). Measuring parent satisfaction with early childhood intervention programs: Current practice, problems, and future perspectives. Topics in Early Childhood Special Education, 14, (1), 26-48.

Minuchin, S. (1974). Families and family therapy. Cambridge: Harvard University Press.

Montgomery, J., and Fewer, W. (1988). Family systems and beyond. New York: Human Science Press.

Odom, S. (1988). Research in early childhood special education: Methodologies and paradigms. In S. Odom and M. Karnes (Eds.), Early intervention for infants and children with handicaps (pp. 1-21). Baltimore: Paul Brookes.

Patterson, J. (1985). Critical factors affecting family compliance with home treatment for children with cystic fibrosis. Family Relations, 34, 79-89.

Powell, T., and Ogle, P. (1985). Brothers and sisters- A special part of exceptional families. Baltimore: Paul Brookes Publishing Co.

Rice, M., and O'Brien, M. (1990). Transitions: Times of change and accommodation. Topics in Early Childhood Special Education, 9, (4), 1-14.

Rizzo, N. (1972). The significance of Von Bertalanffy for psychology. In E. Laszlo (ed.), The relevance of general systems theory. (pp. 135-144). New York: George Braziller.

Rosenkoetter, S., Hains, A., and Fowler, S. (1994). Bridging early services for children with special needs and their families: A practical guide for transition planning. Baltimore, Maryland: Paul Brookes.

Schmutz, L. (1995). From early intervention to preschool: Preparing parents for transition. Nova Southeastern University. (ERIC Document Reproduction Services number 386 007)

Spiegel-McGill, P., Reed, D., Konig, C., and McGowan, P. (1990). Parent education: Easing the transition to preschool. Topics in Early Childhood Special Education, 9, (4), 66-77.

U. S. Bureau of the Census. (2000). Census of population and housing.

U. S. Bureau of the Census. (2000). Geographic Area: Oklahoma

Von Bertalanffy, L. (1950). An outline of general systems theory. British Journal of Philosophy of Science, 1, 134-164.

Von Bertalanffy, L. (1968). Organismic psychology and systems theory. Clarke University Press: Barre Publishers.

Von Bertalanffy, L. (1968). General systems theory. New York: George Braziller.

Von Bertalanffy, L. (1975). Perspectives on general systems theory: Scientific-philosophical studies. New York: George Braziller.

Wheeler, W., Reetz, L., and Wheeler, J. (1993). Facilitating effective transition in early intervention services: Parent involvement. Rural Special Education Quarterly, 2, (1), 55-60.

Whitechurch, G., and Constantine, L. (1993). Systems theory. In P. Boss, W., Doherty, R. LaRossa, W. Schumm, and S. Steinmetz (Eds.), Sourcebook of family theories and methods: A contextual approach (325-352). New York: Plenum.

Wolery, M. (1989). Transitions in early childhood special education: Issues and procedures. Focus on Exceptional Children, 22, (2), 1-14.

Will, M. (1985). Transitioning: Linking disabled youth to a productive future. OSERS News in Print, 51, 11-16.

Yell, M. (1998). The law and special education. New Jersey: Prentice-Hall.

APPENDICES

Appendix A

Rita Chandler
The University of Oklahoma
College of Education
820 Van Fleet Oval Room 321
Norman, OK 73019

Dear Families,

I am a graduate student conducting a study on your views of changes between programs, first from early intervention to special education preschool services and second from preschool services to kindergarten. As a parent your perception of these program changes is very important. This survey is designed to answer questions about how the changes took place.

I know your time is very valuable, and thank you graciously for your cooperation. Results of this survey will provide researchers and policy makers with information on present service delivery programs regarding early childhood transitions. Research from the parents' perspective is extremely limited, in spite of federal mandates clearly requiring parental involvement.

Once again, thank you so much for your cooperation. Please mail the surveys (pages 3-10) to me in the envelope provided. Please make sure you do not identify your child or family in the survey or on the return envelope. If your child was not identified and placed in special education until first grade or later please check the box below and return to me.

If you have any questions about this study please contact either Rita Chandler M.Ed. (405-447-3644) or Kathryn Haring Ph.D. (405-325-5404). If you have questions about your rights as a research subject contact The University of Oklahoma, Office of Research Administration (405-325-4754) in charge of all research projects.

