

A Comparison of the Beliefs and Priorities of Early Intervention Providers and the Families they Serve

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Abstract

This study was conducted to compare the perceptions and beliefs held by parents of children, aged three to five years, receiving early intervention to those of early interventionists. The participants included parents whose children were receiving early intervention provided by a regional education services agency in southeastern Pennsylvania and the early interventionists who worked for the same agency. Professional participants reported differences between parents and early interventionists regarding the role of the parent and the role of the early interventionist. Early interventionists recommended improvements in parent involvement and responsiveness. Parents offered recommendations for improving early intervention programs, expressing a need for improved communication, collaboration, responsiveness and coordination of services. The study had implications for early interventionists, parents, program design and early intervention practices. Recommendations for training for parents and early interventionists were offered. Well-designed family outcomes as an aspect of the individual education planning process were also recommended.

Keywords: Early Intervention, Early Childhood Special Education, Family Engagement, Collaboration, Educational Partnerships

1. Introduction

Young children ages three to five with special needs receive early intervention services to help them acquire developmental skills and be as prepared as possible for learning as they approach school age. Children receive a variety of services including special instruction, communication and motor therapies. Family training and counseling can be provided as part of an early intervention program. Early intervention occurs in special classes, in community early childhood care and education centers, and in the home. However and wherever it is provided, early intervention is intended to support the child in the context of the family and the family's community. The Individuals with Disabilities Education Act (IDEA) of 2004 establishes the role of the parent in early intervention. Parents participate in the process of identifying a child as having a disability and with the development of the Individual Education Plan (IEP). There is an expectation that the family will be included in the child's continuing special education services. Family-based practices are identified as key components of early intervention. Early intervention is conceived as a special education program shaped by family priorities, designed around family needs and empowering families as active advocates and participants. Early intervention is intended to give families the support they need to provide the child with learning opportunities and positive experiences (Division of Early Childhood, 2007). DEC recommends family practices to insure collaboration and shared responsibility. The practices should support the family and focus on their strengths. Early interventionists work with both the child and the family.

Effective early intervention programs and professionals must be aware of the needs and attitudes of the families they serve. McWilliam, Tocci, and Harbin (1998) identified five underlying components of family-centered services: positiveness, responsiveness, family orientation, friendliness and sensitivity. Bailey, et al. (2006) argued that family outcome measures that go beyond parent satisfaction assessments are required to insure that families experience meaningful change. Diken (2006) called on early interventionists to address the diverse needs of the family as well as the child. The Early Childhood Outcomes (ECO) Project (2004) advocated for the measurement of family indicators. ECO identified several family goals for early intervention: building family confidence, improving the ability of the family to promote child development, enhancing self-advocacy and increasing the family's ability to acquire needed resources.

2. Statement of the Problem and Purpose of the Study

Understanding the perceptions of the families and communities being served is an essential component of family-centered practices (Odom & Woolery, 2003). Guralnick (2008) described early intervention as shaped by cultural, family, political, resource and societal issues. Mitchell and Sloper (2001) argue that parents and early interventionists must define quality early intervention together. An understanding of family priorities should shape family communications, program design, and methods for involving families effectively in early intervention (Dunst, 2002). Hernandez (2000) identified understanding stakeholders' needs as underlying aspects of processes to insure a program's quality, the appropriateness of its goals, and its ability to meet them. The purpose of the study was to identify and compare priorities and perceptions held by families to those held by early interventionists. A semi-structured interview was used to acquire a deep understanding of the attitudes and experiences of the participants. The research was intended to identify how differences influence child and family outcomes, communication and participation. The study was designed to identify implications for training, implementation and program design.

