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I am submitting herewith a thesis written by Lucanne Marie Kachmarik entitled “Walking in Their Shoes: Parents’ Journeys Through Transitions.” I have examined the final electronic copy of this thesis for form and content and recommend that it be accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy with a major in Education.

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WALKING IN THEIR SHOES:
PARENTS' JOURNEYS THROUGH EARLY CHILDHOOD SPECIAL EDUCATION
TRANSITIONS

A Dissertation
Presented for the
Doctor of Philosophy
Degree
The University of Tennessee, Knoxville

Lucanne Marie Kachmarik
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Dedication

This dissertation is dedicated to the memory of my parents,
Julia and Joseph Kachmarik,
Who always supported me throughout my life.

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Abstract

The purpose of this qualitative study was to gain an understanding of the experiences of parents as they transitioned their children from an early intervention program to an early childhood special education program. This study was conducted in a rural area of Virginia and participants included thirty parents from several school divisions. Four primary themes were derived through individual interviews and focus groups, and included: parents received information and services from programs; parents experienced barriers (lack of knowledge and experience with schools, differences in programs and services, communication issues among parties, dealing with own emotions, and fears for children); parents received benefits (emotional support from early intervention professionals, and developed rapport and new relationships with school personnel); and parents offered suggestions and advice for future transitions (improve communication and coordination, expand information and services for parents, advocate for “parent to parent” networking, develop strength and coping skills, and consider options for preparing children for transitions).

Table of Contents

Chapter I: Introduction.....	1
Introduction to Transitions	1
Purpose of the Study.....	3
Research Questions	4
Definition of Terms	4
Introduction to the Study	7
Rationale for Qualitative Research.....	8
Theoretical Perspectives.....	8
Definition of Theory	8
Constructivist Paradigm.....	9
Family Systems Theory	11
Chapter II: Literature Review.....	14
Introduction	14
Definition and Description of the Transition Process	14
An Historical Perspective of Transitions.....	17
Early Transition Efforts	17
Current Legislation/Laws.....	19
Introduction to Research Studies of Transitions	22
Transition Studies from Early Childhood to Kindergarten	25
Transition Studies from Early Intervention to Early Childhood Special Education	32
Transition Models and Demonstration Projects	40

	vii
Evidenced-based Practices in Transitions	44
Conceptual Framework	48
Chapter III: Methodology	56
Introduction	56
Context of the Study	59
Participants in the Study	59
Selection of Participants	59
Data Collection	63
Data Analysis Procedures	67
Nature of Anticipated Findings	69
Discussion of Methodological Issues and Delimitations/Limitations	70
Chapter IV: Findings	75
Introduction to Chapter	75
Findings	76
Parents received information and services from programs	77
Parents experienced barriers during transition	79
Parents received benefits during the transition process	87
Parents offered suggestions and advice for future transitions	93
Chapter V: Interpretations and Conclusions	105
Introduction to Chapter	105
Recommendations Based on Findings	105
Implications for Future Research	119
Contributions to the Field	122

Personal Reflection.....	123
References	124
Appendices	134
Vita	138

Chapter I: Introduction

Introduction to Transitions

As an early childhood professional for much of my teaching career, I have participated in numerous transitions with families of children with special needs. At times I have been the receiving teacher, and many times I have sent children to other programs. Most of these transitions seemed successful for the families, agencies, school personnel, and children involved. However, I believe those of us responsible for transitions should strive to improve transitions in order that all families, children, and service providers experience a smooth journey from one program to another. Viewing transitions from one perspective, such as that of a teacher, does not allow an individual to appreciate or understand the experience from another's position, such as a parent. Therefore, it was my intent to conduct a study in which I listened to parents who had participated in transitions on behalf of their children. By hearing their version of transition experiences, I can appreciate and value their position in the process.

Transitions are a part of everyone's life. Generally, transition refers to the process in which an individual participates when moving from one setting or experience to another. Changing schools or communities, entering the job market, and retirement are examples of life's transitions. Some individuals experience a myriad of transitions long before they reach school age. Such is the case for many young children with special needs. Sometimes they have spent time in a neonatal intensive care unit (NICU) because of birth complications. Often they have been involved in early intervention settings shortly after birth due to delays in their development. Their next step may have included

placement in an early childhood special education program as young as the age of two or three, and then at five years of age they were enrolled in kindergarten or a special education class.

Simultaneously, parents experience these same transitions, some of which may be positive and others quite negative. Their experiences as participants in the transition process are critical to the success of these transitions. Parents have much to offer in terms of their individual experiences with their children's transitions, as well as insight for improving the transition process for all persons involved. Through this study, I endeavored to describe those experiences and offer recommendations toward as seamless as possible transitions for parents, their children, and the schools and agencies that serve them during this crucial time.

Transitions involve differences among agencies, environments, and institutions (Lombardi, 1992), and most likely involve changes in services and personnel. In the case of transitioning from early intervention services to an early childhood special education class, children and families must adapt to an entirely different environment. Instead of a case manager or physical therapist coming to a family's home each week to provide services, a school bus transports the young child to an elementary school for his education. Rather than addressing a concern during a therapy session, a parent must contact her child's teacher to set up a conference with the child's service providers at school. No longer is the focus on the family; the child and his needs are paramount. An effective transition serves as a bridge between two programs, going from the familiar and comfortable to the unknown and uncharted. During the transition process, parents can begin to develop a relationship with school staff, all the while maintaining their bond

with the child's current program personnel. Differences in parental involvement, child expectations, program philosophies, and available resources can be addressed through effective transition planning. A smooth transition with no disruption in services (continuity) should be the goal for each parent, agency, and school.

This study involved the vertical transition from an early intervention program to an early childhood special education setting, and focused on parents' perceptions of their experiences when they transitioned their children from an agency-operated home-based program to a preschool class within the public school setting. It entailed interviewing parents and conducting focus groups to gain an understanding of the process of transition from the participants' points of view. My intention was to explore the experiences of parents in an effort toward understanding and learning from their first-hand experiences with transitions.

Purpose of the Study

As an early childhood educator, I recognize parents as experts and primary stakeholders regarding their children and their education. Experienced educational professionals have learned that involving parents in the total school experience, including personal experiences in transitions, is a key factor in the evolution of their children's development. Because of my interest in young children and their parents, as well as the paucity of research as it relates to early transition services for youngsters birth-to-three, I pursued this study. Through the analysis and interpretation of individual interviews and focus groups I derived common themes regarding parents' personal experiences in transitioning their children from one program to another program. As a result of this

study, I have made recommendations to the field of early childhood education toward improving the transition process for parents and professionals.

Research Questions

The study is designed to explore the following research questions:

1. What do parents recall experiencing as they participated in the transition of their children from early intervention to early childhood special education programs?
2. What common themes regarding transitions derived from parents' experiences?

Definition of Terms

For purposes of this research I have defined the following terms:

Experiences: the active participation in, or living through an event or activity. In this case I asked parents of young children with disabilities to relate and describe their experiences as their children transitioned from an early intervention program to an early childhood special education program.

Transition: the process children, parents, and program personnel (sending and receiving staff) experience when children leave one program and enter another program.

Continuity: continuation of services from one program to another without disruption or significant changes.

Normative transitions: expected changes in an individual's life (e. g., parenthood, attending school, retirement).

Non-normative transitions: unexpected circumstances in one's life, such as the birth of a child with a disability, bankruptcy, catastrophic illness or death of a child at a young age.

Social construction of knowledge: the building or acquisition of knowledge by an individual based upon his or her experience(s) within a particular setting and/or with particular individuals. No person experiences a phenomenon in the same manner as another individual, even under the same circumstances.

Vertical transition: a child and family's participation in one service system after another, daily, sequentially, across time (e.g., neonatal intensive care unit (NICU) to early intervention to Head Start) (Kagan, 1992).

Horizontal transition: involves the child and family in multiple activities simultaneously, with the services under different leadership and in different locations outside the home (early childhood special education at one center, followed by childcare in another setting) (Kagan, 1992).

Infant or toddler with a disability: (a) an individual (birth through two years of age) who needs early intervention services due to developmental delays, as measured by appropriate diagnostic instruments and procedures, in one or more areas: cognitive, physical, communication, social-emotional, and adaptive-developmental; (b) an individual diagnosed with a physical or mental condition with a high probability of having a developmental disability. This term may also include (at state's discretion) a child, birth through two, who may be at risk for substantial developmental delay(s) if early intervention services were not provided (20 U.S.C.1432(5)).

Natural environment: home or community setting in which a child participates; a setting that is natural or normal for child's age peers who have no disability.

Early intervention services: services designed to meet the developmental needs of infants and toddlers and their families. Generally services are offered through public or private agencies and provided in various settings (e.g., child's home, daycare center, hospital).

Early childhood special education (ECSE): services provided in a public elementary school setting to preschool aged children with developmental delays.

Infant Family Service Plan (IFSP): a written plan for providing early intervention services to children birth to two or three years of age, developed jointly by the child's family and appropriate qualified personnel. The IFSP is based on a multi-disciplinary evaluation and assessment of the child and the assessment of the family's strengths and needs, and includes services necessary to enhance the development of the child and the capacity of the family to meet the special needs of the child and other components as stated. (34 CFR 303.340(b) (1-3))

Individualized education program (IEP): a written plan to provide educational and related services for a child with a disability from age two or three through twenty-two years. The IEP is developed by educational staff and parents, and in some cases, the student participates.

Parent: natural or adoptive parent of child, guardian, surrogate, or a person acting in place of the parent (such as a grandparent or stepparent with whom the child lives, or a person legally responsible for the child's welfare) (20 U.S.C. 1401(19)).

Family-centered services: services provided to a child that consider his/her needs as well as the family's priorities, concerns, and needs. In early intervention programs the focus is on the whole family, the child, and their needs collectively, all of which are considered in developing the IFSP.

Child-centered services: the child's individual needs are the focus of instruction. Once a child is enrolled in an early childhood program, such as early childhood special education or private preschool, the program is designed to meet his/her educational goals and objectives. Parents are secondary, although their participation is valued and encouraged.

Rural: low ratio of inhabitants to open land; in this study, county populations ranged from 8,800-16,700, with an exception of one county of 34, 800. The early intervention program in this study serves a large geographic area considered "rural" by location in state and other aspects, such as farming, fishing, and retiree population (U.S. Census).

Evidence-based practices: refers to the use of interventions, strategies, and supports whose effectiveness has been documented by research; practices that are considered evidence-based and those that have been demonstrated as effective within multiple research studies that document similar outcomes (Strain & Dunlap, n. d.).

Introduction to the Study

For my study I was interested in hearing the experiences of parents who have had the opportunity to participate in transitions regarding their children when they exited an early intervention program and entered an early childhood special education setting. I sought to understand these experiences from the parents' point of view through the identification of common themes that emerged from the data analysis. As a researcher and former teacher, I can identify professionally and personally with transition experiences, but have not experienced them from a parental view. Through individual interviews and focus groups, collectively participants and I learned about the experiences of others through each others' lenses, and as a result, co-constructed new knowledge of the transition process.

Rationale for Qualitative Research

Although qualitative research has a long and well-established record in the social sciences, it is considered relatively new to the field of early intervention and early childhood special education. This type of research has the potential to increase our understanding of children with special needs and their families, as well as those who work for and with them (Sandall, Smith, McLean, & Ramsey, 2002). Educators and researchers are interested in learning about phenomena from the perspective of those who have experienced them firsthand, and qualitative research contributes to this understanding. Qualitative researchers explore, explain, or describe certain phenomena (Rumrill & Cook, 2001). Through multiple methods, such as interviews, focus groups, observations, and combinations thereof, researchers provide rich descriptions of situations and experiences. As noted by Sandall, et al (2002), “Qualitative researchers arrive at their reported findings through construction of their interpretation” (p. 133). Qualitative research is well-suited for providing a “voice” for the stakeholders in early intervention and early childhood special education by listening to and considering their collective voices within the context of their experiences (Sandall, et al, 2002).

Theoretical Perspectives

Definition of Theory

According to Papalia, Olds, and Feldman (1998), a theory is a coherent set of related concepts whose purpose is to explain, interpret, and organize data. Thomas (1996) described a theory as an explanation of how facts fit together, and can serve as a guide in understanding children (in his case, and I extend that to include adults as well). Theories offer us, as educators, researchers, and scientists, a systematic means to

understand the phenomena that define our existence, and enable us to generalize about these specific understandings (Goldhaber, 2000).

Constantine (1986) believed theories are an intrinsic part of the process of perceiving and dealing with the external world. As individuals we construct beliefs, perceptions and values based upon our experiences with the world, whether we are conscious of them or not. Our own personal theories about what constitutes knowledge, based on prior reading and/or experience, have a major impact on the ways in which we teach and learn. Theories have a profound influence on the ways we conceptualize our roles and interact with others in our environment (Oldfather & West, 1999).

Constructivist Paradigm

I have constructed my vision of an effective transition from my own personal and professional experiences as an educator. Since I am not a parent of a child with special needs, I have not experienced transitions as the parent participating in his or her child's transition. Through interviews and focus groups I can begin to comprehend the experience by listening to the stories of others' first hand encounters.

Hatch (2002) provides a comprehensive overview of the constructivist research paradigm:

- ontology (nature of reality)--multiple realities are constructed;
- epistemology (what can be known; the relationship of the knower and the known)--knowledge as human construction; the researcher and participant co-construct understandings;
- methodology (how knowledge is gained--naturalistic qualitative methods;

- products (forms of knowledge produced)—case studies, interpretations, narratives, and reconstructions.

Collectively, through interviews and focus groups with parents, my participants and I co-constructed knowledge about transitions from their experiences with transitions. Because participants attach meaning and belief to what they determine is real and significant to them, each person perceives an experience from a different lens. The role of the researcher is to capture these various experiences toward meaningful interpretations for those involved. As a result of their experiences, I was able to derive common themes from the data.

In establishing my theoretical perspective, it was critical for me to distinguish between methodological and substantive theory. Methodological theory places the study in a research paradigm, such as constructivist and identifies the kind of study. Hatch (2002) refers to substantive theory as theory that is used to describe and explain the phenomena to be investigated.

Denzin and Lincoln (2000) suggested that we are all constructivists if we believe the mind is active in constructing knowledge. Human beings do not find or discover knowledge so much as they construct knowledge. They further stated that individuals invent concepts, models, and schemes in order to make sense of experiences, and modify them according to new experiences. Denzin and Lincoln also contended that individuals do not construct interpretations in isolation, but “against a backdrop of shared understandings, practices, language, and so forth” (p.197). Individuals who conduct qualitative research self-consciously draw upon their own experiences as a resource,

which then allows them to make connections among lived experience, larger social and cultural structures, and the here and now. Qualitative researchers conduct their studies in naturalistic settings, attempting to make sense of or interpret phenomena in terms of meaning others bring to them in order to gain an understanding of the people and events around them.

Family Systems Theory

Each individual is part of an overall family system, affecting and being affected by that system (Galvin & Brommel, 2000; Becvar & Becvar, 1999). A family member changing jobs or becoming ill has a profound effect on others within the family structure. Everyday expenses, taken for granted, suddenly become difficult to cover. A newborn diagnosed with a disability impacts the way in which the family functions. Family roles and responsibilities may suddenly change. In order to appreciate the family experience regarding these and other transitions, it is most important to consider family systems theory.

Defining *family* is foremost in understanding how family systems function. Lambie (2000) felt family should be defined in the broadest possible sense, with the parents or caregivers in the family defining it for themselves. Galvin and Brommel (2000) referred to families as networks of people who share their lives over time and are bound by ties, who consider themselves as family, and who share a history and anticipated future of functioning in a family relationship. These definitions are broad enough to encompass variations and diverseness in family patterns. The systems perspective provides a means of gaining insight into family functioning and family communication. Viewing the family as a system requires researchers to consider the

dynamic interaction of individual family members and the relationships between and among them as well as the family and other systems (Becvar & Becvar, 1999).

Individuals do not exist in a vacuum, but rather are linked in ways that make them interdependent upon one another.

According to Lambie and Daniels-Mohring (1993), specific problems, issues or events are viewed within the context of an individual's life experiences and relationships. Persons who support systematic approaches consider the interconnectedness and interrelatedness of all parts of a whole. Within family systems approaches, the interrelationships of all members of the family are included when considering even one member. Therefore, a child in transition is a family in transition. Galvin and Brommel use Satir's illustration of the family as a mobile hanging above a crib. As events occur for one member of the family, others within the family reverberate in relationship to the change in the affected member. With the mobile metaphor, the elephant may touch the giraffe, which, in turn, bumps into the lion, causing the entire mobile to sway. In a transition experience, for example, a mother's uneasiness or dissatisfaction with the process will cause a rippling effect on her husband, the child, and other family members. Holding a systems perspective implies that individuals, such as researchers, observe and analyze families by paying close attention to the relationships among members as opposed to focusing on one particular individual (Galvin & Brommel, 2000).

Minuchin, Colapinto, and Minuchin (1998) considered the family "a special kind of system with structure, patterns, and properties that organize stability and change. It's also a small human society, whose members have face-to-face contact, emotional ties, and a shared history" (p.15). According to Minuchin, et al (1998), all families pass

through transitional periods. As a result of these transitions, members of the family grow and change, and events intervene to modify the family's reality. Families face periods of disorganization or disruption of patterns to which they are accustomed, and must find the balance between the comfortable patterns they experienced previously and the demands of this new situation. The transition from one program to another might be only one of many a family will encounter. For some families the transition is traumatic; for others routine. My role as a researcher was to listen and observe parents as they shared their transition stories, and attempt to derive common themes from their experiences.

Transitions are inevitable, and how we handle them are exclusive to each of us. No two persons perceive the same experience identically. Listening to and considering the viewpoint of another individual increases our understanding of how the experience affects that person, and we can learn to appreciate and respect the uniqueness of the situation. Sharing the perception of others permits us to construct new meaning.

With transitions involving parents and young children it is imperative that those persons in charge consider each transition on an individual basis. A "one size fits all" principle is inappropriate and unacceptable under any circumstance. Each child and his needs are unique; therefore, his transition is unique. Even members within the same family may not share the same perception of the transition experience. Educators must recognize and value each family member's way of thinking and his or her contribution to the success of the transition. The most important aspect to remember is: It's not just the child who makes the transition!

Chapter II: Literature Review

Introduction

This chapter is comprised of eight sections. The first section provides the reader with a definition and description of the transition process. An historical perspective on transitions, including early transition efforts and current laws, is included in the second section. The third section contains an introduction to research studies, followed by reviews of transition studies from early childhood special education to kindergarten and early intervention to early childhood special education in sections four and five, respectively. Section six focuses on models of transition and demonstration projects, and evidenced-based practices within the field comprise the seventh section. The final section summarizes the contents of the chapter.

Definition and Description of the Transition Process

Will (1984) defined transition as a process that serves as a bridge between a secure and structured setting offered by the present program and the opportunities and risks of a new and unfamiliar environment. Such might be the case for children and parents leaving a family-centered program in which early interventionists provide therapy in the home and other support services and moving to a center-based classroom in which the child is expected to follow a curriculum and ride a school bus. Kagan and Neuman (1998) suggested that various interpretations might be included in what is defined as transition. They refer to the continuity of experiences that children have between periods and spheres of their lives as transitions. In some instances, transitions reflect a set of activities that take place prior to a child leaving a setting at the end of a school year, and include parents, both sending and receiving programs, and the children themselves.