_____ My child was not identified until first grade or later.

Thank You

Rita Chandler

Appendix B

Informed Consent Form

Consent for Voluntary Participation

Purpose of the Study

This study "Transitions Through Two Models of Early Childhood Special Services" is being conducted under the auspices of the University of Oklahoma, Norman Campus, Educational Psychology Department, Special Education Program. A doctoral advisory committee directs the project. Kathryn Haring Ph.D. is serving as the committee chair and Rita Chandler as the primary investigator. This document serves as an individual consent for participation in this research project.

The main purpose of this project is to help professionals understand how to best serve the transitional needs of families who have a child with health problems or developmental delays through their early years. The survey questions are related to the issues outlined in federal law 99-457 Part H (Sec. 303.344) and federal law 102-119, detailing early childhood special services transition.

The family information section will provide very important information on any differences in the perceptions of the services provided to families in terms of their ethnicity, income, family size, and education.

This project will help professionals understand the transition experiences and directly through the families' point of view. This information will determine if transition services need improvement in the early childhood years through entrance into school programs. I am interested in finding out what your personal experiences were as you made transitions in both the early intervention and preschool programs.

Participation

As a volunteer, you will be asked to participate in a confidential survey. These surveys will take approximately 30 minutes to read and fill out. I have included space for you to expand or on any information you wish to share. Your participation in the study is completely voluntary, and refusal to participate will involve no penalty or loss of benefits. You may discontinue participation at any time without penalty. All information given in the survey will be held in strict confidence. I have enclosed a self-addressed; postage paid envelope for you to return the survey. These returned surveys are completely anonymous. No family member will be identified in any way, ever. This study holds no risks to any family member who is participating.

Benefits

The results of this study will be used to make recommendations to improve early childhood special service transition for families who receive very different early intervention and preschool programs. The results will be shared with state and federal policy makers to support continuing recognition of the importance of family participation. I will be happy to share information and resources that will be of assistance in meeting your family's needs.

If you have any questions about this study please contact either Rita Chandler M.Ed. (405-447-3644) or Kathryn Haring Ph.D. (405-325-5404). If you have questions about your rights as a research subject contact The University of Oklahoma, Office of Research Administration (405 4754).

Informed Consent

In order to protect your parental confidentiality rights, you are giving consent to participate when you complete and mail the survey.

Appendix C

Family Information

Child

Child's birth date_____ Child's gender M____ F_____
Number of siblings or other children in the home
Please write the number: girls_____ boys_____
Was your child with a disability/delay: Full Term___ Premature___

Known diagnosis _____

Current Therapies/Treatments _____

Current special education category your child is receiving services under (circle one):
1.Mental Retardation 2. Autism 3. Multiple Disabilities 4. Orthopedic Impairment 5.Other Health Impairment 6. Deaf-Blindness 7. Traumatic Brain Injury 8. Visual Impairment 9. Hearing Impairment

Parents

Mother's relationship to child: Natural Parent _____ Foster Parent _____
Step-Parent _____ Adoption _____

Marital Status: Married _____ Single _____ Divorced _____ Separated _____

Highest level of education completed: Grade School (1-8) _____
High School (9-12) _____ College (13-16) _____ Graduate School (16+) _____

General Occupation_____

Race/Ethnic Origin_____

Father's relationship to child: Natural Parent _____ Foster Parent _____
Step-Parent _____ Adoption _____

Highest level of education completed: Grade School (1-8) _____
High School (9-12) _____ College (13-16) _____ Graduate School (16+) _____

General Occupation_____

Race/Ethnic Origin_____

Does your child qualify for a free/reduced breakfast or lunch program? Yes___ No____

Does your child have medical coverage? Yes____ No_____
Who is the provider of the coverage? Private_____ Employment_____
Medicaid____ Medicare_____ Sooner care_____ Other _____
Please circle any of the following supplemental services your child receives:
Supplemental Security Income, waivered services, DHS daycare, respite care.

Appendix D

Parental/Guardian Assessment of
Early Childhood Special Services Transitions

Some questions have two answer sections in order to respond to your feelings at the time of each program change. The left side is labeled for you to circle your answer to the first change from the early intervention program into the public preschool (when your child turned 3). The right side is for you to circle your answer to the same question according to what you experienced during the second change (from preschool to kindergarten approximately when child turned 5).
A few questions have a yes or no answer to help us understand whether a service was provided or not. The remaining questions are provided to give you an opportunity to expand upon questions that help further describe your experiences and feelings.