3. Significance and Rationale of the Study

Protheroe (2006) called on educators to understand the backgrounds and priorities of families in order to include them in the education of their children. The relationship between the early interventionist and the family is an important component of early intervention. Early intervention programs are accountable for the quality of parent involvement and support (Bailey, 2001). Boone and Crais (1999) called on early interventionists to work closely with families. Trivette and Dunst (2000) argued that understanding the priorities and values of the family was essential to early intervention. Programs designed to function in partnership with families have a positive impact on the ability of the family to function, according to Dunst and Dempsey (2007). Ketelaar, Vermeer, Helders, and Hart (1998) reported that most studies show that effective parent participation improves child outcomes. A strong understanding of parent priorities and beliefs improves early interventionists' ability to effectively serve children and their families, within the community (McWilliam, Tocci, & Harbin, 1998). Buysee, Wesley and Skinner (1999) concluded that joint planning which included family members and early interventionists empowered parents, created meaningful relationships between parents and professionals, and generated new approaches to service through ongoing dialogue. Hess, Molina and Kozleski (2006) found that families seek a service system with a welcoming atmosphere; a system which is responsive to family needs and open to their contributions. Leaders in early intervention must address the needs and values of the parents to insure quality early intervention. Programs can be designed to support families effectively. Dinnabelle, Hale and Rule (1999) found that effective family collaboration increases when program leadership is committed to family-centered practices.

4. Data Collection Methods

Kelly (1985) described the focused interview as an effective way to achieve in-depth and balanced understanding of a well-defined topic. Use of an interview design permits the exploration of the interpretations, ideas, priorities and perceptions of the participants in a deep and meaningful fashion (Merriam, 1998). Interviewing is an appropriate technique for exploring ideas, thoughts and beliefs (Patton, 1990). A series of shorter, semi-structured interviews are an effective qualitative tool when the researcher is addressing relatively narrow, well-defined aspects of the participants' experience (Taylor & Bogdan, 1984). The investigator conducted a series of in-person, one-on-one, semi-structured interviews. The interviews were conducted using one of two sets of questions developed by the investigator—one for parent participants and the other for early interventionists. Ten participants were included in the study. Five were parents of children receiving early intervention at the time of the study.

Five were certified or licensed professionals providing direct instruction or therapy as employees of the regional education service agency when the study was conducted. The participants were selected for the maximum variation possible among the volunteers. Participation was voluntary. The investigator developed five open-ended questions designed to structure the interviews while providing parents and early interventionists with opportunities to share their unique experiences, opinions and perspectives. The investigator used the same questions for each interventionist and a similar set of questions for the parents. The two sets of questions differed slightly to appropriately reflect the role of the interviewee as a parent or early interventionist. The investigator limited additional questioning to follow-up probe and clarification questions. The questions addressed the interviewees' beliefs about early intervention in terms of their own experiences and their observations of either parents or early interventionists. Each interviewee was asked about how early intervention helped the child and family, what needs were not being met, and ways that early intervention should be improved.

5. Impact of the Beliefs and Priorities of Parents and Early Interventionists

5.1 Research Question 1: How do the Beliefs of Parents and Early Interventionists Differ from one Another with Regard to the Purpose and Implementation of Early Intervention?

All professional participants valued parent participation highly. However, early interventionists were dissatisfied with the role of the parents in early intervention. Four of the professional participants reported that parents often did not communicate sufficiently with the service provider. The early interventionists complained that parents did not follow their advice regarding their interactions with the child. Three professional participants reported that parents did not fully embrace or understand their contribution to their child's program. The early interventionists' views were consistent with the findings of Campbell and Halbert (2002), who found that early interventionists desired parents to be more responsive and accountable. Two of the professional participants felt that parents were more responsive when they provided explicit information about their expectations. Four of the early interventionists argued that parents did not sufficiently value consultation. They reported that parents preferred direct instruction. The participants cited as evidence inadequate responsiveness to early interventionist's guidance and a lack of understanding of how their child should progress. If parents embraced consultation, the early interventionists believed, they would have a better understanding of their child's needs and the child would benefit from better modeling, stimulation and structure in family settings. The early interventionists observations were consistent with a previous study finding that teachers valued consultation while parents valued direct child service more highly (Dinnebeil, McInerney, & Hale, 2006).