These activities often are characterized by visits to the new placement, a transition meeting, and an exchange of the child's records. Others perceive transitions as an ongoing effort to link a child's natural environment (home and family) with a support environment (the child's program). Finally, transition is "the manifestation of the developmental principles of continuity, that is, creating pedagogical, curricular, and/or disciplinary approaches that transcend, and continue between, programs" (Kagan & Neuman, 1998, p. 1).

Each child and family's transition experience is unique, and thereby, cannot be characterized by specific standards or procedures. However, Rosenkoetter, Hains, and Fowler (1994) identified several elements that relate to transitions in general. They noted that transition is a lifelong and continuous process. Transitions involve change, are inevitable, and usually stressful. Finally, early transitions are significant. A well-planned early childhood transition often can set the tone for transitions throughout a child's schooling.

Transitions for some families may be matter of fact, while others will be quite complex. Often concerns and fears are heightened during the process, and must be addressed accordingly. Moving from one program to another can be particularly trying and a major source of stress and upheaval for both the child and the parents (Rous, Hemmeter, & Shuster, 1994). Discontinuity in the form of differing contexts and demands exist (Love, Logue, Trudeau, & Thayer, 1992). Issues such as differences in program philosophy and curriculum, changes from one service delivery system to another, services provided within the new context, levels of parent involvement, and concerns related specifically to the child (such as behavioral expectations, readiness, and

eligibility criteria) are only beginning points for transition planning (Fowler, Hains, & Rosenkoetter, 1990; Schotts, Rosenkoetter, Streufert, & Rosenkoetter, 1994). If these issues are not fully addressed, the child's success in the next environment may be compromised. A well-executed transition plan ensures continuity of services, prepares the child for the transition, meets legal requirements, and provides collaboration among all participants (National Center for Early Development and Learning, 1998; Wolery, 1989).

The transition process is as individualized as each child and the program from which she/he is currently enrolled or will be entering. The ideal transition is one which is a "carefully planned, outcome-oriented process, initiated by the primary service provider, who establishes and implements a written, multi-agency service plan for each child moving to a new program" (McNulty, 1989, p.159). Wolery (1989) suggested that the transition process should ensure continuity of service, reduce the disruption to the family, prepare the child for the next program placement, and meet legal requirements. Critical to a successful transition is collaboration among professionals and families, sending and receiving teachers, other personnel, and service agencies.

According to Schotts, et al, (1994) successful transitions promote placement decisions that meet individual needs, do not interrupt services, are non-confrontational, provide effective models of advocacy that families can emulate throughout their children's lives, avoid duplication in assessment and goal-planning, and reduce stress for children, families, and service providers. The Tennessee Department of Education (2000) echoed the above, and identified additional "best practices" for transitions, including:

- family concerns and priorities are addressed;
- confidentiality is assured;
- professionals are accepting of parental feelings and allow them to choose their level of involvement;
- all possible options for the child and family in the context of community inclusion are discussed;
- IFSP team mutually determines the transition timeline; and
- families and current program staff visit potential settings.

The Virginia Department of Education and the Infant and Toddler Connection of Virginia (2003) provided information or training for parents on specific topics, such as parent/professional partnerships, families as equal partners, support and involvement of siblings and other family members, and legal rights/advocacy.

An Historical Perspective of Transitions

Early Transition Efforts

According to the literature, the earliest documented discussions concerning transitions for children and families began in the 1970's with Head Start programs that promoted collaboration with elementary schools regarding transitioning their students (Rosenkoetter, Whaley, Hains, & Pierce, 2001). The primary focus was to prepare children for the next environment and choose the program that best matched their skills. Initial work on the transition of children with disabilities from special schools to public kindergartens began most notably in Kansas, Wisconsin, Utah and Washington. Rosenkoetter, et al (1994) mentioned a 1980 publication by Vincent and her colleagues

that was “instrumental in guiding professionals to consider both curricular linkages and procedural collaboration in promoting continuity for children with special needs as they move from preschool to kindergarten” (p.14). Rosenkoetter and her colleagues note that other educators, Vincent, Lange, Fowler, and Huting, drawing from their own experiences with families of children with disabilities, began speaking at national conferences and publishing articles about the challenges of transitions, including efforts to develop what would become transition timelines. Families and service providers responded to these initial presentations at national conferences and state meetings with their own evidence of the serious need for improved transition policies (Rosenkoetter, et al, 2001). Thus, transition rose to the forefront of educational issues in the field of early childhood education as evidenced by future studies and the implementation of policies and laws.

Twenty-five years ago there were neither federal policies related to early childhood transitions with the exception of the requirement to involve parents in program change, nor research to support such policies. During the mid-1980's the U. S. Department of Education's Handicapped Children's Early Education Program funded a number of demonstration projects and subsequent outreach projects to improve transitions to kindergarten for young children with disabilities and their families. The 1986 reauthorization of federal special education legislation (Individuals with Disabilities Education Act or IDEA, formally known as Education of All Handicapped Children Amendments) encouraged states to develop early intervention programs for children from birth to three years of age and their families in Part H (later Part C); formally extended free and appropriate public education (FAPE) down from age 6 to children age 3 to 5 in

Part B, Section 619, of the law P.L. 99-457; and required, as part of the child's Infant Family Service Plan (IFSP), transition planning as mandated (Rosenkoetter, et al, 2001). The 1991 reauthorization of IDEA (P.L. 102-119) expanded requirements for early transitions, such as developing timelines, defining state policies and forming Interagency Coordinating Councils, all in an effort to promote a seamless system of services for children birth to age 6 and prevent gaps in services at age 3 (Rosenkoetter, et al, 2001).

The IDEA Amendments of 1997 (P. L. 105-17) addressed the issues of continuity between programs and the importance of a seamless system of service delivery for infants and young children with disabilities and their families. Requirements for age three transition plans included the designation of a lead agency, documentation of communication with family's LEA 90 days before the child's third birthday, and family involvement in transition (McCormick, 2006).

Current Legislation/Laws

The reauthorization of IDEA, signed into law as P.L. 108-446 (Individuals with Disabilities Education Act of 2004) on December 3, 2004 and effective July 1, 2005, addressed transition as it relates to the new law. Within the IDEA of 2004, a greater emphasis was placed on flexibility to create seamless service systems, and included numerous provisions. The following examples of changes and/or additions (Part C, Section 635, c, [1]), summarized by the National Early Childhood Transition Center (NECTC, 2003) are pertinent and directly relate to parents. If a state's policy provides for it, children with disabilities (age 3 or older) who have participated in Part C services and who are eligible to receive Part B services, may continue to participate in early intervention services. This option, rather than requiring that children be enrolled in

school-based services provided under Section 619, is in effect until the child can or is eligible under state law to enter kindergarten. The state in which I conducted my study did not provide this option. In a personal email, an individual with the state department of education, indicated that

This state did not go with the option of 3-4 year olds staying in Part C. I don't think any state went with that option due to funding not being provided for it.

Children eligible for Part B services must transition to Part B by their third birthday for there to be a continuation of services through the school district and for the child to receive FAPE.

Were such an option to be available within a state, early intervention services for 3- and 4- year-olds would then need to include an educational component promoting school readiness and incorporate pre-literacy, language, and numeracy skills. The families of these children could continue to receive service coordination or case management. Families of 3- and 4- year-old children in such states could decide whether their children would continue to receive services under Part C or participate in preschool programs under Section 619. These parents would receive annual written notification of their rights and responsibilities, including their right to choose Section 619 or early intervention services. In addition, parents would be provided with an explanation of the differences between the services of Part C and Part B, including the types of services and the locations at which the services will be provided, the applicable procedural safeguards, and possible fees to be charged to families.

Further changes or additions to recent legislation, as reported by the National Early Childhood Transition Center (2003), included several other components. If the

state's policy allows this flexibility, families must choose between the two options prior to the child's third birthday. The IFSP will remain in force until a determination of eligibility for special education services occurs. If the statewide system includes a policy of parental choice in this matter, the state must report annually (to the Secretary of Education) the number and percentage of children with disabilities who are eligible for services under Section 619 but whose parents chose for their children to continue to receive early intervention services.

Attention to transitions included in the IDEA reauthorization reinforced the importance of smooth transitions and continuity for young children as they move from early intervention to other services, and is illustrated by the following example. The local educational agency (LEA) will participate in the transition planning conference that is arranged by the designated lead agency. In the case of a child previously served under Part C, an invitation to the initial IEP meeting shall, by parental request, be sent to the Part C service coordinator or other representatives of the Part C system to assist with the smooth transition of services.

Finally, at least two places in the new law underscored the need for collaboration among agencies that may be involved in horizontal transitions (the movement of a child across locations during the same day or within the same week). The state will provide the U. S. Department of Education with a description of its efforts to promote collaboration among Early Head Start programs, early education and child care programs, and services under Part C (Section 637). An effective educational system should “promote transition services and coordinate state and local education, social, health, mental health, and other services, in addressing the full range of student needs,

particularly the needs of children with disabilities who need significant levels of support to participate and learn in school and the community” (part D, Section 650, [4] [C]).

The No Child Left Behind Act of 2001 (Public Law 107-110) emphasized coordination among Head Start, Early Reading First, and other early childhood education programs, and public schools. The focus is on organizing and participating in joint transition-related training for personnel, linking educational services, establishing channels of communication, and (with parental consent) receiving records.

The Individuals with Disabilities Education Act of 2004 and the No Child Left Behind Act of 2001 brought new challenges for educators in providing programs and services for children from birth through school age. IDEA 2004 mentioned the importance of transition frequently in a number of contexts; for example, coordinated planning for children, sources of support for transition costs, training for service providers and families, and technical assistance. Transition planning continues to receive attention and support from schools, agencies, and government.

Introduction to Research Studies of Transitions

Much of the earliest research on transitions gave consideration to differences in settings, from preschools to kindergartens, and emphasized the skills needed by children to perform well in new settings (McCormick & Kawate, 1982). Since the 1990s, transition research has moved beyond the child to a more ecological perspective, including perception of the family as a transition partner with professionals, multi-agency efforts to facilitate transition planning, and the development of inclusionary practices related to transition decisions (Rosenkoetter, et al, 2001).

Several studies, in particular those conducted by the National Center for Early Development and Learning (NCEDL) (2002), and the National Early Childhood Transition Center (NECTC), which is still ongoing, are laying the groundwork for future transition policies and practices. The purpose of the NECTC study, scheduled for completion in 2008, is to enhance the current research base related to successful transition practices for children with disabilities (birth-to-five) and their families, and to disseminate quality practices to the field. The NCEDL study focused solely on transitions from early childhood to kindergarten transitions.

The NECTC study addresses children, families, programs, communities, and state policies and practices. NECTC will accomplish its purpose through five interrelated activities: the identification of current research, models, policies and strategies; conduction of ecological empirical studies of the complex factors influencing transitions, and extension of the research base on effective transition practices that result in positive outcomes for children and families as they relate to school success; the identification of state policies and practices that support the transition process; the identification and comparison of empirically and socially validated practices; and the dissemination of strategies and tools in accessible format to influence policy and practice.

The annual reports from the first four years (2004, 2005, 2006, & 2007) of the NECTC study addressed the following two objectives: to examine factors that promote successful transitions for young children with disabilities and their families, and to investigate and validate the practices and strategies that enhance the transition process and support positive outcomes for children with disabilities. Families and professionals

have been encouraged to submit their individual transition stories by mail or electronically to be included in a database.

As part of the NECTC research projects, Rous and Myers (2006) conducted a series of ten focus groups with administrators, practitioners, and family members to identify effective transition practices for children birth through five years of age. The purposive sample was from a list of conference registrants, and included 38 practitioners and/or administrators or faculty/researchers and ten family members representing eighteen states. Two themes evolved as a result of this study: interagency structures and supports are critical to the transition process, and specific transition practices and activities must be clearly defined and systematically implemented. Strategies that support the first theme include: using a supportive infrastructure to guide the transition process, attending to relationships and communication among agencies, and assuring continuity and alignment between sending and receiving programs. Included in the second theme's strategies are: preparing families and children for the transition, visiting programs, providing instructional activities (e. g., children's mastery of skills for the new setting, and home visits and/or orientations), and identifying community resources that strengthen the relationships between home, school and community.

During the last ten years, NCEDL has undertaken a program of research aimed at helping to understand the nature and significance of the transition to school and how best to work with families, schools, and communities to improve outcomes for children during this period (Pianta, Rimm-Kaufman, & Cox, 1999). As a result of these studies, several seminal publications provide the most current information on trends and practices in early

childhood transitions. These studies are discussed in more depth in the next section of the literature review.

Transition Studies from Early Childhood to Kindergarten

There are a limited number of studies relating directly to the transitions of children birth-to-three, reflecting a gap in the transition research literature. Therefore, I found it necessary to search the literature for transition studies, in general. Preschool (early childhood special education, Head Start, other preschools) to kindergarten studies are prevalent in the literature. Making the transition to formal schooling is of particular importance for children, families, and schools (Love, et al, 1992). Nearly every school in the United States has developed some program or set of practices related to helping ease the transition, although research from the 1990's indicates these practices were primarily cursory and not well-suited to the needs of families (Love, et al, 1992; Pianta, Cox, Taylor, & Early, 1999). Love and his colleagues (1992) reported that approximately 20% of schools, representing 1,103 communities in the United States, have a range of transition activities that meet the needs of children and families for information and personal contact with the school. Twenty percent appears to be a low percentage, indicating a need to enhance transition practices for young children, ones which "are" well-suited to the needs of families, schools, and children.

In 1996, Pianta, et al (1999) used the NECDL Transition Practices Survey, a nationally representative survey of kindergarten teachers, to describe specific practices used by teachers to facilitate the transition to kindergarten and barriers they perceived to additional transition practices. Findings indicated that although 95% of teachers reported some practices to facilitate the transition for children and families, those that would be

most effective (those that reach out, backward in time and that included appropriate intensity, such as home visits prior to the beginning of the school year) occur rarely. Group activities, such as an open house, are the most common, while those involving one-on-one contact prior to the first day of school are uncommon. The vast majority of practices are implemented after school starts and involve minimum contact with individual children and/or families. In urban schools and areas with more poverty and/or a higher concentration of minority students, these practices prior to school are even less prevalent. Other conclusions indicated that communication between teachers and parents is important to successful transitions, and schools should devise and implement transition practices.

The National Center for Early Development and Learning Transition Practices Survey was adapted for a study involving 2,433 public preschool teachers across the country (Rous, McCormick, & Hallam, 2005). The survey included 47 questions that gathered demographic information on schools, teachers, classrooms, and children, along with preschool and kindergarten practices and sources of transition information. Regarding preschool, the survey listed 25 preschool transition practices for which teachers identified their current use. Teachers in the study reported using an average of 12.81 practices or 51.24%. The most common transition practices included: talking with parents and sending letters to parents after school starts, and talking with parents prior to the beginning of school. Less common transition practices were calling the children at home before or after the start of school, and teachers visiting the sending teachers' classrooms. When compared with teachers reported use of kindergarten transition practices in the NECDL study, preschool teachers utilized more practices than

kindergarten teachers. In addition, preschool teachers indicated they had used more practices following the transition than prior to the transition. Teacher use of kindergarten transition practices resulted in an average of 4.68 practices (42.5%). Among the most common transition practices were: children visiting kindergarten classrooms and meeting kindergarten teachers, and information telephoned or sent home regarding kindergarten. A higher use of transition practices was reported by teachers whose preschool classrooms were located in elementary schools. Consistent with the NCEDL results, teachers in rural settings indicated a higher use of transition practices than those in urban areas. Forty-four percent of the teachers had received specialized training in enhancing transition services.

A study of the effects of transition policies and practices on children's academic outcomes (Schulting, Malone, & Dodge, 2005) identified transition practices similar to those found by Rous, McCormick, and Hallam (2005). They also included children and parents making visits to kindergarten before school started, teachers conducting home visits, parents participating in an orientation, preschool children spending time in the kindergarten classroom, and the school day being shortened at the beginning of the school year.

Results of a study by Rimm-Kaufman and Pianta (2000) indicated that children's adjustment in the transition to school relies upon the interactions between and among various persons and contexts (e.g., the family, peers, preschool teachers and preschools, and elementary teachers and schools). These interactions were sources of support to foster early school success, particularly for those who may find transition to school to be a challenge.

Within this framework, the National Center for Early Learning and Development's Kindergarten Transition Project was developed to establish links among persons and settings involved in the transition to kindergarten of children designated as high-risk. LaParo, Kraft-Sayre, and Pianta (2003) followed over 80 high-risk children and families from preschool through kindergarten. Families became involved as their children entered preschool, and were followed through their children's kindergarten year. Teachers and family workers from the preschool and kindergarten were involved in the project also. Family workers employed by the local school district facilitated transition activities. Transition activities encompassed four broad categories: peer connections, community connections, child-school connections, and family-school connections.

For the purposes of my research, only the results concerning family-school connections in the LaParo, et al study are discussed here. Examples of transition activities included parent meetings to discuss transition issues and informal activities to connect families. Teachers and families in the study were interviewed and completed questionnaires concerning their participation in and satisfaction with the activities presented. LaParo and her colleagues found that when offered the opportunity, the vast majority of families participated and thought the activities helpful. Specifically, more than 50% of families reported participating in almost all transition activities offered. Almost 96% of families visited the kindergarten and 38% of the children met the child's specific kindergarten teacher for the next year. The least frequently reported transition activity was attending an orientation to kindergarten, with 31% of families reporting they had this experience. Seventy-four percent of families reported that their work schedule interfered, and less than 20% cited reasons such as lack of transportation and child care,

and choosing not to participate. Fewer than 10% of participants indicated they felt uncomfortable with attending or had health problems that prohibited their participation.

Findings from an earlier study by Hamblin-Wilson and Thurman (1990) that investigated the perceptions of 91 parents regarding the transition process from preschool to special education kindergarten indicated that most parents felt involved (68%). Parents indicated they were satisfied with the transition process, the support and explanations they received, and the importance of preparation for transition. Concerns centered on a lack of information about public school policy, anxiety about working with an unfamiliar agency, and uncertainty about services their children would receive. More educated and better prepared parents tended to feel the most satisfied. Participants believed they received more support from the early intervention providers than the public schools. Parents viewed themselves as involved, yet not necessarily empowered. In another study involving transitions from preschool to kindergarten, Pianta and Kraft-Sayre (1999) found that most parents (two-thirds) viewed their child's transition to kindergarten as generally a smooth transition, and between 6 and 35% indicated some concerns.

Rosenkoetter and Rosenkoetter (1993) asked 592 parents in 33 states questions about transitioning their children from preschool to kindergarten. Among these children were 222 children with disabilities. Generally parents reported a positive view of the transition, but concern was raised by the majority of respondents concerning their children's adjustment to the new environment and the ability to succeed. Both family and child eagerness for the new experience were judged by parents to be greater at age five than at age three. Parents of children with disabilities reported significantly less

child eagerness to enter a new program, and significantly more parental concerns than other parents.