Parent/ Guardian Legal Rights

The following questions are about your legal rights and procedures.

1. Our legal rights concerning the transition into the new program were explained in a way that we could understand.

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Not Well	Not Well
Somewhat Understood	Somewhat Understood
Understood Well	Understood Well

2. The teachers helped us by answering questions about our legal rights.

Early Intervention to Preschool	Preschool to Kindergarten
not at all	not at all
very little	very little
a fair amount	a fair amount
extensively	extensively

3. The teachers explained the differences in the Individual Family Service Plan (IFSP) and the Individual Education Program (IEP).

Early Intervention to Preschool
No
Not Well
Somewhat Understood
Understood Well

4. We understood that we would be using an Individual Education Program in the school program instead of the Individual Family Service Plan.
Early Intervention to Preschool
yes
no

5. We understood what the Individual Education Program was and how it worked.

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Not Well	Not Well
Somewhat Understood	Somewhat Understood
Understood Well	Understood Well

Transition Policies/Process

The following questions are about activities that should happen during a move into a new education program.

1. The Sooner Start staff and teachers explained the changes in our child's education program clearly.

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Not Well	Not Well
Somewhat Understood	Somewhat Understood
Understood Well	Understood Well

2. We were given a list of the steps that would happen before and during the move to the new education program.

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Yes	Yes

(If you answered no, skip to question number 4).

3. Please circle yes or no if the following steps were included the list provided to you.

A. A meeting with teachers from the current and new programs to plan your child's move.

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

B. You were given a choice on the category of programs your child could attend.

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

C. You were given an opportunity to visit the new school(s).

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

D. The activities for the move started about six months early.

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

If yes, skip to letter F.

E. If no, please tell how many months before the move they began to prepare you and your child.

Early Intervention to Preschool	____ months
Preschool to Kindergarten	____ months

F. Did you experience a delay in the move.

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

If yes please briefly explain.

G. Did your child go without services for any length of time during the move?

Early Intervention to Preschool	Yes	No
Preschool to Kindergarten	Yes	No

If yes please briefly explain.

4. Please briefly explain the reasons for the educational setting you chose for your child.

Early Intervention to Preschool

Preschool to Kindergarten

5. The teachers made you feel comfortable when sharing your concerns and goals for your child.

Early Intervention	Preschool	School
yes	yes	yes
no	no	no

Parent Involvement

These questions are about the activities you were involved in to help make choices about the move to the new program.

1. Were you told about and invited to attend all of the team meetings about your child's educational program?

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Yes	Yes

2. Circle the ways you participated in decisions regarding your child's program change.

Meeting with the current teacher

Meeting with the new teacher.

Meeting with the principal or special education director.

Visiting the new school(s).

Attending the Individual Education program meeting

The decision on what category your child would receive special education for.

Making a decision on the category of program and services for your child.

Making a decision on where your child would receive services.

3. How much help did the professionals from the new program give you to complete the paperwork (medical records, parent contact forms, special education permission forms, transportation forms)?

Early Intervention to Preschool	Preschool to Kindergarten
none	none
very little	very little
a fair amount	a fair amount
extensively	extensively

4. How do you feel the early intervention team met your family's needs during the move?

not at all
somewhat
relatively well
very well

Parent Information

These questions are about information you were given to explain the services in the special education program and what would help your child.

1. Please circle all of the ways that your teachers from the new program shared information with you.

Early Intervention to Preschool	Preschool to Kindergarten
Phone calls	Phone calls
Letters home	Letters home
News letters	Newsletters
Home visits	Home visits
Invitation to visit	Invitation to visit

2. Were you provided with information on all the services offered in the new program: (examples: Physical therapy, speech therapy, occupational therapy, transportation, nursing/medical care, counseling, assistive communication devices)?

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Not Well	Not Well
Somewhat Understood	Somewhat Understood
Understood Well	Understood Well

3. The teachers explained what category of disability your child was in special education for.

Early Intervention to Preschool	Preschool to Kindergarten
No	No
Not Well	Not Well
Somewhat Understood	Somewhat Understood
Understood Well	Understood Well

4. Did you agree with the special education category your child was put in?

Early Intervention to Preschool	Preschool to Kindergarten
yes	yes
no	no

Program Satisfaction

This section is about how happy you were with the program change and services in both the old and new programs.