Four out of five early interventionists believed that the parents they served unrealistically expected their child's disability to be eliminated. Two professionals expressed the opinion that parents could be unrealistic in their expectations for their children. They argued that parents were unable to accept the fact of their child's disability. Early Interventionist Five expressed the concern that the children were not permitted "to be kids," because of the emphasis parents and caregivers put on academic readiness. Four out of five parent participants were very satisfied with their child's early intervention program. They saw no differences in the beliefs and priorities held by the early interventionists and themselves. Parent Two, for example, expressed the belief that she and the team "were on the same path." She valued having a team with the same goals that she had. Two parents had informal disagreements with the agency, both related to their desire to have their child served in a typical early childhood setting. The responses mirror McWilliam's (1995) finding that parents surveyed overwhelmingly approved of early intervention programs, but expressed dissatisfaction regarding choices available in mainstreamed settings. Parents Three and Four had previous disputes with the agency regarding the location of services. Both parents sought to have early intervention provided within community early childhood programs rather than in specialized classrooms. During the disputes, both parents reported that they did not feel supported or understood. Once the issue was resolved, Parent Three reported satisfaction with her child's team and his progress. Parent Four had ongoing concerns. She reported that the service providers did not listen to her. She did not believe that her opinions were valued. This participant worried that the early interventionists she worked with would laugh if they knew her long-term goals for her daughter. The insights of the parents who experienced disputes reinforce the findings of Feinberg and Vacca (2000) in calling for the use of creative dialog to reduce conflict through the development and implementation of the IEP.

5.2 Research Question 2: What Impacts on Family and Child Outcomes do Parents and Early Interventionists Perceive Because of Differing Perceptions with Regard to the Purpose and Implementation of Early Intervention?

The professional participants believed that changes in parent interaction have a positive impact on a child's development, an opinion supported by Rocha, Schreiber & Stahmer, (2007). They shared the view of Trohanis (2008) that increasing the participation of families in early intervention services is an important, continuing challenge. The professional participants identified the following issues:

- Parents do not communicate sufficiently with the early interventionist.
- Parents do not sufficiently carry out activities and change their interactions with the child.
- Parents do not understand their child's needs.
- Early interventionists become discouraged and abandon efforts to use indirect, consultative methods.
- The child's progress is limited because changes do not occur in the child's family settings.

Four out of five parent participants did not report differences in belief. Nevertheless, parents suggested changes in the implementation of early intervention. Dinnebeil, Hale and Rule (1999) found that parents sought early intervention services marked by a collaborative, well-coordinated approach, with a variety of service options and a strong role for the family. The parent participants echoed Xu's (2007) call for improved responsiveness to families. They expressed a desire for improvements in child find, communication with families, responsiveness and flexibility:

- Public awareness efforts should be improved so that parents understand the purpose of early intervention and know how to find services.
- Communication with families should be improved. Parents should receive communication in multiple forms and on a regular, scheduled basis.
- Parents and early interventionists should engage in pre-planning activities to prepare for IEP meetings and monitor progress more closely.
- The time it takes to place a child in early intervention services should be reduced.
- Early interventionists should receive training in special topics, such as Down syndrome, to provide them with expertise.
- Service scheduling should be responsive to the demands on a family schedule.

5.3 Research Question 3: What are the Implications of Differences in the Beliefs of Parents and Early Interventionists for Staffing, Training, Implementation and Program Design?

Professional and parent respondents provided information and opinions, which have implications affecting multiple aspects of early intervention. The data supports the importance of parent education (Mahoney, et al., 1999) as an important element of early intervention. Training for early interventionists to increase their ability to engage families effectively (Dinnebeil, Fox, and Rule, 1998) is supported by the responses of the participants. The parent participants proposed changes that Guralnick (2000) described as being more responsive to the challenges of families of young children with special needs:

- Programs should be redesigned to enhance parent participation in early intervention, with increases in communication, consultation and parent participation in instruction. When redesigning programs barriers to participation caused by scheduling and other implementation practices should be evaluated to enhance child and family involvement.
- Increase the provision of early intervention in community settings such as the preschool or in the home.
- Improve integration of services provided in specialized settings with the home and community settings; including planned home visits and consultation.
- Redesign public awareness and child find activities that more effectively reach potentially eligible families and better communicate the purpose and benefits of early intervention.
- Redesign screening and evaluation processes to insure timely response to family requests for early intervention.
- Provide parent training and counseling to increase their participation in early intervention, enhance their ability to advocate confidently on behalf of their child, and provide them with access to other community resources.