The intent of a collaborative study among university researchers, local preschool teachers and staff, elementary school staff, and 110 families was to improve kindergarten transition interventions (Pianta, Kraft-Sayre, Rimm-Kaufman, Gercke, & Higgins, 2001). Descriptive results from the data indicated that this collaborative effort is characterized by three themes: participants differ in their views of transition practice, parents and teachers in the preschool year share mutually positive views of one another in relation to a range of roles and activities, and preschool staff increasingly are viewed as important and helpful sources of support for parents. Pianta and his colleagues noted that “Narrative impressions from collaborators on the process of conducting this research confirm the importance of a shared mission, communication, and mutual respect, and highlight the value of collaboration for all involved” (p. 117). As indicated earlier in a study by Rimm-Kaufman and Pianta (2000), this approach emphasized forming relationships among contexts and persons and building partnerships. Findings in the Pianta, et al (2001) study demonstrated that mothers hold teachers in high regard, and identify school staff as being supportive over the course of the preschool year. These findings are in accord with findings of researchers who suggest that preschool contacts between schools and families are fairly positive, and accentuate the discontinuity families experience as their children enter kindergarten, when their family-school contacts are less frequent and increasingly negative (Rimm-Kaufman & Pianta, 1999).

A study by Spiegel-McGill, Reed, Konig, and McGowan (1990) provided a series of six transition meetings for families to discuss topics such as placement options, the

effects of transition, legal and educational rights of families, and communication skills.

As a result of attending these discussion meetings, parents reported that the training prepared them for their children's transition, taught them what to expect and how to communicate at meetings, and how to become life-long advocates for their children.

The National Education Goals Panel's (1998) focus on "ready schools" has shifted national attention away from children's readiness for school onto the school's readiness for incoming kindergarteners. Among the ten keys to "ready schools" is the smooth transition between home and school, and continuity between early care and education programs and elementary schools (NECTC Transition Alert, July, 2005). Pianta and Cox (1999) recognized the need for changes in policies regarding transitions, and noted several primary changes. The authors recommended strengthening the bonds between preschools and elementary schools and families and schools, requiring planning teams in localities, and providing high quality kindergarten classroom experiences for children. Similarly, Glicksman and Hills (1981) identified four key elements for successful transitions: ensure program continuity by providing developmentally appropriate curriculum for all age levels in all educational settings, maintain ongoing communication and cooperation between teachers and administrators in different programs, prepare children for these transitions, and involve parents in transition. Glicksman and Hills (1981) indicated further that transition is a process happening over time, not a static event. In each of these studies, parents are identified as key players in the transition process.

In summary, making the transition from preschool to kindergarten is important to everyone involved with children, and studies indicated some degree of satisfaction with

the transition process. Collaboration, communication, and mutual respect are keys in developing and/or improving transitions for children and families. Preschool staff are credited with being the most supportive and helpful individuals to parents, and parents are appreciative of activities designed to prepare them for their children's journey to kindergarten. Recommendations for continuity between preschool and kindergarten settings include establishing stronger bonds, and providing opportunities for planning and involvement by all identified stakeholders.

Transition Studies from Early Intervention to Early Childhood Special Education

According to Hanson (1999), few studies have addressed transition as it relates to very young children, focusing instead on preschool to kindergarten. Hanline (1988) noted that empirical research recording parents' perceptions of the transition process is limited and mostly comprised of survey data. In a review of Handicapped Early Education Programs (HCEEP) funded projects from 1982-1986, Suarez, Hurth, and Prestridge (1988) found that only 16 of 121 projects focused on transition, and only 5 of the 16 projects served infants with special needs. Numerous transition models and demonstration projects have been developed in recent years, and are presented later in the review of the literature. Several qualitative and quantitative studies regarding early intervention to early childhood transitions from the past ten years are presented here.

Hanson, et al (2000) investigated the experiences of families and service providers as they made the transition from Part C to Part B (early intervention to early childhood special education) programs. In this study at four national research sites, 22 families were followed through the transition process from when their children entered until they exited the process. During parent interviews, families were asked about their

child and his/her current services, hopes and expectations for their child and future program, transition information and support they received, and recommendations for improving the transition process. Service providers were interviewed about the nature of their contact with the family during transition, support and information they provided, their perceptions of the transition meeting and process, and future recommendations. With parental permission, researchers observed and recorded field notes of the transition meetings and additional planning meetings, but did not otherwise participate.

The researchers concluded that many families experienced transition as an event or task to be completed, and in some cases, a formality, rather than as a process. From their standpoint, most families considered decisions about services as pre-ordained. Although they were aware a transition was occurring, they lacked specific knowledge of the tasks or components of the process. Families expressed concern over the shift from family-focused to child-centered services. They worried that the team model and support, central to their early intervention setting, might not be carried into the preschool placement. In some instances, information was discussed between families and professionals prior to the transition meeting. For others, the transition meeting was the first time professionals (e. g., service coordinators or receiving program staff) had met. The point generated from this information was the importance of information exchange and communication.

When interviewed, parents often indicated they were given no choices or few placement options were considered. Of the 22 parents in the study, 8 reported that they were responsible primarily for the placement decision, and 14 indicated professionals or school officials made the choice. The availability of service options in the school district appeared to play a major role in the process, such as openings in the classrooms.

Suddenly parents found themselves pondering placements in unfamiliar settings. Those parents coming from non-categorical placements were faced with their children being labeled for the first time. Therefore, the family's ability to participate in decision-making regarding placement was compromised by the parents' lack of prior knowledge of program options or professionals' preferences for their children's placements. However, the sending early interventionists and service coordinators were credited with providing assistance to the families in understanding the system and the laws, gathering information for parents, and making them aware of program options in the community. Parents expressed concerns about their children's readiness and abilities to function in preschool, especially in inclusive placements. Parents felt they needed to "bring the child to the process" so that the focus would be on the child as an individual, and not on other considerations such as logistics.

According to Roberts, Akers, and Behl (1999), families typically need increased service coordination when a child is no longer eligible for Part C services because they must move to another setting at age three. Of the earlier intervention programs surveyed, the researchers indicated that 75% assisted families with enrollment into the new program and 62% sent client reports to the receiving program. Once the child left the program, 41% contacted families periodically for monitoring, and 9% of programs maintained contact with the family's physician. Further results showed that family-centered programs were more likely to incorporate the strategies described in order to smooth the transition process for families. Responses suggested that home visits play a role in assessing the continuity of services for children and families.

Both of these studies supported earlier findings from Hains, Rosenkoetter, and Fowler (1991) in that family concerns during the transition process are heightened by changes in service delivery systems and friendship ties as the child moves from more home-based and family-focused services to more center-based and child-focused services. In addition, the researchers suggested that crucial decisions regarding transitions are often made solely by professionals, possibly adding stress to families. Instead, a thoughtful preparation process is needed, assuring information exchange and active participation among parties involved in transition (Hains, et al, 1991).

As part of a longitudinal qualitative study, the Family Systems Project, Lovett and Haring (2003) examined family perceptions of three major early childhood transitions, one of which was moving from an early intervention setting to preschool. During the study, 30 of the 48 children transitioned from early intervention to preschool. Of the families in this transition, 46% of the parents reported they were comfortable with the transition process, while 43% reported being uncomfortable with the process. The early intervention staff had prepared the families for the move, and they were helpful in setting up meetings with the school. Parents felt they were involved in the IEP planning process, and were provided with decision-making opportunities and alternative choices for preschool services. Finally, families were pleased with their child's placement in the preschool setting. Parents who felt uncomfortable cited the following reasons: feeling abandoned by the early intervention staff, not understanding the process, experiencing communication problems with service providers, not being given choices, not feeling like full participants in the IEP process, and having their children placed in schools that did not serve typically developing children.

Forty-three percent of the families who reported being uncomfortable with the transition felt unprepared and anxious. Some parents had complaints about being abandoned by the early intervention staff upon whom they had previously relied. They indicated lack of communication with service providers and their own inability to understand the process. In addition, they did not feel they were full participants in developing their child's IEP or given choices concerning placement. A majority of parents who were dissatisfied wanted placements in a neighborhood school or in a preschool that served children without disabilities as well as children with disabilities. Notably, two families expressed concern that although their children might be eligible for services when they turned five, they would have regressed during the two years without services. The remaining 10% of parents found their children ineligible for services. Most of these parents were pleased with the early intervention services they had received. Because this study was conducted in one state, it may not generalize to other settings. The researchers reiterated the uniqueness of all families and the importance of gaining insight into each family's exclusive system to more effectively deliver appropriate services.

Hanline (1988) surveyed parents of infants and preschoolers with disabilities concerning their transition into the public schools of San Francisco. Parents stated that a lack of information about services their children received and anxiety about working with unfamiliar agencies were their primary concerns.

The lack of information on parent perceptions of the transition process was identified during the state's self-assessment and prompted the Connecticut State Department of Education (2003) to survey parents. They included parents whose children

had received early intervention services for at least six months, had exited the Connecticut Birth to Three System at age 3, and who were determined eligible for preschool special education by the time of their exit from early intervention. Surveys were mailed to all parents whose children met these criteria eight to ten weeks after the child and family had exited the system. Questions on the survey focused on the following: preparation for leaving the system and entering preschool special education; contact from the school district once the referral was made; conduction of meeting with parent's active participation; school district services provided by child's third birthday; and services provided meeting the child's needs.

The survey was referred to as a "rolling" survey rather than a "point-in-time" survey, as they were mailed from February 2003 to September 2003 to parents whose children had exited the system from November 2002 to June 2003. Over a period of eight months 1,039 surveys were mailed, with a return rate of 35%, representing 71% White, 9% Black, 16% Hispanic/Latino, 3% Asian, and 1% unknown. Responses from parents on the five questions were overwhelmingly positive, ranging from a high of 97.5% to a low of 80%. Table 1 illustrates the results of the survey. Regarding preparation for leaving the Birth to Three System and moving to preschool special education, 97.5 % parents responded positively. Comments from parents praised highly the work of the Birth to Three interventionists. One parent's comment indicated that the school staff were providing the same level of support. Ninety-four percent reported they were contacted by their child's district after a referral was made.

Table 1: Connecticut Department of Education Study

	<u>Yes</u> Responses	<u>No</u> responses	No Answer	“Don’t Know”
Preparation for leaving B-3	355 (97.5%)	6	0	3
Contacted by school district	339 (94%)	17	4	4
Mtg. held with parent, B-3, & school representative	353 (97.5%)	9	0	2
If “yes,” how many days before age	90+: 117/ 33% Less than 90: 97/ 86%		14	20 16 “other”
Parent felt active participant	342 (98%)	6	15	1
School district provided services by 3 rd birthday	285 (80%)	69	8	2
Services provided by school district are meeting child’s needs	281 (81%)	26	18	39

Participants (97.5%) indicated a joint meeting was held with the parent, the interventionist from the Birth to Three program and a member of the school district. Ninety-eight per cent of parents felt they were an active participant in the meeting, noting that their questions were answered, their opinions were valued, and they were encouraged to ask questions. One parent said, “full input and consideration was given to myself and Birth to Three provider regarding services and experiences with my son and everyone listened and made the best efforts to comfort my son” (p. 7). Eleven parents shared frustrations and/or concerns including, “although they listened to what we had to say about our daughter they didn’t seem to take it all seriously,” and “we (parents) felt it was more or less a meeting for paperwork rather than parent input” (p. 7).

According to 81% of parents, the school district provided services that were meeting their child’s needs by his/her third birthday, and these services were meeting the child’s needs. Comments ranged from being very satisfied, to concerns about not enough services or support, while some felt it was too soon to tell. The final sentence in the report is worth repeating here: “Parents also used this as an opportunity to recognize and acknowledge those who were helpful and supportive in both the Connecticut Birth to Three System as well as the preschool special education program provided by their child’s school district” (p. 9).

Five hundred thirty-nine families completed a survey regarding their perceptions of early intervention services in a study conducted by McWilliam, Lang, Vandivere, Angell, Collins, and Underdown (1995). Overall, 94% of the families were generally pleased with the quality of early intervention services, and much of the satisfaction was the result of personal support provided by individual professionals.

Evidence found in the literature supports the need for effective transition practices for young children. Collaboration among parents, public schools and early intervention programs is critical if children are to be provided the most appropriate educational services to meet their needs. The literature provides several transition models that have been utilized effectively toward providing seamless transitions from program to program.

Transition Models and Demonstration Projects

In recent years, much attention has been placed on the transition of children from early intervention and early childhood programs to public schools, as evidenced by research studies and models or demonstration projects. This section of the literature review provides an overview of notable projects and models that were designed to improve the overall transition process for families, children, programs and service providers.

Some early collaborative efforts between Head Start and the public schools were funded in the 1970's, and included programs such as Follow Through and Head Start Planned Variation. The former program was designed to continue support to children as they entered school, and the latter was designed to encourage centers to experiment with different curricular models to better meet the needs of children and the community (Kagan & Neuman, 1998). In 1974, Project Developmental Continuity was initiated to link Head Start and other child development programs with the public schools. The program addressed several domains of transition including administrative coordination, parent involvement, and services for handicapped, multicultural and bilingual children (Kagan & Neuman, 1998).

In the mid-1980's, the Head Start Transition Project staff implemented innovative transition models within fifteen of their programs. Transition efforts were positive and results also identified effective strategies for easing transitions. Some of these strategies included: mandates for transition and ongoing activities, visits to kindergarten by Head Start children, parent training and support groups, and summer book lists and calendars to help parents ease their children's transitions (Hubbell, Plantz, Condelli, & Barrett, 1987).

Conn-Powers, Ross-Allen, and Holburn (1990) presented a model for planning transitions for children from early childhood special education to kindergarten and elementary school mainstream settings. The TEEM (Transitioning into the Elementary Education Mainstream) model enabled parents and staff to plan transitions collaboratively and insured the individual needs and strengths of children, families, and school programs were considered. This model promoted best practices in transition planning, and provided a case study to illustrate a school district's application of the model in developing a system-wide transition process. More specifically, guidelines included: collaborative planning, supports and strategies for families as active participants, preparation of the child for the next environment as well as preparing the program for the child, and post-placement follow-up.

The U. S. Department of Education Handicapped Children's Early Education Program (HCEEP) funded numerous projects, one of which was the Preschool Preparation and Transition Project (PPT) at the University of Hawaii (1986-1989). The major goal of the PPT model was to support families and young children with special needs in the transition from infant programs to least restrictive preschool placements. The model addressed this goal through three components: child change to prepare the

child to be successful, program change to realign the service delivery efforts toward smooth transitions, and societal change to prepare the community to accept and support effective transition processes and placement in integrated placements when appropriate (Noonan & Ratokalau, 1991). A similar project, Family and Child Transitions into Least Restrictive Environments (FACT/LRE), addressed the process of transition planning for families and children and provided a step-by-step guide for parents (Chandler, Fowler, Hadden, & Stahurski, 1995).

Sequenced Transition to Education in Public Schools (STEPS), a model demonstration project in Lexington, Kentucky from 1984-1987 that expanded to the national level in the mid 1990's, was designed to assist communities in building a system to facilitate the transition of children from one agency or program to another (Rous, Hemmeter, & Schuster, 1999). Based on an evaluation of the project, project personnel recognized that several key issues relate to transitions. First of all, transition takes time, and participants must have adequate training and materials to facilitate systems development. In addition, participants must determine what areas of change need to occur. Finally, sample policies and procedures help agencies develop systems without "reinventing the wheel." This project was the first investigation of systems change as it relates to early childhood transitions. It established links between training and technical assistance and the development of formalized policies and procedures within community agencies (i. e., systems change within the area of transition) (Rous, et al, 1999).

Designed to help families, administrators, and service providers facilitate transitions for young children as they moved between services, The Bridging Early Services Transition (BEST) Project Outreach personnel worked with state leaders and

local service systems in 17 states to develop state and local transition services (Rosenkoetter & Schotts, 1994). The project included formats for needs assessments, interagency agreements, transition timelines, and evaluation of transition procedures. This particular project focused on transitions from infant-toddler through kindergarten and addressed Head Start and other programs considered less restrictive placements.

Another model, Supported Transition to Integrated Preschools (STIP), was aimed at enhancing communication between service providers in both sending and receiving programs. Collaboration, in terms of sharing resources and expertise, formed the basis of the model. The staff provided support to parents as they established trusting relationships with the new (receiving) program while relying less on professionals from the infant (sending) program (Hanline, 1987).

The National Head Start/Public School Early Childhood Transition Demonstration Project was launched in 1990 to foster collaboration between Head Start and local education agencies, and to enhance early public school transition of former Head Start children and their families by extending Head Start-like supports through the first four years of elementary school. Transition became a multiyear process to facilitate linkages among children, families, schools, and communities. Local programs were encouraged to develop their own transition programs to meet their individual needs and resources (Ramey & Ramey, 1992). Key features included parent involvement and social support, health and nutrition, and close collaboration between schools and Head Start. Findings indicated that local programs vary in their success in implementing services (Ramey, Ramey, Phillips, Lanzi, Brezaussek, Katholi, Snyder, & Lawrence, 2000). Qualitative data have been gathered, and researchers (Ramey, et al, 2000) identified facilitators of

successful implementation of demonstration efforts, including: shared vision; strong local partnerships and governing boards; highly committed, competent and respected leadership; strong and individualized supports for school personnel; and an appreciation for and patience with the developmental process of implementation (Head Start Bureau, 1996; Ramey, et al, 2000).

Some barriers identified included establishing and maintaining partnerships and helping schools and communities develop more family-focused environments and more collaborative networks of service providers, respectively (Head Start Bureau, 1996). Because programs differ, a barrier to one site may be a success to another (i.e., partnerships). Preliminary findings suggested that the majority of children and families made positive early adjustments to school and demonstrated high commitment to the goals of education, even though they may differ in their strengths, resources, and needs (Head Start Bureau, 1996).

Many state departments of education and child-related organizations have developed their own publications for parents, schools, and other service providers to assist them in developing transition policies and procedures to meet their particular needs. These are readily available on individual state or organization websites or by searching the internet.

Evidenced-based Practices in Transitions

Although the term “evidence-based practice” traditionally has been used in medicine, social services, and mental health, it has become more prevalent in the education field in recent years. Experts in early childhood have not reached consensus on the definition of evidence-based practice; however, most would agree in principle that

professionals in early childhood should rely on evidence for important decision making about services and supports for young children and their families (Buysse, Wesley, Snyder, & Winton, 2006). Buysse and her colleagues proposed the following definition of evidence-based practice: “a decision-making process that integrates the best available research evidence with family and professional wisdom and values” (p. 3). They viewed evidence-based practice as “a way of empowering professionals and families to integrate various sources of knowledge to make informed decisions that directly benefit young children and families” (p. 3).

Dunst, Trivette, and Cutspec (2002) offered another definition: “practices that are informed by research in which the characteristics and consequences of environmental variables are empirically established and the relationship directly informs what a practitioner can do to produce a desired outcome” (p. 1). They further indicated that evidence-based practice refers to the use of interventions, strategies, and supports that researchers have documented as effective. Finally, Strain and Dunlap (n.d.) referred to the use of interventions, strategies, and supports whose effectiveness has been documented by research practices as evidence-based. They also include practices demonstrated as effective within multiple research studies.

As illustrated in the literature on early intervention and early childhood, the terms, “recommended,” “best,” “researched based,” “scientifically based,” and “empirically based” are terms related to evidence-based practice, and are often used interchangeably. Rous, McCormick, and Hallam (2006) differentiated “recommended” from “scientifically-based” practices as a set of practices designed to inform decisions about services, and those practices validated by research, respectively. Evidence-based

practices include the best available resources, professional wisdom and experience, and consumer values. Throughout the literature, and documented by research studies and/or consistent utilization by agencies and school divisions, various guides and programs are available to assist parents, schools, agencies, and communities in developing transition plans and activities best suited to the individuals they serve. The above-mentioned resources and others are utilized in the development of a table of evidence-based practices which appears at the end of this section.