What were things about the move that made you happy? Please describe.
Early Intervention to Preschool

Preschool to Kindergarten

2. Were there things about the move that made you unhappy? If yes, please describe.
Early Intervention to Preschool

Preschool to Kindergarten

3. What could the teachers or care providers have done to improve your child's move?

Early Intervention to Preschool

Preschool to Kindergarten

4. What were the best aspects of the homebased early intervention?

5. What were the best aspects of the preschool?

6. What were the best aspects of the kindergarten program?

7. Which of the following programs has your child received services in?

Preschool	Kindergarten
Regular classroom (minimal special support)	Regular classroom (minimal special support)
Regular classroom (special education teacher comes to classroom)	Regular classroom (special education teacher comes to classroom)
Regular class half day Special class (lab) half day	Regular class half day special class (lab) half day
Regular class less than half day	Regular class less than half day
Full time special education class	Full time special education class
Home based instruction	Home based instruction
Hospital school program	Hospital school program
Half day preschool (in public school)	
Head start	

Appendix E

Rita Chandler
The University of Oklahoma
College of Education
820 Van Fleet Oval Room 321
Norman, Oklahoma 73019

October 12, 2000

Dear Administrator,

I am conducting a study on transitions between programs from early intervention and special education preschool services and from preschool services to kindergarten for children who have a qualifying disability. The enclosed survey concerns the parents' perceptions of their experiences through these transitions and the subsequent effect on their child and family.

I have enclosed a set of packets for you to send home with your elementary students who have mild, moderate or severe disabilities (all categories except learning disabilities, serious emotional disturbance/ behavior disorders and children receiving speech/language services only). The parents are provided with postage paid return envelopes to return the survey without identification. Please give the packets to the special education teachers to send home with the children in their classes.

I know your time is very valuable, and thank you graciously for your cooperation. Results of this survey will provide researchers and policy makers with information on present service delivery programs regarding early childhood transitions.

Once again, thank you so much for your cooperation. If you have any questions or concerns please contact either Rita Chandler M.Ed. (405-447-3644) or Kathryn Haring Ph.D. (325-5404). If you have any questions about the right of research subjects, please contact the University of Oklahoma, Office of Research Administration (405-325-4754).

Thank You

Rita Chandler

Appendix F

The University of Oklahoma

OFFICE OF RESEARCH ADMINISTRATION

July 20, 2001

Ms. Rita Chandler
3104 Covehollow Court
Norman OK 73072

SUBJECT: "Transition Through Two Models of Early Childhood Special Services"

Dear Ms. Chandler:

The Institutional Review Board has reviewed and approved your requested extension to the subject protocol which includes revisions to the survey instrument. The project has been extended through November 11, 2001.

Please note that this approval is for the protocol and informed consent form reviewed and approved by the Board. If you wish to make any changes, you will need to submit a request for change to this office for review.

If you have any questions, please contact me at 325-4757.

Sincerely yours,

Susan Wyatt Sedwick

Susan Wyatt Sedwick, Ph.D.
Administrative Officer
Institutional Review Board-Norman Campus

SWS:pw
FY00-82

cc: Dr. E. Laurette Taylor, Chair, Institutional Review Board
Dr. Kathryn Haring, Educational Psychology

1000 Asp Avenue, Suite 314, Norman, Oklahoma 73019-0430 PHONE: (405) 325-4757 FAX: (405) 325-6029

The University of Oklahoma

OFFICE OF RESEARCH ADMINISTRATION

November 11, 1999

Ms. Rita Chandler
4621 West Heritage Place Drive #2005
Norman OK 73072

Dear Ms. Chandler:

Your research application, "Transition Through Two Models of Early Childhood Special Services," has been reviewed according to the policies of the Institutional Review Board chaired by Dr. E. Laurette Taylor and found to be exempt from the requirements for full board review. Your project is approved under the regulations of the University of Oklahoma - Norman Campus Policies and Procedures for the Protection of Human Subjects in Research Activities.

Should you wish to deviate from the described protocol, you must notify me and obtain prior approval from the Board for the changes. If the research is to extend beyond 12 months, you must contact this office, in writing, noting any changes or revisions in the protocol and/or informed consent forms, and request an extension of this ruling.

If you have any questions, please contact me.