- Provide training and support to professionals to increase effective communication with families, promote understanding of family needs and differences, enhance the ability of professionals to support parent participation, and to provide professionals with the information they need to direct parents to community resources.

6. Summary

The responses of the parents and early interventionists to the interview questions reveal their beliefs and priorities about early intervention. The differing perceptions of parents and early interventionists have an impact on the success of early intervention services. The participants made a number of recommendations for improvements in early intervention. Early interventionists and parents agreed about the purpose and benefits of early intervention regarding the child. Both participant groups identified the acquisition of skills as a priority. Parents and early interventionists were concerned about preparing the child for future learning and participation in school. Early interventionists reported differences between parents and professionals in terms of the role of the parent, the role of the early interventionist and the expectations for the child. These differences appear when the early interventionists reflected on their perception of parents' demands on them. They also reported that parents failed to respond to early interventionists, as they desired. Parent respondents did not consistently report differences between them and professionals. Parents who experienced disputes described barriers between themselves and the teams they worked with. Parents who were otherwise satisfied with their child's early intervention program strongly believed that there were no differences between their priorities and the early interventionists serving the child. Parents and early interventionists provided advice regarding changes in early intervention. The interviews yielded recommendations for improvements in public awareness and program design. Training and support for both parents and early interventionists were proposed.

7. Conclusions

Parents and early interventionists share consistent beliefs and priorities regarding the needs of the child. Despite a shared vision of the purpose of early intervention, differences emerged when early interventionists and parents reflected on their roles and their relationships with each other. In response to the investigator's questions, professionals and early interventionists consistently commented on the importance of communication, but they differed in their perception of what they should be communicating about. Early interventionists emphasized providing instruction to families about their engagement with the child. Parents sought information about the child's progress and the implementation of early intervention services. Participants from both groups agreed that early intervention is intended to promote the child's skill development. Parents and early interventionists believed early intervention contributes to a child's preparation for future learning and participation in school. They described early intervention as helping children improve their ability to participate in home and school routines, communicate with peers, and engage in typical preschool age activity. Both groups of participants made extensive comments about parent support and parent roles in early intervention. Early interventionists expressed concern about parent participation in programming. Parents reported needs for improvements in communication and implementation of services. The interviews of the early interventionists revealed dissatisfaction with the participation and responsiveness of parents. Most professionals reported that many parents do not adequately participate in early intervention. Early interventionists reported that they felt undervalued as consultants. Parents, they asserted, valued direct instruction more than consultation. Professionals reported an interest in working more actively with parents to increase their participation in early intervention. The early interventionists believed that children made more progress when the parents acted upon the guidance they provided.

Early Interventionists made recommendations addressing parent participation and increasing the service provider's ability to provide consultative support. The early interventionists recognized that parent participation has a positive impact on child outcomes (Ketelar, Vermeer, Helder, & Hart, 1998). The professional participants had recommendations for involving parents directly in early intervention in order to teach them how to engage with their child differently. They recommended parent training and counseling, a service model found to be effective, but frequently missing from early intervention programs (Mahoney et al., 1999; McCollum, 1999). Early interventionists have been found to spend more time providing direct instruction than on consultation and support so often called for in early intervention (Dinnebeil, McInerney, & Hale, 2006); an experience shared by the professional participants in the study.

Parents did not consistently report differences between themselves and early interventionists. Most of the parents were highly satisfied with the early intervention received by their child. They reported that the beliefs and priorities of the early interventionists were consistent with theirs. Despite their general satisfaction with early intervention, the parents reported needs that they felt were not fully addressed. They identified issues not emphasized by the professional participants. The parents consistently called for better communication particularly regarding child progress, implementation problems, and IEP planning. They proposed changes in the frequency and format of communications from service providers. The parent participants made additional recommendations reflecting their personal experiences and priorities. Two parents proposed improvements in public awareness to insure that families knew that early intervention was available and understood its purpose. One parent complained that the time required to initiate early intervention services was too long. Training to insure the expertise of early interventionists was proposed. Flexible scheduling more responsive to each family's changing needs was recommended. Several parents described the understanding of a child's disability and needs as a personal priority, a key family challenge identified by Guralnik (2008).