Because helping children and families make smooth transitions involves careful planning and consideration of transition practices appropriate to the needs of everyone involved, transition planning can neither be handled in a matter-of-fact manner, nor based on the assumption that all children will transition exactly the same. Each child and circumstance is different, and each transition plan should reflect that child's unique needs. Some generalizations that can be made for all transitions are discussed in the next section.

Pianta and Kraft-Sayre (2003) focused primarily on kindergarten transitions, but their comments can be applied to the transition between early intervention and early childhood special education programs. For example, children face many discontinuities when they move to a new program, such as a substantial shift in culture and expectations. More academic demands and social expectations, less individual time with teachers due to class size, and additional transitions throughout the school day are but a few examples that children and families may experience. Children must adjust to programs in which they may not be the focus of attention every minute or one in which they must complete tasks independently. Parents, too, realize differences in the program setting for their

child and the role they now assume in their child's education. When families leave a program where services were delivered weekly in their homes and enter an early childhood program where the children are away from parents, the adjustment can be considerable for both the children and their families. Children must learn to share toys and teacher time, ride a school bus, and adapt to a structured schedule. Parents may feel less a part of their child's education or uncertain of their new role as preschool parents. Transition is not easy, but it is inevitable.

To assist in transition planning, Pianta and Kraft-Sayre (2003) provided some generalizations concerning transitions that may be applicable to the majority of transitions for young children birth to five. They considered transitions as multi-faceted, varying greatly from setting to setting, and dependent on the perceptions of parents and teachers and their beliefs regarding the factors important to helping children adjust to their new environments. In essence, transitions can be complicated and require planning and commitment in order to be successful. Pianta and Kraft-Sayre summarized, "Fundamentally, transition is a process that involves four facets: ready schools, community participation and support, family knowledge and involvement, and preschools and child care settings committed to preparing children" (p. 9).

It is important to reiterate that transition *is* a process and does include all of the above mentioned aspects. Although each transition and subsequent program is individualized, personnel must be prepared to receive children, parents must become a part of the transition, and the child's adjustment to a new setting is critical to his success in that program. Community participation and support is a lofty and achievable goal, but requires considerable commitment.

According to LaMontagne, Russell, and Janson (1998), successful transitions are not accidents, but well-planned and thoughtful actions that are designed to accomplish specific outcomes. They referred to a transition plan as a roadmap to guide stakeholders through the transition process. Finally, they considered transitions ongoing and future focused, indicating the need for evaluation of the transition process to measure its success and adjust accordingly. Rosenkoetter, Hains, and Fowler (1994) emphasized an evaluation component, as well as shared information, trust, communication, and the empowerment of parents as advocates for their children.

In essence, transition planning must be carefully tailored to the uniqueness of the child, family, and other stakeholders, and must be continuous and evaluative. The “one size fits all” model does not apply here (Kraft-Sayre & Pianta, 2003). Table 2 provides a summary of transition practices found in the literature which represent recommended, best, and evidence-based practices in the field.

Conceptual Framework

One of the key features of successful transition planning is the development or adaptation of a conceptual framework (Rous, et al, 2006; Pianta & Kraft-Sayre, 2003). When school divisions, communities, or others are determining their procedures for a transition plan, it is recommended they consider these frameworks as a beginning point. Below are two examples of conceptual frameworks, as well as an overview of Bronfenbrenner’s ecology of human development.

Table 2: Evidence-based Practices

Evidence-based Practices	Resources
<u>General: All parties involved in transition</u>	
All stakeholders must share responsibility for creating successful transitions in the lives of young children.	Wolery,1989; Kagan & Neuman,1998; Pianta & Kraft-Sayre, 2003; and Rous & Hallam, 2006
Transitions do not occur in isolation. Successful transitions are well-planned, manageable, thoughtful actions designed to accomplish specific outcomes; they serve as a roadmap to guide stakeholders through the process, and serve as a bridge between programs.	LaMontagne, Russell, & Janson,1998; Dockett & Perry, 2001; Rous, McCormick, & Hallam, 2006; Pianta & Kraft-Sayre, 2003
Transition is not an event, but an ongoing process; transitions are future-focused. Individuals must abandon belief that transitions occur at only certain times of year. Vision drives the system. Differentiate between “orientation to school” and “transition to school.”	Will,1984; Hanson, Beckman, Horn, Marguart, Sandall, Greig, et al, 2000; Reiss, 1994; Rosenkoetter, Hains, & Fowler,1994; Rous & Hallam, 2006
The best and most successful transition planning and implementation efforts are those owned by the community, schools, and families. Linked together by positive, mutual efforts, trust, and respect.	Pianta & Kraft-Sayre, 2003; Ramey & Ramey, 2000; McCormick, L., 2006
Transition practices occur at different levels: child, families, programs, community, and state. Formal mechanisms are needed for ongoing communication, collaboration, partnerships and relationships.	Rous, et al, 2006; LaMontagne, et al, 1998
Key feature of successful transition planning is beginning early, developing or adapting a conceptual model, making informed choices, and monitoring and evaluating data to validate efforts.	Bruder & Chandler, 1996; Pianta & Kraft-Sayre, 2003; Rous, Hallam, & McCormick, 2005; Hanson, et al, 2000; Odom & McLean, 1996
Process is characterized by complexity: relationships between agencies, setting, communication, service delivery, involvement, and child’s disability.	Rous, Hallam, Harbin, McCormick, & Jung, 2005

Table 2, cont.

Evidence-based Practices	Resources
Specific transition practices and activities must be clearly defined and systematically implemented. These include: preparation of families and children (meetings, sharing information, and workshops); program visitation (family visits program, child visits receiving program, staff visits between sending/receiving programs); instructional activities (support child's preparation, and activities for families—visits, orientation, written material); and communication support (resources).	Rous & Myers, 2006; Hanson, et al, 2000; Lovett & Haring, 2003
<u>For parents/families:</u>	
Professionals suggest bringing the child to the process. Learn about the child as an individual. Transitions should be based on child and family readiness, not administrative convenience. Transition points are mutually planned, implemented, and re-evaluated with the family. No hidden agendas should exist which could be barriers later.	Hanson, et al, 2000; Fowler & Ostrosky, 1994; Kraft-Sayre & Pianta, 1999; LaMontagne, et al, 1998; Bruder & Chandler, 1996
Effective communication between families and schools is considered the foundation of all family involvement programs. Interagency collaboration is the cornerstone.	Christenson, 1999; Hanline, 1988
A variety of strategies should be offered to families, and tailored to meet their individual needs rather than implementing a “one size fits all” approach. Consider family strengths, priorities, and expectations when planning.	Pianta & Kraft-Sayre, 2003;

Table 2, cont.

Evidence-based Practices	Resources
Sensitivity to the needs and fears of the family can minimize stress; careful initial planning, adequate information for families, and continued collaboration can avoid disruption and duplication of services, and promote continuity.	McCormick, L., 2006; Pianta & Kraft-Sayre, 2003; Spiegel-McGill, et al, 1990
Interagency structures and supports are critical to the transition process. These include: a supportive infrastructure to guide the process (written materials and forms, timelines, agreements and policies, dedicated personnel and supportive administration); attention to relationships and communication between/among agencies (meetings, dialogue, training); continuity and alignment.	Rous & Myers, 2006; Sandall, Smith, McLean, & Ramsey, 2002
<u>For service providers/professionals:</u>	
Professionals should learn from families; join the family in their view of the child and respond empathetically.	Newcomb & Brown, 1996
Professionals should consider the skills and coping mechanisms needed by parents.	Hanline, 1998
Professionals should understand that the reactions of families to transitions (for parents of a child with a disability) require a general understanding of changes that occur for families during the life span. Transition is more than a concept; they are real events that affect every aspect of their lives.	Newcomb & Brown, 1996; LaMontagne, et al, 1998
Professionals should provide opportunities for families to practice new skills. Researchers suggest that families involved in school and education make a difference.	Ramey & Ramey, 2001; Pianta, Cox, & Early, 1999; Lovett & Haring, 2003

Table 2, cont.

Evidence-based Practices	Resources
Professionals should seek feedback from those families who have experienced transitions. Successful transitions depend on the extent to which child and family needs are met.	Rosenkoetter, et al, 1994
Professionals should be reliable, consistent and accessible; anticipate anxiety; interpret unfamiliar language; be supportive, non-judgmental, and factual.	Lovett & Haring, 2003
Professionals should support and empower families to advocate for their children. Through partnerships parents will gain skills for future transitions.	Hanline, 1988; Rosenkoetter, et al, 1994; Spiegel-McGill, et al, 1990; Pianta, Cox, Taylor, & Early, 1999
Professionals should communicate with peers, visit other classrooms, and meet to connect (continuity/congruence) curriculum and expectations. The goal is to prepare the school for the child.	Ramey & Ramey, 2001; Pianta, et al, 1999; Hanline, 1988; National Education Goals, 1998
Professionals should consider that families might help schools by providing information to programs, helping the child adjust to change and learn skills required for new environment.	Spiegel-McGill, et al, 1990
Professionals should recognize the family as the child's first and most important source of continuity. Families do not always accept that the child has a disability and needs services.	Fowler & Ostrosky, 1994; Rous, et al, 2006
Professionals should not make assumptions as to the levels of involvement for families in transition—the goal is for all to feel welcome.	Hanline, 1988

Bronfenbrenner (1979) referred to a conceptual framework in other terms—a transition systems approach. Bronfenbrenner viewed the transition systems approach as encompassing microsystems, mesosystems, exosystems, and macrosystems, and the interconnections and interdependence between and among them as vital for successful transitions. The microsystem is “a pattern of activities, roles, and interpersonal relations experienced by the developing person in a given setting with particular physical and material characteristics” (p. 22). A child is a member of his immediate family and lives in a home with parents and siblings. A mesosystem comprises the interrelationship of two or more settings in which the child is involved and directly participates, such as the home and school or neighborhood. An exosystem includes one or more settings, but the child is not an active participant in the process. He is, however, affected by events that occur within the setting(s). Bronfenbrenner’s definition of the macrosystem refers to:

consistencies, in the form and content of lower-order systems
(micro-, meso-, and exo-) that exist, or could exist, at the level
of the subculture or the culture as a whole, along with any belief
systems or ideology underlying such consistencies.

A child can be part of a specific culture or religion and share or contrast beliefs with others.

According to Bronfenbrenner, an ecological transition occurs “whenever a person’s position in the ecological environment is altered as a result of a change in role, setting, or both” (p. 26). A parent facing her child’s transition is a major example of an ecological transition. Two conceptual frameworks are presented as a starting point for this parent, school division, and community.

The Developmental Model of Transition (Pianta & Kraft-Sayre, 2003) is based on earlier models of Pianta and his colleagues considering a child's transition into kindergarten. This model is described as developmental because it emphasizes change and development over time. Child, family, school, peer, and the community are interconnected and interdependent with one another throughout the transition process. When transition practices foster positive relationships, the child is supported in his adjustment to school. According to the authors,

The developmental model of transition results in transition plans that help schools reach out to families before school starts, help communities foster links between preschools and kindergartens, and promote personal connections before the first day of school (p. 9).

Five guiding principles form the core elements of Pianta and Cox's model: foster relationships as resources, promote continuity from preschool to kindergarten, focus on family strengths, tailor practices to individual needs, and form collaborative relationships.

Rous, Hallam, Harbin, McCormick, & Jung (2005) developed a conceptual model to describe how complex interactions of multiple systems interact to influence the transition process. Their theoretical framework is based on biological theory and organizational theory and the model is based on the premise that the ultimate goal of a successful transition process is the child's success in the next environment. Based on Bronfenbrenner's (1986) ecological model, this model delineates specific elements within the ecological context that are proposed to influence transition experiences. The second level provides specific information on the transition process, defined as the interaction among critical variables, transition practices and activities, and outcomes related to the

child and family preparation and adjustment. The critical variables include: communication and relationships, supportive infrastructure, and alignment of programs and continuity of the service delivery system.

Considering the models described above and the summary of evidence-based practices presented in Table 2, a school, agency, or community has a point from which to begin transition planning. Any model or conceptual framework cannot be utilized without adaptation based on the children and families served in a given setting. Finding the approach most suited is a challenge, but it is worth the extra effort if the outcome is an effective transition for everyone involved.

Chapter III: Methodology

Introduction

Our personal construction of knowledge is based upon our own experiences and understanding, and it differs from others, even in the same context. Knowledge is constructed on an individual basis and is exclusive to each individual person, although another may have shared the same experience (e. g., transition). Through interviews and focus groups I was able to listen to each parent's experience with transitions. When designing this or any study, the researcher must recognize that consideration of the participant is the most important aspect of the study. The participant is the ultimate gatekeeper (Hatch, 2002). This study concerned the lived experiences of real people in real settings. As a researcher I need to look at the perspective of others, not my own. I must be certain my purpose is clear, that no harm will come to my participants, and that I tell their stories accurately and completely.

Because the purpose of my study was to understand parents' perceptions of their experiences as they participated in transitions for their children, I sought to understand the following: what the experience meant to them as individuals and as parents, and how they might use that and other experiences in future transitions. Interviewing parents presented me with specific details of the individual's perspective in his or her own words, thus providing a picture of the situation. It was my intention to capture the experience only a parent of a child with a disability might possess. Both interviews with parents and focus groups were utilized in this study. Using guiding questions during interviews and focus groups, I probed further without having intended specific responses from my participants. A key feature of the interview in qualitative research is the nature of the

relationship between the interviewer and interviewee. This relationship is part of the research process rather than a distraction, and the person being interviewed is seen as a 'participant' in the research. She or he actively shapes the course of the interview as opposed to passively responding to pre-set questions (King, 2004). Guiding questions, as opposed to pre-set questions, serve to help the interviewer remain on task and facilitate the flow of the interview. Pre-set questions are meant to be asked directly of all participants and may or may not have expected answers.

According to Brotherson and Goldstein (1992), the world constitutes multiple realities that interact and play off one another, and focus groups are expressly designed to elicit these multiple perspectives. Focus groups are suited to inform or assess educational policy and practice. They permit researchers to examine how persons delivering and receiving services have responded to early childhood special education programs, particularly what they identify as the conditions and variables essential to best practices in the field (Brotherson & Goldstein, 1992). Focus groups, then, are an effective means of obtaining a parent's experience with regard to transitions. Through focus groups, parents construct new knowledge by sharing their own experiences and listening to the experiences of others. Knowledge is co-constructed as individuals interact with one another in a social setting and are able to engage in sharing and thinking together, respecting and considering the viewpoints of others and broadening their own perspective. The diversity of the participants' experiences result in a better understanding of the experiences of others, as well as an opportunity to share their individual and collective voices.

The methodology I used for this study included interviews and focus groups in naturalistic settings, including the participants' homes for interviews and familiar places within the community for focus groups. Those who conduct qualitative research use interviews to explore their participants' experiences and interpretations (Spradley, 1979, Hatch, 2002). As a researcher, Spradley seeks to understand the world from the participant's point of view: "...I want to know what you know in the way you know it...I want to walk in your shoes, to feel things as you feel them, ..." (p. 34). These life experiences are highly personal. Individuals must believe they can trust others with the information they share. Focus groups capture the dynamics of the group's interaction as they concentrate on a specific topic in which all persons have had first-hand experience (Morgan, 1997). Audio taping focus groups and interviews increased the accuracy of the study. Direct, face-to-face contact provided an opportunity for me to establish a setting, attitude, and impression of hearing the voice of the individual.

Based on the research questions and a review of other sources, such as previous studies and other professional references, I developed an interview guide. In addition, comments from parents who participated in a pilot study during spring of 2002 were used in the preparation of the interview questions. Then I utilized results of this pilot as a learning tool in the final research design for this study.

My study was designed to capture, via audio taped interviews and focus groups, the experiences of parents who have participated in the transitions of their children when they exited an early intervention program and were enrolled in an early childhood special education class. Through an analysis of the data, I derived common themes among the participants and presented the findings in this detailed report. It was my intent to

contribute to the field of early childhood by sharing the voice of parents in this important aspect of their children's lives.

Context of the Study

The research study took place in a southeastern coastal state, encompassing a large rural geographic area with numerous county school divisions and one early intervention program. Although farming, fishing, and tourism are the most prevalent occupations in the counties, many persons are employed in local government and public schools or seek employment in larger towns and cities. In addition, the numerous rivers and bays attract retirees, adding significantly to the revenue of the counties. While the population is sparse in most counties, several are among the fastest growing in the state. Many families have been in the area since the 1600's, allowing for a strong Caucasian, African-American, and Native American heritage.

Participants in the Study

The following paragraphs describe the selection of and access to participants for my study, as well as demographic information to familiarize the reader with the participants as individuals.

Selection of Participants

Parents or guardians of children enrolled in an early intervention program in a southeastern state and transitioned to early childhood special education settings (among three school divisions and a regional program served by the early intervention program) within the school years 2001 and 2005 were eligible for participation in this research study.

The projected number of participants in the study was thirty parents, approximately seven per school division. Because the study was limited to participants whose children had attended an early intervention program, I was unable to secure thirty participants from these three school divisions. Some children had been referred directly to the school division by physicians or Child Find because of their age, and were ineligible for participation. Therefore, it was necessary to enlist the assistance of the regional early childhood special education program coordinator to recruit additional participants. After receiving a letter of permission from the director of the regional program and meeting with each of the five teachers, parent letters were sent home with the children or presented to the parents by the teachers during home visits. I contacted prospective participants by telephone, explained the study in detail, and set up appointments for interviews. As a result, I was able to secure thirty participants for my study.

Access and Entry: The early intervention program used in this study serves a large geographic area and twelve local education agencies. To reduce the geographic spread, the initial participants were selected from three adjacent school divisions. Initially I met with the director of the early intervention program to explain the proposed study and obtained a list of contact persons within the three school divisions. Following this meeting, I arranged an appointment with the director of special education within each school division to discuss the study and review the human subjects consent form, an introductory letter to participants, and a form to return to the child's teacher indicating the parent's interest in participating in the study. During this meeting I provided each administrator with copies of the forms and letter and an offer to provide periodic updates

during the study. Following the receipt of letters of permission (from directors of special education and, in some cases, superintendents or assistant superintendents representing school boards) to conduct the study within the school division, I sent a letter to each elementary principal within the three school divisions. In this letter I introduced myself, presented a brief summary of my intended study and requested a letter of permission to conduct the study within individual schools. In addition, I asked to meet each principal to introduce myself personally and further explain my study. During the summer months prior to the study I met with and obtained letters from each of the six elementary principals in two school divisions. Although permission had been obtained previously, the newly hired superintendent in the third school division declined participation in the study due to division research policy.

As a result of the absence of a third school division, I contacted the director of the early intervention program for a recommendation of another school division to invite to participate in the study. Following meetings with the director of special education and the elementary principal, I secured letters of permission for this district's participation in the study.