Sincerely yours,

Susan Wyatt Sedwick

Susan Wyatt Sedwick, Ph.D.
Administrative Officer
Institutional Review Board

SWS:pw
FY00-82

cc: Dr. E. Laurette Taylor, Chair, Institutional Review Board
Dr. Kathryn Haring, Educational Psychology

1000 Asp Avenue, Suite 314, Norman, Oklahoma 73019-0430 PHONE: (405) 325-4757 FAX: (405) 325-6029

Appendix G

Previous Research

Author & Date	Subjects	Transition	Methodologies	Results
Fowler, Chandler, Johnson, Stella (1988)	30	P to K	Interview & Ranking on Likert Scale	Rank ordered 12 most important transition issue items identified as priorities
Hanline (1988)	92	EI to P	Survey	Identification of prioritized needs and concerns: 1. Lack of information about services offered. 2. Anxiety about working with unfamiliar program. 3. Uncertain child received appropriate services. 4. Separation & reduction of parent involvement.
Hamblin, Wilson, Thurman (1990)	9	EI to P P to K	Questionnaire, Demographics, Likert Scale	1. 60% reported more support during transition to P. 2. 2% reported more support during transition to K. 3. 30% reported equal support on both transitions. 5. 54% involved in program planning. 6. 37% involved in selecting a classroom. 7. 68% visited classroom.
Johnson, Chandler, Kerns, Fowler (1986)	19	P to K	Interview	Parents reported various levels of satisfaction with transition planning, IEP process, placement, agency to agency contact, & collaboration
Kilgo, Richard, Noonan (1989)	77	EI to P	Survey (methodologies not reported)	1. Parents reported peak time for thinking about transition planning is 24-29 months. 2. Readiness directly related to severity of child's needs.
McDonald, Kysela, Seibert, McDonald, Chambers (1989)	25	EI to P	Interview	1. 64% wanted at least 6 months prior planning. 2. Parents satisfied with current plan completed 6 months prior. 3. Priorities listed as description of options, tours of options, & IEP review.
Rule, Fiechtl, Innocenti (1990)	8	P to K	ABA group means of 6 domains reported in percentages	1. Children can learn survival skills through curriculum. 2. Children can master skills when environments & tasks are frequently changed.
Schmutz (1995)	20	EI to P	Questionnaire in interview format	1. 16 parents reported very high anxiety and stress. 2. All reported no assistance from school on paperwork, no opportunities to view placement, & absence of sending and receiving team meetings.
Spiegel-McGill, Reed, Konig, McGowan (1990)	7	EI to P	Case Study & Likert Scale	Over half of the parents found the topics to be helpful during transition.

Abbreviations

EI to P= Early Intervention to Preschool P to K= Preschool to Kindergarten

Appendix H

Best Practice Models

Researcher	Date	Model Base
Diamond, Spiegel-McGill & Hanrahan	1988	Measure of all environmental interactions based on Bronfenbrenner's (1986) triad.
Council for Exceptional Children Division for Early Childhood	1993	Bruder and Chandler reviewed literature and made recommendations.
Fowler	1982	Focus on analyzing program differences.
Fowler	1988	Building Effective School Transition (BEST), Advanced planning and communication between sending and receiving programs.
Fowler	1988	Sequenced Transition to Education in the Public Schools (STEPS) community wide interagency approach to helping families facilitate transitions.
Fowler	1988	Transition into the Elementary Education Mainstream (TEEM) schools establish and implement transition planning process.
Hains, Fowler & Chandler	1988	Interagency planning, program planning & family planning.
Hains, Fowler & Chandler	1988	Focused on the roles of the child, family, teachers, & educational agency as key issues in transition planning.
Hains, Rosenkoetter & Fowler	1991	Examined concerns including transfer of friendships, changes in service delivery, & discrepancies in eligibility.
Hanline & Knowlton	1988	Supported Transition to Integrated Schools (STIP) goal was to deliver individualized comprehensive transition support to families. Both sending and receiving teams combined resources and expertise.
Kilgo, Richard & Noonan	1989	The Preschool Preparation and Transition project PPT was a needs assessment at each level and parent education was a major component.
Lazzari & Kilgo	1989	Adoption of a continual rather than a timebound (timeline) approach.
Wheeler, Reetz & Wheeler	1993	Communication and collaboration between parents and professionals.