During the second week of the new school year I sent a letter to each of the early childhood special education teachers via the directors of special education. In this letter I introduced myself and my study and sought their assistance in securing parent participation. Also included was a copy of the letter to parents, the form indicating interest in the study, and the consent form. They were asked to send the parent letter and subsequent form home with the children in their classes at the beginning of the second month of school, or discuss participation in the study with parents during the initial home

visit or parent-teacher conference. The consent form was provided to the teachers for information purposes only, as I would secure parent permission after explaining the study in detail and prior to the interview. During the third week of school I visited each of the seven teachers to introduce myself and answer any questions prior to my beginning the study. Following the responses collected from the teachers, I compiled a list of potential participants and contacted each individual on the list by telephone to describe the study in detail, including his or her expectations as a participant. If the parent agreed to participate, I scheduled an interview at his or her convenience and preferred location.

Participant Descriptions: Participants in this study ranged in age from the early twenties to late fifties, with most participants (22) falling within the 20-29 and 40-49 age range. I asked each participant to choose a name she or he wished to be called during the interview and focus group. This name served as a pseudonym for all references to this person in the study. I interviewed four grandparents who were serving as legal guardians of their grandchildren. One foster parent participated in the study, and three parents had children who had attended at least two early childhood special education programs due to changing residences. Of the 30 individuals interviewed, 6 were male and 24 female.

African Americans represented 20% of the participants. Although a spouse of one of the participants was Hispanic, no persons of Hispanic descent participated in the study.

Nearly 30% of the participants had earned an associate or bachelor degree, one participant was working toward a masters degree, and one a doctoral degree. Another 20% had completed a few years of college and several were pursuing associate degrees. Forty percent of those interviewed were not employed outside the home and included retirees, students, and two parents who operated day care centers within their homes.

Several participants worked in the medical field while pursuing additional degrees and two were substitute teachers. Others were employed in government-related positions, retail and food services, and the construction or fishing industry.

Table 3 summarizes the demographic data of the participants.

Focus Group Participants: The first two focus groups included two parents each, and the third focus group included seven parents I had interviewed. Two spouses of parents I had interviewed also attended the third focus group, totaling nine parents in attendance. Of the thirty parents I interviewed, thirteen participated in focus groups.

Data Collection

Data from my thirty participants were obtained primarily through one semi-structured interview per participant, and subsequent focus groups at which a portion of the participants attended as described above. I contacted the prospective participants by telephone to arrange the interview and answer any questions concerning the study. Prior to the beginning of each interview the participant signed a consent form, of which I retained the original and gave the individual a copy. The initial interview was scheduled for ninety minutes and included about a fifteen minute timeframe to become acquainted with each other and the interview process, and possibly to meet family members, including the child. In some cases, I interviewed both parents. However, no others were a part of the interview. With permission of the participants, all interviews were audio taped to assure accuracy in transcripts. To begin the interview I asked the parent(s) an open-ended question, "Tell me about your child." This established my interest in learning about the child as well as served as an attempt to ease the parent into the

Table 3 Participants in the Study

Name	Age	Race	Gender	Education	Child's age/gender	School division	Grandparent
Sally **	58	Caucasian	Female	B. S.	3/female	1	X
Lee **	25	Caucasian	Female	A.A.	5/female	1	
Sissy	50	African-American	Female	High school	4.8/female	3	X
Susan	22	African-American	Female	High school	4.4/male	1	
Annette	26	Caucasian	Female	High school	3/male	3	
Pedro	26	Caucasian	Male	High school	3/male	3	
Ruth **	31	Caucasian	Female	A.A.	4/female	3	
Rebecca	44	Caucasian	Female	10 th grade	4/male	3	X
Carolyn	36	Caucasian	Female	High school	3/male	3	
Bob	22	Caucasian	Male	High school	2.10/male	3	
Alexis	23	Caucasian	Female	High school	2.10/male	3	
Samantha**	24	Caucasian	Female	Working on A.A.	3.9/female	3	
Lori **	29	Caucasian	Female	B. S.	2.8/male	3	
Elizabeth**	41	Caucasian	Female	Working on PhD	3/male	3	
Jasmine **	24	African-American	Female	Working on A. A.	3/male; 3/male	2	
Dale **	49	Caucasian	Female	High school	3/male; 2.7male	2	X
Randy	33	Caucasian	Male	MBA	2.6/male	2	
Yasmine	25	Caucasian	Female	High school	3.10/female	4	
Linda	44	African-American	Female	A. A.	4/male	4	

Table 3, cont.

Name	Age	Race	Gender	Education	Child's age/gender	School division	Grandparent
Kathy **	41	Caucasian	Female	High school	5/male	3	
Fred	42	Caucasian	Male	A. A.	5/male	3	
Terri	33	Caucasian	Female	High school	2.5/male	4	
Trina	37	African-American	Female	3 rd year of college	2.5/male	4	
John **	42	Caucasian	Male	High school	5/female	3	
Judi	41	Caucasian	Female	A. A.	5/female	3	
Raoul **	39	Caucasian	Male	B. S.	5/female	3	
Marie	27	Caucasian	Female	11 th grade	5/female	3	
Beth	22	Caucasian	Female	9 th grade	2/female	3	
Joyce	42	Caucasian	Female	High school	5/male	3	
Nicole	25	Caucasian	Female	8 th grade	3/male	4	

**Indicates participation in focus groups

interview. I informed the parent(s) I would be taking notes during the interview as a reminder of a question to ask, clarify a point or probe further, and also using guiding questions where additional information would be helpful, or if the parent(s)' responses warranted clarification. At the end of the interview session, I reminded the parent(s) of the focus group arrangements. The interviews were transcribed as soon as feasible by the researcher and another individual who signed a pledge of confidentiality. Each audiotape was reviewed by the researcher, the transcriber, and another professional (unrelated to the study) for accuracy and control of possible bias on the part of the researcher.

Focus groups were conducted during the day at elementary schools within two school divisions, and the third focus group took place in the evening at a local library. The focus groups were audio taped, and I served as the moderator for each of the sessions. During the initial two sessions children were in school and no babysitting arrangements were needed. For the third focus group, babysitting was provided and children were treated to dinner at a restaurant adjacent to the library. Each focus group agenda allowed for 60 minutes, with an extension to 90 minutes if participants agreed the extended time was needed. Only the third focus group utilized the ninety-minute timeframe. At the beginning of each focus group, I included a brief overview of the study, facilitated introductions of the participants, and by utilizing guiding questions, encouraged participants to share experiences of their children's transitions. Following each focus group, the audiotapes were transcribed verbatim and reviewed several times to gain clarity and understanding. In addition, both individuals unrelated to the study reviewed the transcripts.

Upon recommendation of the directors of the early intervention program and the regional early childhood special education program, I did not attempt to schedule a focus group in the area they served. Due to the extensive geographic area, it would have been necessary for some parents to travel a considerable distance for a focus group. Both directors indicated it was highly probable that a meeting place equidistant for participants would not be feasible. In the past, their agencies had attempted family gatherings and parent workshops, and were unsuccessful in securing parent participation

Data Analysis Procedures

Data analysis is an on-going and systematic procedure. Hatch (2002) described it as asking questions of the data that requires a careful analysis of the information the participants are sharing. I began my analysis by looking at the data immediately following the interviews and focus groups, including notes in my research journal and comments I had entered in each parent's folder. In addition, I maintained a contact log/calendar of meetings, schedules and interviews to assist with time management.

Typological analysis, as described by Hatch (2002), was utilized to process data. This analysis method was selected because it lends itself best to the type of data collection used--interviews and focus groups. Initially I read through the transcriptions several times for clarity, quality of recording, and to determine preliminary categories. In addition, I reviewed my research and guiding questions to make certain I had answered the questions I had intended. I identified general initial typologies, such as positive and negative aspects of the early intervention and early childhood special education programs, parental feelings, and advice for parents in future transitions. These were color-coded in the transcripts for reference. The next step was to read the data

completely, with only one typology as the focus. All data were bracketed (using []) on a hard copy, and no data were separated from the hard copy. In addition, I crossed out information that was not relevant to my study. The next step involved reading entries by typology and recording the main ideas in each entry on a summary form. The step here was to begin processing information within the entries marked as related to the typology. In addition, I recorded the same information on index cards in order to move statements to other categories as needed.

Once I felt my categories were solid, I looked for patterns, relationships, and themes within the typologies. This is the step in which the researcher begins to seek out meaning within the data. According to Hatch (2002), patterns are regularities, relationships are links, and themes are integrating concepts. In this step, data are read and entries are coded according to patterns identified, and records are kept of what entries go with what elements of patterns. This involved returning to the marked protocols and reading through all the data marked for inclusion in each typology. During this segment I revised my typologies more specifically to include barriers to transitions, benefits of the transition experience, how individuals helped with transition, and others. The next step is the one that determines if the patterns are supported by the data, and the one in which the researcher searches the data for non-examples of the patterns. This is where it is necessary to make a judgment about whether or not the categories are justified by the data. After some additional revisions and rereading data, I developed my final typologies.

Looking for relationships among the patterns identified was the next step in the process, and entailed writing these patterns as one-sentence generalizations. The final step in this analysis was to select data excerpts (powerful examples) that supported my

generalizations. The typological analysis is a systematic and powerful means of interpreting interview and focus group data. Although my analysis included numerous revisions of typologies and duplicated several steps, I believe I have completed a rigorous analysis of my data.

Nature of Anticipated Findings

Qualitative researchers attempt to determine the form in which their data will appear in the final stage of reporting. This also assists the researcher in anticipating each step of the research process and what might be accomplished at each step. Wolcott (1994) described three means to present the data. The first of these, description, consists of the observations of the researcher and/or what information the participants report to the researcher. Hatch (2002), suggested that with description, data speak for themselves, with the goal being an account of what is going on in a particular context. Analysis refers to identifying “essential features and the systematic description of interrelationships among them—in short, how things work” (p. 12). A description of transition practices among the school divisions may vary considerably, or numerous similarities may exist. This may also include determining why a particular system is or is not working effectively, and how it might be changed to work more efficiently. The final means of reporting data, interpretation, addresses questions of meaning and contexts, such as, “what can I do with this information to make it meaningful?” Hatch noted, “interpretive work is not taken without regard for the data; indeed, the plausibility of interpretations come from the researcher’s ability to use the data to make the case for his or her interpretation” (p. 58).

Within the constructivist paradigm, all three of these means of reporting data are plausible. In a descriptive account, the question, “What is going on here?” can be answered by detailing the parents’ experience at the time of the child’s transition. The parent who tells the story of her experiences within a particular school division may differ significantly from another parent’s perspective in another school division or within the same school division. As a researcher, I might note some observations of the parent as she is sharing her experience during a focus group, and/or by the parent as she reports her experiences during the interview.

Collectively, I utilized a combination of description and analysis in my findings, but primarily focused on the description. My descriptive report acquaints the reader with the current transition practices among the school divisions within the geographic area and details the impressions of parents as their child passed through this transition.

Discussion of Methodological Issues and Delimitations/Limitations

It is critical that the researcher be mindful of personal biases, such as previous knowledge of transitions through personal experiences as a teacher. A solution for me was to list my beliefs in a journal and bracket any particular biases based on memories, culture, and attitudes, and refer to these as needed. Another issue related to the parents involved in the study, and included such concerns as my ability to co-construct knowledge with the participants, hesitation of parents to participate because of prior negative experiences with school as students and as parents, and sharing their experiences with others who may be strangers. A resolution was to establish rapport with parents from the initial contact in order to build a trusting and open relationship. Hopefully this

effort helped participants feel their voices were being heard, and that other parents, children, and teachers could benefit from their input.

Although perhaps not a factor, I was familiar with the geographic area, having lived and taught in proximity to it. Demographics were a consideration in this study, and involved differences in socio-economic and education level, as well as age, gender, race, and ethnicity. I was fortunate in that participants in the study represented diversity in terms of all of the above factors. The rural nature of the area suggested traveling distance might inhibit participation in focus groups. This was the case in the regional program incorporating four counties and one town. Upon the recommendation of the early intervention director and her prior experiences in attempting to arrange meetings, a focus group was not included in this district. Gaining access to participants, maintaining their cooperation, and analyzing and reporting data in a manner that could benefit them were elements considered in this study.

Establishing rapport among focus group members was a significant factor in the flow and success of the focus group sessions, and as moderator, I needed to make certain participants were comfortable enough to share their experiences with me and the others in the group. Having interviewed them prior to the focus group eased the situation. During the third focus group in which nine parents participated, I was pleased that the conversation flowed smoothly among parents as they added to the previous person's comments. My position as moderator was drawing the group back together, probing, and introducing new topics. Initially I was concerned with my ability to handle a situation in which a parent may be sharing his/her experience and become emotional, and time

constraints limiting a parent from sharing an experience. Fortunately neither of these scenarios occurred.

Another factor to consider related to the interview process. As a researcher, I needed to make certain I permitted the parents to elaborate and to allow as much time as needed to share their stories. Guiding, and not directing, the interview is paramount. As an educator, I am well-prepared to lead and instruct, and listening versus talking required much control on my part. Utilizing the guiding questions effectively so as to capture the data was another challenge, as well as being flexible and taking the conversation in the direction that suited the parents. Based upon my own experiences with transitions, several times I found it necessary to try to suppress my inclination to interject my own opinions, suggestions, or solutions. Unfortunately, a few times I failed. Finally, as a novice researcher, I needed to be cognizant of the following: time management and organizational skills, flexibility in planning and scheduling, and any personal biases that came about once into the study. The goals were to conduct a quality study, answer my research question, and contribute to our knowledge and understanding of effective transition policies and procedures.

Initially I planned to interview approximately 30 parents within a small geographic area of three counties and about 50 square miles. Because one school administrator declined to participate in the study, it became necessary to interview parents in an additional county. Because of the requirements for participation in the study (some families were not eligible because their children had not been enrolled in an early intervention program) I was unable to secure enough participants, and sought parents in a regional program which increased the participants to the thirty I desired for my study. As

a result, the geographic area extended the distance between my furthest participants to nearly 200 miles. Additionally, this placed a burden on attempting to schedule focus groups, and upon the recommendation of the early intervention director, focus group sessions were held in three counties where the distance was not a factor. Participants in the study were those individuals who volunteered. Because of a small sample size and constraint to one state, the results of this study cannot be generalized to other areas or populations.

A delimitation of the study related to my personal and professional affiliations within the context of the study. Prior to my graduate program, I taught an early childhood special education class in one of the counties in which I interviewed participants. However, I knew only one teacher as a colleague in another school and had met two parents at the school through PTA functions. In addition, one participant volunteered in my classroom while she had been a student in a high school child care program. I had not been in contact with any of these individuals since leaving the school system. When letters were sent to parents for participation in the study, these three parents were included and agreed to participate in the study. The teacher I knew taught within one of the counties whose teachers participated in the study. Because of my professional and personal experiences with early childhood transitions, I struggled with my own biases. It was difficult for me not to compare the transitions of the parents with whom I conducted my transitions as a teacher in the local schools and those whom I interviewed. During interviews and focus groups I often stopped myself from interjecting my thoughts concerning how I had transitioned children when I taught early

childhood special education. My doctoral advisor also reminded me when I brought up the topic during our discussions of the data.

Another delimitation that may have affected the results of my study is that tape recording equipment malfunctioned during one of my interviews, and therefore, the interview was not recorded. Although I checked my equipment, I inadvertently pushed an incorrect button. Although I was unable to reschedule the individual interview with the parent, his contributions to the focus group were available and used. The conclusions, which I discuss in Chapter 5, may have been altered by the deletion of this one interview.

Chapter IV: Findings

Introduction to Chapter

This chapter describes how I analyzed the data derived from interviews and focus groups with parents who had participated in the transition of their children from an early intervention program to an early childhood special education program in the public schools. I was able to identify four general themes and several sub-themes that represented the perspective of the parents about their experiences.

My research questions guided the direction of my data collection and description of the findings. I utilized the typological analysis to determine common threads or themes in the data in order to understand the experiences of parents who participated in the transition of their children from an early intervention program to an early childhood special education program in a public school setting. Educators can improve the quality of future transitions as they increase their understanding of the experience from those who are closest to the child, the parents. Through the study of individual parent interviews and subsequent focus groups, I endeavored to shed new light on transitions, as described first-hand by parents. In addition, I offered suggestions to the field of early childhood and early childhood special education for improving the transition services we provide to young children and their families.

During the interviews, I established a rapport with all of my participants in that they were willing to share their transition stories openly. They seemed pleased that I had chosen to hear about transition from a parental perspective. Each interview was unique because each transition experience was unique. However, I found some commonalities among the individuals I interviewed. Nearly all parents felt they were participants in

their child's transition, the differences being the extent to which they were involved. Many parents told me that they believed their child's progress was indicative of a successful transition. Most parents cited specific individuals who played a significant role in their child's transition from early intervention to early childhood special education.

Within two focus groups parents with students in the same class had never met prior to our meeting. Their children were in the same classroom and both individuals knew the other's child, but they had not met. During the course of one of this focus group, the grandmother suggested that she and the mother attempt to coordinate their appointments at the children's hospital, and offered to transport the parent and her child. The third focus group was representative of several schools within one county. Parents not knowing one another seemed typical. A few parents were acquainted because of living in the same neighborhood, substitute teaching, and community or school functions. Neither of the other two grandparents attended the focus group.

Findings

In analyzing the data from my participant interviews and focus groups, I found four primary themes concerning the experiences of parents as they transitioned their young children from one program to another. They include:

- **Parents received information and services from programs;**
- **Parents experienced barriers during their child's transition;**
- **Parents received benefits during the transition process; and**
- **Parents offered suggestions and advice for future transitions.**

Each of these themes can be further divided into sub-categories, which I address in the discussion below. These themes, derived from my interviews and focus groups, provide the information needed to answer my research questions.

Parents received information and services from programs.

Regarding information, several parents commented on this area, noting that the early intervention program staff provided written descriptions of their services through pamphlets and gave parents schedules in advance of their coming into the home or day care for therapy services. As part of transition, Annette's case manager told her which public school her child would attend and provided a contact and telephone number. Raoul said the early intervention case manager offered to share telephone numbers of parents whose families had similar circumstances so that they might become acquainted. Nicole noted her satisfaction regarding her case manager, "Jenny gave me any information we discussed...anything that I might ask for, anything." Finally, Samantha commented that the early intervention staff were helpful by demonstrating to families how they could work with their children at home.

With regard to services they received during the transition process from both the early intervention program and the public schools or other programs in which their children would be enrolled, most parents commented favorably concerning certain aspects of their child's transition. Eleven parents indicated ways in which the early intervention staff assisted with referrals to the public schools and/or other agencies that could provide services to their children. These services included arranging appointments and interviews for families at school programs primarily, handling the paperwork involved with the transition process, and sending reports and/or test scores for

determining eligibility for services. Three parents made reference to the early intervention program personnel coordinating the information between programs, and one parent awaiting the adoption of a child felt satisfied with how the process was handled in her case of being a foster parent.

Nearly half of the parents who were interviewed mentioned participating in meetings in which early intervention and/or school personnel were present. One father noted that two staff members from the early intervention program had attended a custody hearing for his son, and were also present for meetings with the school division. Randy said, "...it was comforting to know that they both came...they were willing to supply information of what they were doing." Both Dale and Judi elaborated in detail how the case managers led them through the process, such as helping with paperwork, attending IEP meetings, and explaining the procedures for transition. Samantha indicated that the early intervention staff had met with her prior to her child's IEP meeting and intervened when she was unable to express herself as to what she needed for her child. Judi summarized her experience as "it just happened," detailing the steps of paperwork and determining what school her child would attend. Randy indicated, "They pretty much handled it...made the referral to the school system. It was in their corner, and from there he got enrolled."

When I asked parents about events relating to transition, several parents commented that program staff offered open houses and classroom observations or visits. Two parents were pleased that school personnel provided a parent meeting for all parents in their county at one of the schools in which their children would attend. In addition to the explanation of programs and services, a bus driver attended and helped alleviate their

fears concerning their child riding a school bus and safety precautions that would be in place for young children. Besides meeting school personnel, such as teachers, therapists, and administrators, parents were able to meet other parents whose children would be attending the early childhood special education program. It is the custom of the early intervention program that serves these counties to have a graduation party for the children and families, as well as other events throughout the years they are enrolled.

Parents experienced barriers during transition.

Within this second theme I determined five sub-categories as follows: lack of knowledge and experience with schools, differences in programs and services, communication issues among parties, dealing with (one's) own emotions, and fears for the child. Using guiding questions I asked parents specifically whether or not they experienced barriers during their child's transition.

The first of the sub-categories, lack of knowledge and experience with schools, centered around parents' lack of information and understanding of the school system and procedures. Elizabeth's example concerned her son's assessment and misunderstandings in interpreting his test scores for eligibility to receive services. Although several persons from the early intervention program and public schools were in attendance, much confusion ensued in determining whether he should receive speech and language therapy services or early childhood special education, or if he qualified for any services based on the percentages of the delay(s). Her comments indicated her frustration and lack of understanding:

I think I'm somewhat educated and I was somewhat aware of the system, but I still didn't know. I, nobody told me. Maybe I could have—verbally told me. I'm

not saying I had all, everything legally, and I signed all that stuff, but I did not know what Daniel had to have to get in a classroom situation. And at that child study meeting I made it known that I wanted him in a classroom situation. I thought that's what he needed. He didn't need speech a half hour at a time. Um, and I did not know that you only needed—I think in [name of county] it's a 30 % delay in one category to qualify.

Another parent, Judi, echoed somewhat the concerns Elizabeth noted. When asked how she felt about her child's IEP as compared to developing the IFSP, she indicated that IEPs were overwhelming and included “a lot of legal stuff.” She said if one doesn't understand “what's going on,” much can fall by the wayside, and a child could be pushed aside and nobody would ever know it. In asking for an example, she referred to parents having to fight for services for their children as a “big struggle.”

Based on her difficulty with the eligibility process for her child, Elizabeth had contacted the state department of education for information. Because of her lack of knowledge about the language, process, and protocol, she believed there could have been a tendency to “get railroaded.” She suggested a handbook be developed to help parents maneuver through the system. State departments and school divisions must provide parents with procedural safeguards to assist them in understanding procedures and rights for their children. Another parent, Dale, summarized her sentiments about lacking knowledge: “Information is not out there for you to know—it's like a hidden secret. People don't come out and tell you. You have to search for these things by yourself.”

Another area in which parents expressed concern was the lack of awareness and consideration of placement options for their children once they left the early intervention

program. In considering program options, only seven parents indicated they were presented with other placement considerations beyond the early childhood special education program. Of the suggestions offered, Head Start was the most prevalent and private preschool was the second choice recommended for consideration. Five parents who visited various program options were accompanied by personnel from the early intervention program. Thirteen parents commented that the early childhood special education class was the program the early intervention and public school staff had determined to be the best placement for their children. Although the 2004 amendments to IDEA indicate a parent's option to attend another program or remain in the early intervention setting until age five, only three parents recalled being presented with that option. The state in which this study was conducted did not offer this option to parents.

Three parents expressed their concern of not having been given details about what to expect from the school prior to their children attending. Dale and Lori's children were enrolled in school for the first time this year, and Linda's son was in the early childhood special education program for the second year. However, this was a new transition for Linda and her child as well. During the previous school year the family had experienced a smooth transition from early intervention, and this year the school division opened a classroom in her town so her son was placed there instead. Linda indicated she knew the date school was to begin, the names of the teachers, and what time the bus would arrive for her child in the morning, and "that was it."

The second sub-heading under barriers parents experienced with transitions was differences in programs and services between the early intervention and the early childhood special education programs. For the most part, parents seemed to have

developed positive relationships with the early intervention personnel, such as their child's case manager (this person may also have been the early interventionist or therapist). This would not be unusual because often that individual is their first contact within the system and the one with whom they identify readily in terms of initiating services, evaluating their child, or making the first home visit. Therefore, the differences in programs and services discussed below were geared toward the school and programs, such as early childhood special education.

In three of the county programs, parents expressed concerns with speech and language services provided by the school divisions. These concerns included a lack of services, delays in receiving services, and not receiving services as specified in the Individual Education Plan (IEP). Sally and Lee were told several months after school was in session that their children were not receiving services for speech and language because a speech therapist had not been hired. Although speech therapy was included on the initial IEP, when Sally's child was moved into the preschool setting, she did not receive therapy. She told me that "somebody had missed the speech somehow." Sally said her grandchild was re-evaluated in a few months and did not require services "because by that time, her speech had come along." Similar circumstances occurred for Dale and Jasmine in their county as well, and eventually the school division was able to hire a speech therapist. In a similar situation where speech therapy was provided primarily in small groups rather than individualized, Fred and Kathy indicated they did not understand the level of services their child was to have received. Specifically they felt the individualized speech and language services Tony should have received (as written in the IEP) was minimized due to the limited availability of the speech therapist

who served several schools. Additionally, they understood significant individual instruction would take place in the ECSE classroom, and found mostly small group instruction instead. When asked if they were able to resolve the issue, they said,

only in that we took him out of the preschool at the school and put him in the preschool at the church, and then re-enrolled him at the school for the...just for the speech therapy, where Miss Angela (speech therapist) worked with him individually.

They indicated that he had progressed significantly, having been challenged by the other children at the church preschool and received individualized speech and language services.

Within two different focus groups parents expressed concern over their children only receiving services a few days per week. Generally, these school divisions provided early childhood special education classes four full days per week and one day set aside for home visits, school conferences with parents, evaluations, and meetings. Both sets of parents felt administrators were more concerned with the budget and not with providing services to children.

Citing a lack of information, several parents mentioned that transportation issues needed to be addressed by school divisions. Specifically Marie and Sally shared incidents that occurred on the school bus and had not been resolved to their satisfaction. During a focus group, Lori mentioned her concern with her little two-year-old child riding a school bus, and this sentiment was echoed by several other parents.

One notable difference between the early intervention program and the early childhood special education program was that parents were accustomed to receiving

frequent reports from their child's early interventionist and therapists. In addition, they had ample opportunities to observe their children and ask questions during sessions, and were provided materials and equipment to work with their child until the next session. Three parents indicated that within the school program they had either not received reports concerning their child's progress or the reports were sporadic. When students in regular classes receive progress reports or report cards, students in special education are to receive them as well.

Lee felt that the school was not "coordinated" like the early intervention program. She referred to the latter program as "a big family," having a closer bond than the schools. Therapists worked together as a team to meet her child's needs and often were able to match schedules and provide therapy jointly. Within the school, due to schedules, this was not possible. On the other hand, Dale and Jasmine commented that communication within the early intervention program was lacking and did not feel they operated like a team.

Because schools have an "entourage of people," Elizabeth suggested schools were more intimidating than the early intervention program. Sally expressed that she felt unwelcome at the school and was somewhat uncomfortable in the classroom at first. Basically she just wanted to see how her child was doing in school. Lori's first experience with a school division was similar to Sally's in that she was uneasy. According to her, the school division indicated:

'...we can only have him this amount of time, or this is what we think'—just the feeling I was getting from them, was that that was all they thought he could handle and they could handle.

However, when she moved to another county for early childhood special education services she did not encounter the same introduction. These comments segue to the next issue of communication.

Communication issues among parties, the third sub-category, makes reference to all persons involved with the transition process. Parents expressed concerns with delays in sending and receiving their children's records between programs. Specifically, Terri mentioned that her child could have begun school earlier, had the two programs communicated more efficiently. The early intervention program was remiss in sending all the information needed to complete her son's file for placement. Kathy and Fred indicated that anything they wanted to know they had to ask and that they didn't know what to ask. Further, they were not aware of placement options for their child. In essence, they believed miscommunication existed between and within programs.

Other parents mentioned examples of miscommunication, such as Sissy's experience with her case manager failing to attend an IEP meeting as planned. Both she and Ruth thought that follow-up by the early intervention staff would be initiated during the year, but this did not occur. As a result, Sissy was under the impression she couldn't talk to the early intervention staff once the child left their program. She further expressed that she did not feel she had anyone she could call. Greta stated that "once you leave [the early intervention program], you're thrown out there."

Dealing with one's emotions was a sub-theme in which parents expressed their personal impressions with regard to transition. The majority of parents shared openly the frustrations, apprehensions, and embarrassments they felt. Parents used words such as frightened, anxious, and intimidated in relating their stories. Numerous participants made

reference to their concern in not having the support of the early intervention program.

Linda believed she would perish, having been personally attached to the program staff.

Both she and Dale viewed them as individuals you “could lean on” and who “put fears to rest.” Marie recalled being scared for her child and herself when the services for her child ended. Dale summarizes their sentiments in this way:

And without the [name of EI program], without any help, you’re out there lost. I mean, you’re just tryin’ to survive the day and do the ocean without a boat or life preserver or anything...as a grandma, feel so alone...so just out there by yourself.

Parents elaborated on specific emotions related to entering a new setting, the school. Rebecca’s fears were exemplified when she stated, “they lead me through the process—I can’t do this.” Lori echoed Rebecca’s sentiments when she indicated she “went into it blind, hoping for the best.” Samantha shared that she had a more difficult time than her daughter in terms of adjusting to a new school. Linda was alarmed because once her son left the early intervention program she thought her support system would end. Some parents admitted being overprotective and not wanting to separate from their children. In many circumstances, their children were as young as two years when they were enrolled in an early childhood special education program. A few parents were embarrassed that they might say something incorrect, and others felt that school staff looked down upon them. Overwhelmed was how Judi recalled feeling when her child went through yet another transition, this one to preschool. Her daughter’s transition process began at birth with placement in the NICU. Sissy summarized the need for including parents in the transition process:

“Everybody focus on the ... [laughter] ...children, but no one really focus on the parents a lot, you know the anxiety that you’re goin’ through with them goin’ through this transition...”

The remainder of Sissy’s words can serve as the beginning of the final sub-category, fears for the child: “...You know, you can’t read their little faces—‘did you have a good day,? what did you pick up?’...” Sending children to school as young as age two and riding a school bus stood out among many parents as their major concerns for their children. What children would learn was another concern for parents. Elizabeth questioned that “the person that wrote the IEP never saw him [her son].” Marie said, “They asked me questions on what I thought, but mainly it was how they thought, what she should be learning.” In the early intervention program parents participated in their therapies and play activities, or at least knew these services were being provided under the watchful eyes of day care personnel or a babysitter while parents were at work. For most, this was the first time children were separated from their parents on a near daily basis. Sissy questioned how her granddaughter would fare when the school didn’t know her, and could she “fall by the wayside.” Fortunately her transition was a positive one, and the next theme derived from the data highlights the benefits she and other parents obtained during their children’s transitions.

Parents received benefits during the transition process.

Within this theme are two categories: parents received emotional support from early intervention professionals, and parents developed rapport and new relationships with school personnel. The latter sub-category can be divided further to include: parents believed their input mattered, and parents believed their children were in “good hands.”

Often parents develop a positive relationship with their child's caregivers, such as a therapist or case manager. This person might be the first contact for the family in finding out their child needs services for delays in his development. As a result, these individuals establish a rapport or special relationship with families, and this relationship grows over time and may include emotional connections. Parents mentioned specific persons with whom they had developed a close relationship, and regarded them as people with whom they could share their personal feelings. In particular, Dale referred to her grandchild's case manager as someone she could cry with or vent her feelings. "We could just sit and talk. Miss Cynthia was wonderful, didn't have to go through it myself. It's too much by yourself." In addition, she was pleased that she took the time to explain why Elliott behaved a certain way. Dale mentioned that when she questioned whether her second grandson might be experiencing delays, she felt comfortable asking her questions and seeking her guidance. Dale said, "you didn't feel authority," which emphasized their respect for each other in their relationship. Nicole echoed Dale's sentiments, "I could call whenever I wanted to talk to her; it's always been like that." Lee summarized her feelings for her child's case manager, "I loved that woman!"

Sally referred to her child's physical therapist as "top of the line," having worked with her previously in a hospital. She expressed how comfortable she was, knowing that this person would be her child's therapist. Samantha, in reference to the same physical therapist, said,

[Physical therapist] was very helpful. She, any time I called her when I needed somethin' or needed to find out more information, if I couldn't figure it out and find it, she went to her other sources and got it for me and relayed it back to me.

Greta shared with me that her child's physical therapist had been with her child since the child was six weeks old. Ruth mentioned that when her family moved to another part of the county, the early interventionist who worked with her child changed her area in order to remain the child's interventionist. All of these parents emphasized continuity of personnel as important to them.

Both Randy and Sissy recalled their experiences in dealing with the courts and how their child's case manager attended court with them to explain services and provided support for them in issues of custody. They and several other parents were pleased that the early intervention staff had visited schools and attended eligibility and IEP meetings. Yasmine recalled the help she received from the early intervention staff regarding placement, "I'm lucky to have them because, if they wasn't there to push the issue, she might not've been in school now. And she might be far behind." Jasmine stated that the staff "brings information the correct way—not sugar coatin,'" referring to their guidance in recommending the early childhood special education program for her children.

According to Randy, the early intervention program staff kept him informed and told him in advance of anything, and were always willing to talk with him. Linda commented that her child's case manager called periodically and followed up on her son once he was enrolled in school.

Overall, the parents commented positively when talking about the staff in the early intervention program. Sally captures the sentiment of many parents:

I have nothing but good things to say. They were 100% wonderful.

I don't think you could have a better program than they have here. Everybody was good at [EI].. I was really impressed with their program. They did very

well. Very supportive and happy—just really nice people.

Developed rapport and new relationships with school personnel is the second sub-category under benefits parents received during the transition process. Within this sub-category are: parents believed their input mattered and parents believed their children were in “good hands.” The first of these is addressed in the next section.

Many parents indicated that during their child’s transition they felt they were part of a team working in the best interest of their child for a smooth transition. In particular, Samantha said she was aware of what was going on and was asked whether or not she agreed with every step. She felt her input was valued. Linda summarized her participation as follows:

A lot of input in everything they wanted to do, I was thinkin’ about doin.’

They always told me about it in advance. And asked my opinion about it.

And I felt like I was, you know, everything I was included in.

Dale noted that she was considered “the boss” and could change things where needed. Sissy and Randy told me that the placement for their individual children was their choice. Each of these examples supports the importance of including parents in decision making during the transition process.

In talking about their relationships with school personnel, nearly every parent shared some information relating to believing their children were in “good hands.”

Fred’s quote provides an introduction to the overall perception of parents’ experiences;

I think that’s been the key to our whole, to the whole success with Tony. There have been a lot of people involved that really care about what they’re doing.

Below are specific examples of individual teachers, therapists and administrators who exemplified this caring Fred refers to in his statement.

Lonnie, Joyce's child, has multiple medical needs that warrant specialized care and attention both in the classroom and home. Her concerns about the teacher being able to handle the medical needs were alleviated in meeting his new teacher and teaching assistant. Just by their meeting her child, she said she felt comfortable with them and could tell they were going to be good to him. Along the same line, Lori indicated she felt comfortable there [in the classroom] and confident about leaving her son. In contrast to her child's first ECSE class where the teacher was reluctant to enroll her son full-time, Lori's child's second teacher was "upbeat and positive—let's see how it goes." Samantha said, "...with knowing Melinda, I knew that I wouldn't have to worry about my child, you know? So, it was a comfort thing for me, too."

Sissy used the words "welcoming" and "accommodating" in describing her child's preschool teacher. Commenting on the experience of her grandchild's teacher, Sissy said, "She knows what needs to be done. She's done this before. I love that." Lee also regarded being experienced and helpful as important traits of her daughter's teacher. Susan and Dale simply commented that the preschool teachers were "wonderful." Rebecca said, "I'm lucky—those teachers will give me the moon." She qualified this with the following story. When her grandson was placed in the early childhood special education classroom she was reluctant to leave him, although he had adjusted to her leaving. The next step was his riding the school bus, another reason for her concern. The preschool teachers agreed to call her the moment the bus arrived at school, and did so

everyday for two weeks until Rebecca felt comfortable and trusted he would arrive safely.

A few parents named therapists and administrators as significant in their families' transition experience. One such incident referred to a principal in an elementary school. Kathy told me of her concern in leaving the building while her son was in school. She believed she should be close by in case of emergency. Sensing this reluctance, the principal encouraged Kathy to volunteer in her office so she could be located easily, and so that the principal could help her with any problems that might arise. Kathy shared that the principal knew how hard it was for her to separate from her child, and this helped considerably in relieving her fears.

Parents spoke of their children being in "good hands" in terms of communication with them and with others as it relates to their children's education. Nicole's son's teacher kept in touch with her via telephone several times a week and was available to her anytime she was needed. Other parents used communication notebooks to correspond, as well as having home and/or cellular phone numbers of teachers. Nicole talked about the interaction between her child's early interventionist and early childhood special education teacher, indicating they worked closely together to "bring out the best for what's going to happen to Michael."

In developing rapport and new relationships with school personnel, parents offered many phrases to describe how this occurred. Being part of the team, knowing my input matters, and being aware of what is going on, refer to parents. Caring, comforting, and welcoming are personal labels placed on teachers, while communication with others and experience are good tools for educating children. John's statement provides an

appropriate ending for this section: “Everybody was very professional in their field, and they were very nice, and had Betsy’s concerns at heart.”

Parents offered suggestions and advice for future transitions.

During the course of the interviews and focus groups, I asked parents specifically for suggestions and advice toward improving transitions for families, agencies, and schools. In many instances, I inquired as to what they might tell another parent who was beginning the transition process. Six sub-categories emerged from the data, and are as follows: improve coordination/connections among programs; improve communication among parents and professionals; expand information and services for parents; advocate for “parent to parent” communication/networking; develop strength and coping skills; and consider options for preparing children for transition.

Improve coordination/connections among programs was suggested to me by a number of parents as one way in which transition could be improved for families and agencies. Specifically, parents talked about the need for joint meetings with personnel from the early intervention program and the public schools, and parents. Several parents reported that meetings had taken place among these individuals as part of their children’s transitions and were helpful in the process of moving from one program to another. In most instances these meetings consisted of a case manager or therapist attending an eligibility or IEP meeting with parents.

According to parents, consideration should be given to setting up meetings for each family at the beginning of the transition in order to be consistent in the transition procedures and so that carryover from one program to another will be attained more easily. The physical therapist who serves the early intervention program is also

contracted to provide services to children in other school divisions due to a shortage of physical therapists. In this regard, the carryover of services is smooth and with little or no disruption in services. This is beneficial to the children and others involved, such as teachers and parents. Parents suggested that sending therapists meet with receiving therapists, such as occupational and speech therapy, for better carryover.

In rare instances, teachers in early childhood special education had the opportunity to meet and/or conference with the child's early interventionist or case manager prior to the beginning of the school year. A general meeting of parents occurred in one school division, but no one from the early intervention program participated. However, parents had the opportunity to learn about the new program, board a school bus, and meet staff and other parents. In order for all parents to receive pertinent information in a timely manner it was proposed that a meeting be held for all parents and program staff of both programs. Numerous parents expressed that they had no introduction to the school until their child entered the program. Samantha said, "I went in with the initial meeting with the principal and then didn't get to meet her classroom until after she started. You know, the first day that she went to school was the first day I saw her classroom." Others indicated they visited classrooms and met teachers, while a few met to sign paperwork just prior to their children enrolling.

Another issue discussed by parents was sending and receiving records. Three parents from different localities shared stories about how their children's enrollment was delayed because the records required for placement had not been sent from the early intervention program to the schools in a timely manner. Parents proposed better

communication as a means of improving record exchange for children leaving one program and entering another.

Home visitation is a component of most early intervention programs, and generally early interventionists and therapists work in homes with families several times a week. For the most part, it is standard procedure for teachers in early childhood special education programs to meet with parents in their homes as well. The parents recommended teachers making visits to each home during the summer months or just prior to school starting in an effort to become familiar with the child and his family and to explain the early childhood special education program.

Another suggestion from parents was for the early intervention program to provide placement options, other than early childhood special education, for parents to consider as their children leave their program. Most parents indicated few, if any other programs were mentioned as placements after early intervention. Head Start was thought to be appropriate for some children, but because of age and income requirements it was not always a possibility. In Terri's situation, she was told that early childhood special education might be the best placement for a year, and then her child could be moved into a Head Start classroom at age three if he progressed sufficiently. Fred and Kathy viewed a church preschool as the best placement for their son because he would be exposed to typically developing children as role models and would receive religious training that schools could not offer.

When I inquired about placement options for Marquis, Trina indicated that the early childhood special education was recommended to her and her husband, which turned out to be the best placement for her child.

Well, we weren't, they made clear that we weren't obligated, you know—if we didn't feel comfortable putting him in preschool. We didn't have to, but, we, we felt it was more, more to his benefit, you know. Not just for our own, but more, more so for his benefit, and, and, you know...it has definitely tripled.

Generally, children and families transition at the beginning of the school year, but in the case of children transitioning from one school to another or from early intervention to early childhood special education during the school year, parents suggested the schools and early intervention provide information and transition activities for families.

The second sub-category, improve communication among parents and professionals, was one in which participants made numerous recommendations. At the focus group where the largest number of parents attended, most parents shared in the discussion of communication. They seemed to appreciate the opportunity to meet to discuss transition, and felt it would be beneficial to meet as parents periodically. Rauol suggested that the early intervention program initiate round table discussions, what he termed "gripe sessions," to be able to share information. John suggested working with the schools in this endeavor. Other parents added that email and chat rooms would be ways to communicate among parents and schools since the information [names, etc.] was already in the data base. No one mentioned confidentiality as a potential barrier.

Another suggestion to improve communication was to establish a liaison between home and school, a child advocate or case managers. Because families may move around the county or placements change, parents thought having someone assigned to coordinate efforts to transition the child would be beneficial if the child is going to a different

school. Scheduling meetings between special education directors and parents was also mentioned as a means of improving programs.

The need for meetings among the early intervention program, schools, and parents prior to the beginning of the school year applies in this section as well. Parents felt one meeting was insufficient to cover everything about a child. Greta shared her first transition meeting with the focus group:

At the one transition meeting that we had—which was nice that the [EI] was there To kinda...but there was also four or five other people that we didn't know. And the principal. And we're all talkin' about my child! And, you know, maybe if there was more than just the one meeting, it would have been a little bit more—after that one meeting after you've gone through all those things that they've said to you, then you can go home and think about it! And then come back with, maybe your questions. 'Cause you just, you can't think of everything that, you know, happened in your child's life in those two years and portray that to them.

Greta's comments lead into the concern of parents not being informed within a reasonable time that their children would be ineligible for services from the early intervention program at age 2 and would need to be considered for eligibility for services within the public school system. This state opted out of permitting EI services until age five. Most parents I interviewed had transitioned their child at the age of two.

The parents I interviewed spent considerable time discussing their feelings about the transition process and offering advice to school and agency staff and parents who will be transitioning their children from one program to another. Words that surfaced often in

our conversations were: trust, value, informed, involved, and team. Each of these will be discussed in the next several paragraphs to illustrate the intent of the parents' advice.

"I guess you have to trust in the teachers. And have faith in God that it's going to work out," Carolyn said when asked what advice she would offer to a fellow parent who was transitioning his child. Parents shared comments about the positive relationships they had with either or both programs. Rebecca's comfort level with her grandson's teachers was such that she said, "Okay, I trust y'all to take care of this child." She further elaborated, "when the child's coming home happy and happy to see his teachers in the morning, then the parent's not worryin' so much."

Parents wanted teachers to value their input and expertise. When asked what advice Samantha might give to parents about transition, she said that with any program parents need to "not be stern, but just get their point across and let them know that's what you were looking for for your child." She added that parents should be open-minded to what they [teachers] have to say. I asked her if she felt her age impaired her in any way because she is a young parent, and was she treated respectfully. She replied that what helped was being aware of what was going on and knowing she wanted what was best for her child. Sally's statement summarized much of what parents were saying,

I think it's a big adjustment...because it was for me. And that you're used to kind of a home setting, and when you have a little one you're very protective. And then when it changes into something different—if they're like me—you might not feel comfortable with it. You have to work with the teachers. Let them know you're not comfortable with something, and give it a little time—that's what I had to do.

Many parents commented about knowing their children best and caring most about them, but added how important it is to get to know the teachers and work with them.

Parents' advice to others included: be informed, be included and involved, become team-oriented and become part of the team. Parents cautioned teachers that they hold the cards and don't like to be pushed. Linda said, "It's your choice! You don't have to go along with the protocol if you don't want to. That's your job!" John thought parents should learn about the school, the district, the teachers, and take advantage of "every available tool there is for your child, you know, 'cause there are a lot out there."

The third sub-category, expand information and services for parents, includes numerous suggestions by parents. Several parents commented that they were not aware of early intervention and early childhood special education services as if they were somehow secretive. Fred proposed "better marketing" for increasing awareness of services for children birth to five. "I missed out on a whole year of help! Because...I didn't know," is the sentiment of Jasmine regarding her twin boys not receiving services. Some parents felt they were lacking the knowledge they needed to make informed decisions about their children's education, as well as sources for obtaining information. Elizabeth mentioned contacting the state's department of education on several occasions because she could not locate the information she needed. Citing lack of information when talking about her grandson's behavior, Dale commented, "I need a book, I need a really good book." Collectively, parents suggested a handbook that would be written in terms parents could understand, thus eliminating the jargon they said schools and agencies used. This handbook would include: parental and child rights, understanding the system, interpreting test scores, and understanding the differences between IFSPs and

IEPs. In addition, parents said they needed copies of their rights prior to meetings, and felt IEPs should be simplified. Dale said, “Put parental rights into simple terms for me. We don’t know, I mean, you’re handing me a piece of paper.” Another example of expanding information and services for parents was the need for additional services and equipment for children and schools. Raoul suggested that parents need to become aware of grants to help with providing those services. Parents agreed they shouldn’t have to fight for services or limit services, but may need to help find other services. At least four parents expressed the need for additional resources in their counties, such as counseling, education classes, and transportation services. Dale and Jasmine suggested classes taught by the occupational therapist, but agreed this would be difficult because of her schedule and caseload.

A possible solution to the need for becoming better informed or expanding information for parents related to an earlier suggestion by Raoul. He referred to instituting a “gripe” session with regard to improving communication. These sessions would be set up by the school division and would be a forum for parents to discuss issues of concern with other parents and school personnel. He indicated these sessions could be similar to our focus group in which parents shared their transition stories. Raoul also felt the early intervention program could help by providing parent information sessions for parents, “You have a year and a half, basically, of your child in an [EI] program prior to getting into the school program. And that’s a year and a half that could be really used to give the parents the ins and outs of exactly what this child is gonna go to.”

Advocate for “parent to parent” communication and networking is the fourth sub-category in which participants offered advice for improving transitions. Parents believed

those who had participated in transition first-hand would be qualified to talk with other parents who had not been through transition with their children. In addition, they felt parents with experience could help other parents who might be overprotective, young, or not understand the process. They also indicated the need to stay ahead of things, have someone to call upon for information, and in general, become acquainted with other parents through open houses and other opportunities. Meeting others through a focus group was one way in which parents received information. Raoul felt it was beneficial, "... 'cause there's information I gleaned from everybody here so far this evening."

Numerous parents believed that parents who will experience transitions need to develop strength and coping skills, the fifth sub-category. Various parents, including Samantha, indicated "...within any program, with anything...get your point across, and let them know that's what you were looking for for your child." Lee shared her thoughts with me, "...you're the only person that's really looking out for your child like they should be looked out for. No one cares about your kid like you do." Another parent said that it was her child they [the school and EI program] were dealing with, "my baby." Along those same lines, Terri told me parents should not hold their children back [from learning] and allow them to take the first step. She cautioned that they should also "be there" for their children even though it will be difficult, and not to pressure children. Nicole's message to parents was "prepare yourself to have to let go, 'cause that is horrible."

Others shared that parents need to be confident and positive, have faith in God, and not worry so much. According to Samantha, parents should not be in denial or be ashamed of their child's disability, but rather recognize their problems and seek out the

best for their children. Other parents made reference to “your job” and “your choice,” and said that all of it is a learning process.

The final sub-category under suggestions and advice for future transitions is: consider options for preparing children for transitions. Because transition affects everyone in the family, parents offered recommendations to facilitate smoother transitions for children. General categories related to children’s placement and accommodations, continuity of services, parent participation, and communication.

Parents offered several options for placing children in the early childhood special education setting. Raoul thought a child’s placement for early childhood special education should be in the elementary school the child would attend once she or he is eligible for kindergarten because the child would already be assimilated into that school. This is generally true for most counties, but in this particular county, if a school’s early childhood special education class is at capacity, children are enrolled in the closest school to their home school. They would be placed in their home school for kindergarten and/or special education.

Several parents suggested children attend an early childhood special education class a few weeks during the summer as an introduction to the school. In this way, children could experience various aspects of preschool, such as becoming familiar with the school, teachers, and curriculum. Elizabeth shared with me her older son’s experience in a Montessori classroom where only new students attended the first week of school, followed by those who had been enrolled the previous year arriving the next week. She felt this arrangement might reduce the anxiety of being placed with a full classroom of children by gradually introducing the other children. When Greta’s daughter was

enrolled in the integrated early childhood special education/Head Start program, she attended school two weeks earlier than the children from Head Start in order to become accustomed to the classroom and school routine. Greta believed this experience helped her child adjust to school more readily than if all of the children had arrived at the same time.

Rebecca and Lori mentioned how a gradual schedule was beneficial to their children when first enrolled in an early childhood special education class. In working with the teachers, each child attended school for a specific time each day, and added a portion of time until the children were in school for an entire day. Another parent said her child attended only mornings initially, while a second parent added a day until her child attended four days per week. All of these parents believed this arrangement was beneficial for their children and recommended it to me as a suggestion for other families.

Rebecca said schools should provide therapy sessions in the morning to help with a child's transition to a new program because she or he would be more alert and responsive at that time of the day. Ruth felt that children with autism who utilized individualized daily schedules should be considered when transitioning children in order that their schedule would be followed as closely as possible.

In general, several parents thought the schools would benefit from the early intervention program should provide "tips" for working with children. For example, providing detailed instructions to follow through at home, and therapists combining services when working with children (physical and occupational therapists working simultaneously) would benefit the children. Another parent referred to continuing "where the child left off" in the early intervention program, assuring continuity for the

child. Parents offered a communication notebook between home and school on a daily basis would help parents and teachers maintain contact concerning the child.

Three parents at one focus group mentioned their concern with their children riding a school bus at a young age and had some recommendations based on their own experiences. They had participated in a session where the bus driver was part of the program and provided them with an opportunity to board a bus and ask questions. They felt this was beneficial, and added that children should have the opportunity to take a short ride on a school bus sometime before the beginning of school. A number of parents indicated it would be beneficial for parents to be allowed to stay for a few days during their child's transition to school. Samantha said she wished she could have stayed in the room for several days until she felt comfortable leaving her daughter, but fortunately she knew her child's teaching assistant and that alleviated some of her concerns. Judi and Lori thought being able to participate with the child in school for a day would be helpful for the child to adjust and for the parent to feel at ease about leaving the child.

Throughout this chapter I presented details of the four themes that evolved from my analysis of data. Many parents I interviewed had experienced transitions in much the same way, while others had unique transitions with their children. Their varied perspectives illustrate benefits they received, barriers they encountered, services and information that were provided to them, and suggestions for parents who will be participating in transitions for their children in the future.

Chapter V: Interpretations and Conclusions

Introduction to Chapter

I designed this research study to explore the experiences of parents of young children with disabilities after they had participated in the transition of their children from an early intervention program to an early childhood special education program in the public school system. I was able to answer the following research questions:

- (1) What do parents recall experiencing as they participated in the transition of their children from early intervention to early childhood special education programs?; and,
- (2) What common themes regarding transitions derived from parents' experiences?

Through individual interviews and focus groups I derived four themes from my participants' responses, including: parents received information and services from programs; parents experienced barriers during transition; parents received benefits during the transition process; and parents offered suggestions and advice for future transitions. In this chapter I offer four recommendations based upon these findings.

Within this chapter I offer the following: recommendations as a result of my study and their relationship to the existing literature, implications for future research and policy, contributions my findings offer to the field of early childhood and early childhood special education, and a reflection on my learning as a novice researcher.

Recommendations Based on Findings

Recommendation 1: Develop principles and guidelines for early intervention programs and individual school divisions.

The 1986, 1991, and 1997 reauthorizations of Individuals with Disabilities Act (IDEA; formerly known as the Education of All Handicapped Children) address transition in some capacity (Rosenkoetter, et al, 2001, and McCormick, 2006). Over the years transition planning and requirements have been expanded in an effort to create a seamless system of service delivery for infants and young children and their families. As a result of these mandates, early intervention programs and public schools have complied and provided programs to meet the needs of this population. Numerous states have prepared documents that assist programs in planning and implementing smooth transitions for children and families. Although the state in which I conducted my research has such documents available, none of the parents indicated any knowledge of their existence. One parent noted her contact with a state department official in answering questions and another mentioned that she needed a handbook, but neither referred to any specific documents.

As a result of my discovery of this lack of awareness by the parents, I am including some general suggestions for early intervention programs and school divisions for transition planning. These general guidelines would be beneficial for any program to implement and are consistent with evidence-based practices documented in the literature. The primary rule of thumb in transition planning is that all stakeholders share responsibility for creating successful transitions (Wolery, 1989, Kagan & Neuman, 1998, Pianta & Kraft-Sayre, 2003, and Rous & Hallam, 2006). This includes the early intervention program (sending agency), the receiving agency (public school or other program), parents, and community agencies. Development of a collaborative team is essential, and must be fostered along a continuum including communication, cooperation,

and coordination preceding collaboration (Rous & Hallam, 2006). Barriers must be anticipated and resolved in order to move ahead with a partnership among all participants. Transition is a process that must be well-planned with specific outcomes in mind. It is a roadmap that guides stakeholders and serves as a bridge between programs (Hanson, et al, 2000, Rosenkoetter, Hains, & Fowler, 1994, and LaMontagne, Russell, & Janson, 1998). This transition plan must be structured, including timelines, guiding principles, shared vision and leadership (Rous & Hallam, 2006). A needs assessment and anticipation of barriers developed by participants must be determined prior to implementing the plan. Evaluation follows implementation and revision follows evaluation (Rosenkoetter, et al, 1994).

A key feature of successful transition planning is that it begin early (Odom & McLean, 1996, and Bruder & Chandler, 1996). At least 90 days prior to a child's third birthday, communication between the early intervention program and the family's LEA must take place (McCormick, 2006). In this regard, schools become aware of the children and families, and making contact with parents and the case manager or early interventionist can begin. If the early childhood special education program is being considered as an option, teachers might accompany the child's case manager or early interventionist on a home visit and/or participate in the evaluation of the child by observing him and asking questions of the parents and/or early interventionist. This introduction to the family can foster a relationship with the parents and allow the teacher and child to become acquainted while adults are determining the child's strengths and needs. Letting go of families by the early intervention staff to school professionals helps develop trust with the new program and establishes a collaborative relationship (Hains,

Fowler, & Chandler, 1988). Rous and Myers (2006) found that it was important to build interagency relationships, and attending and participating in meetings and encouraging dialogue was one strategy to help support more positive relationships.

Pianta and Kraft-Sayre (2003) emphasized that because each child and family is unique, a variety of strategies should be offered to meet these individual needs. Teachers can invite the child and family to visit the classroom, thus providing an opportunity for the family to become acquainted with the children in the class, teaching assistants, and therapists, as well as experience the curriculum and activities. The teacher can utilize this time to begin to acquire a broad understanding of the child's skills, such as peer interactions, language, and motor skills. A school tour and an opportunity to meet key personnel may be included, as well as an invitation to "drop by" or call with questions could be initiated by the teacher. Program visitation by families and children, as well as staff visiting each other's programs was found to be effective as a transition practice (Rous & Myers, 2006). Other recognized transition practices include inviting parents to attend a school open house, offering workshops for parents on curriculum, working with children in the homes facilitating play.

It is important to note that schools must be prepared for the child (National Education Goals, 1998). Parents can help schools by providing information about their particular child, as well as sharing their positive and negative experiences with transitions in order to assist in implementing better transition services for families who will be sending their children to public schools from early intervention programs. Because of their first-hand experiences with transitions, parents were able to offer options for preparing children for transitions and ways to help other parents develop strength and

coping skills, such as being confident and positive and recognizing problems. Parents noted that they know their child best and care most about their child.

Parents recommended various options to consider in providing a seamless transition for their children. It is critical that children continue to receive education and related services with minimal or no disruption between the early intervention and preschool programs in order to maintain their progress. The continuation of goals and objectives from one program to the next program fosters the child's adjustment to the new setting. It also provides a foundation from which to build new or expanded goals and helps parents understand expectations for their children in the new setting.

Parents suggested several ways in which schools might facilitate this transition to entering school for the first time. Among their suggestions were to stagger attendance for new children or provide shortened school days. These suggestions could be accomplished in a number of ways, including new students attending a week earlier than the returning students and then attending together the next week. To help children transition to a new setting, school personnel could release the children after half-day sessions for the first two weeks. New children might attend during a week in the summer to become accustomed to a school routine and bus ride, and build up endurance for being in school for the first time. Parents might feel more at ease if they were encouraged to spend a day or two in school along with children.

Several books are available that provide step-by-step approaches to transition planning for agencies, families, schools, and community, and include: Hains, et al, 1994; Pianta & Kraft-Sayre, 2003; and Rous & Hallam, 2006. Transitions can never be characterized as "one size fits all," nor can a child and family's transition be

standardized. However, the goal of providing as seamless as possible transitions for children will never change.

Recommendation 2: Develop an array of written materials to assist families with the transition between early intervention programs and potential future service providers.

During interviews and focus groups parents indicated they received information and services related to transition from both the early intervention and early childhood special education programs. Several parents mentioned receiving information, and the nature of the information they described receiving varied from basic information about one of the programs to contact persons in other programs and community resources. For example, one parent indicated his child's early interventionist offered telephone numbers of other parents in the program with whom he could speak since their circumstances similar, and another parent noted her child's interventionist told her which school child would attend. The majority of parents, however, did not cite situations in which they were informed directly about transitions. I recommend the development of joint brochures between each school division and the early intervention program that would be provided for incoming parents in anticipation of questions or concerns about their child's transitions. The development of such brochures could be a helpful source of information to parents in all aspects of transitions.

The contents of the brochure would vary within school divisions in terms of contact information and specific policies, but the general contents would include pertinent information for parents. At a minimum, the brochure would include: child and parental rights, acronyms, general timelines, expectations, transition plans, and resources for families (community, state, and internet). More specifically, each brochure would be

customized with details about transition procedures, such as preparing children for their transition to a new program and expectations for parental involvement. Other topics might include a description of the curriculum, services provided, and the development of the Individualized Education Plan (IEP). As with any document, changes would be made after the parents and professionals in schools and agencies had utilized the brochure for a specific period of time, such as one school year, and annually thereafter. A joint brochure developed with representation from schools, early intervention professionals, and parents who have participated in transitions, should enable parents to find the transition process easier to navigate.

In the event that a child would attend another program instead of an early childhood special education program in the public school, a separate brochure should be prepared between the early intervention program and programs such as Head Start, private or church-affiliated preschools, and day care facilities. This brochure might include a description of programs and services, philosophy, children's expectations, parent involvement, general guidelines for families entering the program, and a timeline outlining transition procedures.

At least five parents shared with me that they would benefit from a handbook that explained their rights and helped them in understanding the system. Although not asked directly, not a single parent mentioned having received the procedural safeguards that are to be provided to parents at the beginning of any meeting, such as eligibility, placement, or child study. No parents noted that a transition plan had been developed as part of their children's Infant Family Service Plan (IFSP). Even though parents did not mention these documents, I can not assume that they did not receive them. This recommendation is

derived from parents' perceptions and is suggested as a means to increase communication between or among parents, schools, and agencies or their representatives and to make certain parents understand policies and procedures related to transition.

Numerous states, including the state in which my research took place, provide booklets, brochures, and, in some cases, handbooks for parents, schools, and agencies regarding the transition of children from early intervention to school and from high school to post-secondary placements. The contents often include a step-by-step guide and timelines for implementing a smooth transition, as well as reproducible forms to help parents and school divisions with the transition process. A more concerted effort on the part of the school divisions needs to take place to assure parents receive these handbooks. Along with the recommendation for a brochure, customizing a handbook for individual school divisions would be beneficial as well. Such customized handbooks would be similar to the brochure but on a larger scale. The early intervention program personnel should develop a handbook related to services from birth to two or three (according to the state), and school divisions should provide a handbook on transitions, beginning at age two or three. Like the brochure, handbooks would be updated periodically after parents and professionals have utilized them.

Table 4 illustrates the prospective contents of the brochures and handbooks that school divisions and early intervention programs could develop.

Table 4 Joint and individual brochures and handbooks

Item to be included	Joint brochure (EI/school divisions)	Brochure of individual school divisions	Handbook for new parents in early intervention	Handbook for new parents in schools
Child and parent rights	*	*	*	*
Acronyms/Navigating Special Education	*	*	*	*
General and specific timelines	*	*	*	*
Resources for families	*	*	*	*
Examples of transition plans	*	*	*	*
Transition procedures, reproducible forms	*	*	*	*
Child expectations	*	*	*	*
Parent expectations	*	*	*	*
Descriptions: philosophy/ curriculum/programs/services	*	*	*	*
Development of the IFSP/examples			*	
Development of the IEP/example	*	*		*

Recommendation 3: Designate a coordinator or liaison responsible for transitions from the early intervention program to individual school divisions and other preschool programs.

All of the counties involved in my study are served by one early intervention program, and currently the transitions are handled through the director of the early intervention program. This individual works with local school divisions' special education coordinators or directors regarding placements and services. In addition, the director is responsible for the overall operation of the early intervention program. Although several parents felt transition occurred smoothly, some parents indicated difficulties. One parent said delays in records exchange kept her son from starting school in a timely manner, and another mother told me her daughter's IEP and visiting the classroom took place just prior to her attending the program. Parents mentioned certain problems they had encountered concerning delays in or lack of services, progress reporting procedures, communication, personal emotions or fears for their children, and overall relationships with the school. An additional area of concern was placement options, and in most instances, Head Start and private or church-affiliated preschool programs were not considered for placement. Some parents indicated that early childhood special education was presented as the only placement option for their children.

Because of the uniqueness of each child's transition, and the increasing number of families being served each year, it is difficult for one individual, the director of the early intervention program, to handle the transition of children into eleven school divisions. Hiring an individual within the early intervention program whose primary responsibility is the transition of children into early childhood special education or other preschool

programs could assure transitions would be handled consistently in all counties and as an on-going process rather than an event. This individual would also be responsible for compliance with legislative mandates and policy changes as they relate to transitions. In addition, the coordinator would receive all referrals, transition the new families into the early intervention program and assist in establishing a relationship between families and their children's early interventionists and therapists.

She may handle transitions for children who were referred for services by physicians or others at the age of two or three. Since the law provides that children can be served in early intervention programs up to age five, the coordinator can assist families with entry into the early intervention program or placement in other programs. Additionally, the coordinator could work with representatives from individual school divisions and preschool programs in the transition of children and families as they move from early childhood and early childhood special education programs to kindergarten in the various school divisions.

The establishment of a transition coordinator would address the suggestions and advice from parents in my study for future parents to improve their transition experiences. Parental advice and suggestions were a reflection of the barriers they cited. Among the recommendations were improving coordination and establishing connections across programs to assure consistency or continuity in services, receipt of paperwork in a timely manner, and provision of program options for families to consider for their children's services.

Arranging visits for families to various programs and offering to attend with them may assist parents in determining the most appropriate placement for their child. Such

activities might also provide parents and professionals an opportunity to establish rapport and begin to develop a relationship with the staff in the new program, as well as facilitating continuity of services. The coordinator would serve as liaison among sending and receiving programs and parents, manage records exchange, and attend all meetings related to transition. Parent workshops could be developed by the coordinator and address topics such as: transition timelines, child and family expectations, parental knowledge of rights and educational jargon, IEPs, test interpretation, and other matters related to their child's education. The transition coordinator could assume responsibility, along with representatives from different school divisions, for ongoing professional development for early intervention and preschool personnel (teachers, assistants, therapists) regarding the preparation of families and children for transition. A final responsibility for the coordinator would be to follow-up with families to assess the transition process and seek feedback for improvement. Other duties of this individual might include Child Find, home visitation, locating resources, and assisting with projects.

Much attention has been focused on transitions in the last twenty-five years, resulting in increased awareness of guidelines and policies related to the transition for children and families moving from early intervention to public school and other early childhood programs. Legislation specifies requirements that transition plans be included in Individual Family Service Plans (IFSPs) and Individual Education Plans (IEPs) to assure procedures are in place for smooth transitions. Various publications advocate for transition as a community effort with shared responsibilities from parents, schools, and agencies. Designating an individual to serve as a coordinator or liaison among providers is one means of helping families maneuver through transitions.

This recommendation extends into the second theme generated from my study, parents experienced barriers, and the five sub-categories that emerged: lack of knowledge and experience with schools, differences between programs, emotions associated with transition, fears for their children, and overall communication. Most parents named at least one individual in the early intervention program with whom they had developed a specific relationship. These persons helped them with coping skills, led them through the transition process, or otherwise had provided a service or information. Likewise, within the school setting, teachers, therapists, or administrators were mentioned as persons with whom parents had established rapport. From the comments made by parents, it appears that these professionals were significant in helping them and their children make a smooth program transition.

The third theme that emerged from the study was that parents received benefits during the transition process. Parents reported receiving emotional support from the early intervention professionals and developing rapport and new relationships with school personnel. Not all parents expressed these benefits, which could be the result of not experiencing any benefits or not recalling such benefits. The availability of a coordinator or liaison could improve the quality of transitions and increase benefits identified by parents.

Pianta and Kraft-Sayre (2003) recommended tailoring transitions to meet the needs of families, rather than a “one size fits all” approach. An effective transition coordinator would facilitate the accomplishment of such a task. The costs incurred in hiring one individual may come back tenfold when children, families, schools, and agencies experience smooth transitions.

Recommendation 4: Provide opportunities for parents to network with each other and with schools.

Parents in my study cited the need for parent communication and networking, in general, and offered ways in which this could be achieved. Through the focus groups I was able to see where that was lacking across all school divisions. In every instance, parents whose children were in the same class had not met prior to the focus group. Some networking could be facilitated through individual classroom events, such as working together on a classroom or PTA project. Schools could serve as a location where parents can gather to work on these projects or use the space to talk informally about a subject with another parent that they might feel awkward discussing with a teacher or therapist. Workshops covering a variety of topics could be initiated once per month to encourage parents to participate and subsequently, develop relationships. Transition preparation meetings that include new parents and an opportunity to interact with parents whose children are enrolled in the program might facilitate friendships among parents and initiate play groups outside of school. Parents with experience are a source of information and advice for new parents.

Within each school or school division, persons assigned to foster transition, guidance counselors, administrators or the special education advisory committee could initiate sessions whereby parents could share their transition stories (inclusive of early intervention to post-secondary transitions) and other topics with fellow parents. Parents in my study suggested improving communication concerning transition and other issues by initiating meetings and “gripe sessions” for parental input. They advocated the use of listservs and distribution lists that already existed within the school divisions as a means

to communicate and network with other parents about issues that concern them, including transitions. Although not mentioned, blogs and websites could be included as well. Each school division in the state has established a Special Education Advisory Committee whose charge is to monitor programs, advocate for special education services and request funding. Parent, school, and community representatives are appointed to serve on this committee. Parents can communicate with the parent representative to express questions or concerns on their behalf.

Implications for Future Research

This section includes implications for future research in the field of early childhood and early childhood special education related to transitions. Based on the results of my study, my curiosity to focus on specific aspects within the study leads me to consider additional research. Like any novice researcher, I found shortcomings in my study. Future research would allow me to probe deeper into understanding transitions.

Because most of the children whose parents I interviewed would be approaching another transition (to kindergarten or special education) or would have recently participated in that transition, interviewing them a second time might yield additional perspectives. Having the opportunity to hear the transition experiences of others and share their own transition stories in focus groups or interviews during my initial study might have impacted how they perceived their child's subsequent transition. Reflecting on what they heard and learned from other parents may have prompted them to ask key questions that equipped them for a smoother transition. Perhaps their children's progress and adjustment to school improved their relationship with their child's teacher and school, and yielded a stronger sense of security when approaching future transitions.

Several questions were left unanswered in my research. Were I to replicate the study, I would probe further into the following: why the experiences of parents within the same county were so different and what factors contribute to the diversity of their experiences, why transitions between some counties and the early intervention program were more problematic than others, and why discrepancies or disconnections existed between parent perceptions and transition policies (parents appeared to be unaware of transition plans on IFSPs, parental rights, and program options). Inquiring in detail or reviewing IFSPs and IEPs might provide a better understanding of the parents' experiences with transition.

Having grandparents as participants in my study presented new opportunities for additional research, especially because they had experienced transition for a second time (with grandchildren). A follow-up study could compare their experience with their own children's transitions, and that of their grandchildren, and consider the following: how their roles and level of involvement in the education of children and grandchildren may have differed or remained the same, how services and programs have changed over the years, how the initial experience helped or hindered the second experience, ways in which they have changed as individuals, and how will they be prepared for future transitions.

Participants in my study ranged in age from the mid-twenties to the late fifties (grandparents), with most participants falling into the 20's and 40's (the largest percentage). A follow-up study would compare the two age ranges and determine the impact of age, education, and experience on their transition perception. Completing another study in the same counties at this point in time might result in more participants

being in their thirties. Hence, another comparison with the addition of this new age group.

Because of the extensive geographic area served by the early intervention program, my study excluded several counties. Replicating my study in the remaining few counties may yield similar or different outcomes. Another research endeavor could compare early intervention programs and school divisions with similar demographics in another rural area of the state.

A final consideration for future research involves viewing transition from a professional's perspective, and could include teachers, therapists, social workers, school nurses, counselors, administrators, and others. One area of study might include the comparison of beginning teachers with veteran teachers. Teachers in the counties serving the parents I interviewed were generally beginning teachers. How might their lack of teaching experience affect their transition experiences? Comparing early childhood special education teachers with other special education teachers, or regular education and special education teachers, would be other groups to study. Differences in the perceptions or experiences of early interventionists and/or case managers and ECSE teachers might be another comparative study. Many parents mentioned specific therapists, teachers, or administrators that impacted their transition, begging the question: what characteristics did they possess that made them so significant?

Most likely the reader will finish this dissertation with questions unanswered which could lead to further research. Studies of transition will continue, and because of the uniqueness of children, families, and programs, no packaged plan will be suitable to any one group. Kagan and Neuman (1998) suggest that

the overarching lesson from the transition work of the past three decades is that we must all share the responsibility for creating successful transitions for children in order to move forward what has become a widely researched, but still somewhat stagnant, social strategy for promoting continuity in the lives of young children (p. 379).

Their comments imply that as proponents and supporters of effective transitions for families and children, we have yet to achieve our goal.

Contributions to the Field

Although this study is limited to a small segment of the population and should be generalized with caution, it can offer some contribution to the field of early childhood and early childhood special education. The results of my study may lead to revisions in transition practices currently employed by local school divisions and perhaps extend to the state level policy regarding transition practices. It is my intention to meet with the director of the early intervention program and discuss my recommendations. As a result, some changes may be implemented that will be utilized in planning more effective transitions for young children.

Some of the barriers and benefits parents shared with me are similar to those experienced by participants in other research studies. This reinforces the need for ongoing research in improving transition practices. Undergraduate and graduate teacher education preparation programs may benefit from this study as well. As a professor preparing pre-service teachers in early childhood and early childhood special education to meet the needs of young children and families, I will utilize both the results of my study

and the literature in my teaching about program transitions. Transitions will become one focus of my research agenda

Personal Reflection

The experience of conducting a research study and reporting findings is both humbling and exciting. Humbling because of the volumes of research one must peruse in beginning the study and realizing that experts in the field of early childhood and early childhood special education continue to pursue effective transitions for young children. Exciting because of the opportunity to develop a research study based on one's individual interest and wonder. When I first began the research process I considered myself ready for the challenge. As I delved into the literature and prepared the IRB forms it became apparent that I had much to learn about conducting research. Preparation and attention to detail, and limiting the focus of research required significant time and effort. Writing took much more time and skill than I had anticipated, and time management was an issue for me as well. Time involved in traveling, scheduling interviews and focus groups with participants, completing transcriptions, and deriving themes required a considerable commitment I had not anticipated. The most difficult task in completing my dissertation was working through the unproductive periods. However, I prevailed, and am proud of my efforts and that of my committee and especially my chair. Completing my dissertation is an introduction to another chapter in my life—a career in higher education and the challenge of future research.

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Appendices

Appendix 1: Guiding Questions for Interviews

Now that I have met each/some of your family members, tell me a little more about your child with special needs.

Describe your experience with transition services in which you and your child recently participated.

What types of information were offered to you by the early intervention program and/or the local school division? How was this information presented to you?

What were some benefits you saw for your child and family during transition?

Can you describe any barriers you confronted as you participated in your child's transition?

In what ways, if any, did the early intervention program assist you in preparing for the transition?

In what ways, if any, did the local school division assist you in preparing for your child's transition?

Can you describe how you were treated during the transition process?

Did you and your child have an opportunity to visit and consider several programs/schools? Please describe the steps you took to make a decision.

What are some ideas you could share that would be beneficial to other parents as they begin the transition process for their children?

Is there anything else you would like to add that we didn't cover in our interview?

Appendix 2: Focus Group Discussions

I will begin the session by introducing myself and thank the participants for attending. After explaining the study and my role as moderator, I will ask each participant to introduce themselves and tell briefly about their child. Then I will ask an open-ended question: “Please tell us about your experience as you participated in the transition process for your child as she/he left the early intervention program and entered the early childhood special education class.”

Prior parent interviews will steer the conversation in a specific direction.

Subsequent interview and focus group questions will be determined based on the data provided during this initial session.

Appendix 3
Letter to Schools

Director of Special Education
County Public Schools

Dear Director of Special Education,

My name is Lucy Kachmarik, and I am a doctoral candidate at The University of Tennessee. Prior to beginning my doctoral program I taught an ECSE class in the _____ County Public Schools. As a teacher I had the opportunity to participate in numerous transitions for my students, and as a doctoral student, I am interested in hearing the experiences of parents as they transitioned their children from _____[early intervention program] to your ECSE program. This is where I need your assistance. I plan to interview parents in your school division concerning their experiences in the transition process, as well as conduct focus groups.

In order to conduct this study, I am seeking your permission to send a letter of introduction to parents/families via your ECSE teachers. This letter explains the study and asks parents to indicate if they are interested in becoming a part of the study. Participation is voluntary and parents may leave the study at any time if they decide to do so. There are no known risks involved, and as a researcher, it is my responsibility to make certain no harm will come to my participants. For the parents who return the form indicating their interest, I will speak with them in person or by telephone to explain the study. With their written consent, they will become participants in my study. My target number is 21 participants, and these will be selected from your school division and two adjacent school divisions.

I will conduct interviews during May and June, 2004, and plan at least one focus group during June at a convenient location for parents. You will receive a copy of all correspondence to the participants, including: letter of introduction, consent form, guiding questions for interviews and focus groups. In order for me to be cleared to conduct this research, I need a letter of permission from the _____ School Board. You can mail it to the address on this letterhead.

I appreciate the opportunity to meet with you and discuss further my study. I look forward to working with you in this endeavor, and I appreciate your willingness to assist me in my dissertation.

Sincerely,

Lucy Kachmarik, Ph. D Candidate

Vita

After graduating from Slippery Rock University with a Bachelor's degree in elementary and special education, Lucy Kachmarik began her teaching career at a state school and hospital in Pennsylvania, where she taught students who ranged in age from 12 to 58. These were the days when students with special needs were not provided with an education in public schools. That placement was quite a challenge for a young teacher, and shortly thereafter she became the director of a preschool program serving children with developmental delays. During this time she earned a Master's degree in special education from Slippery Rock University. After seven years in that role, Lucy moved to Virginia, where she taught in the Williamsburg-James City County Public Schools. During that time she taught students with multiple disabilities and a transition class for children who needed an additional year of first grade. In addition, she served as the elementary coordinator for a program involving students whose needs were best provided in a residential setting.

Lucy transferred to DeKalb County Schools in Atlanta, Georgia, to teach children whose primary languages were other than English, and then returned to Virginia. This time she spent ten years in Gloucester County Public Schools in early childhood special education. While teaching, she attended Virginia Commonwealth and Old Dominion Universities to receive additional teaching endorsements, and earned an Educational Specialist degree in administration from The College of William and Mary.

While a graduate assistant and associate at The University of Tennessee, Lucy worked with the Inclusive Early Childhood Program and supervised interns in the local schools. In addition, she assisted with teaching undergraduate students in the program and supervised graduate students in their summer field placements. She taught at East Tennessee State University while a graduate student and then later as a clinical instructor. Currently, she is an Assistant Professor at Georgia College and State University in the Early Childhood and Middle Grades program, teaching both graduate and undergraduates.

Her research interests include transitions from early intervention through elementary grades, family dynamics, and including play in schools.