Disputes about early intervention services had an impact on the parents' perceptions of early intervention. Parent participants who experienced disputes with the agency were more critical of the early interventionists serving their children. The parents felt that the team did not support them when they disagreed. Parent Three had positive opinions about early intervention following the dispute. However, the disagreement with the agency had long-lasting effects for Parent Four, who continued to see the early intervention team as unsupportive. The parents' responses were consistent with Mitchell and Sloper's (2001) findings that parents were concerned about staff attitude and knowledge, accessibility of information, and flexibly designed services. Like the parents studied by Fitzpatrick, Angus, Durieux-Smith, Graham & Coyle (2008), the parent participants valued high quality services, coordination among service providers and information. The parents interviewed expressed views similar to those found by Zaidman-Zait and Jamieson (2007), who found that parents sought information from multiple sources, including educational professionals. Bailey, et al. (2006) reported on five family outcomes identified by the Early Childhood Outcomes Project (ECO): understanding of the child's special needs, ability to advocate, ability to help the child learn, access to support systems, and access to services and programs. The interview participants in both groups made recommendations and discussed issues relating to one or more of the ECO family outcomes. However, the researcher found that neither parents nor early interventionists explicitly identified family outcomes as a priority of early intervention.

8. Implications and Significance to the Field

The early interventionists in the study valued parent participation in early intervention, but were frustrated by what they described as a lack of responsiveness on the part of parents. Trohanis (2008) described increasing the participation of families in early intervention services as an important, continuing challenge. Early interventionists may not have the training and skills to value and carry out early intervention shaped by family-centered principles (Dinnebeil, Hale, & Rule, 1999). Service providers need support to understand the needs, priorities and challenges faced by families of young children with special needs to serve them effectively (Guralnick, 2001). Early interventionists' ability to engage parents would be enhanced by professional development about understanding the needs of families, communication techniques, consultation and the help-giving practices described by Dunst and Dempsey (2007). Training opportunities should also be made available to parents. The early intervention agency should consider increasing the availability of workshops, presentations, and other training models to increase parent knowledge about early intervention. Well-designed trainings can lead to higher levels of parent knowledge of intervention techniques (Ingersoll & Dvortcsak, 2006). Early Intervention programs should consider the needs of families when identifying topics, training design, location and scheduling. Internet based learning opportunities designed for both early interventionists and parents together should be considered. Parents identified communication, information and collaboration needs, which should be systematically addressed. The parents' responses were consistent with the finding that families need information about child development, parenting issues, planning for the future, resources and their child's rights (Gowen, et al., 1993). Early intervention programs should incorporate multiple communication strategies into their services. Modes of communication should be varied to meet the needs of parents, taking advantage of verbal, written and electronic forms of contact. There should be frequent informal interactions as well as opportunities to prepare for formal evaluations and individual education plan development. Parents should be invited to help determine the kind of information they need, when they need it, and what forms of communication are most effective.

The responses of participating parents who had significant disagreements with the agency indicate that the dispute experience had a negative impact on the parents' feelings of support, despite successful resolution in both cases. For one parent the belief that she was not supported or understood by the early interventionists dissipated when the issue was resolved. For the second parent, the damage was lasting, as indicated by her report that the team never supported her preferences for her child. Early intervention agencies should work to assure positive collaboration with families and eliminate disputes whenever possible. Feinberg and Vacca(2000) called on providers and recipients of early intervention to reduce conflict by engaging in ongoing creative dialogue about the needs of children and the parameters of the program. When disputes occur, early interventionists should endeavor to rebuild the relationships with the family to insure a positive partnership with parents. Collaborating effectively to include strong family outcomes would improve the ability of parents and service providers to address participation, communication, and other issues more effectively. Parents and early interventionists would benefit from working together to develop appropriate family outcomes. McConnell (2001) described goal setting at any level as a social process, which requires a thorough understanding of those who are affected by them. Family impacts should be included when an early intervention program's success is being evaluated (Owen and Mulvihill, 1994). Progress toward family outcomes is recognized as an area of accountability for early interventionists (Bailey, 2001). Explicit family goal development and measurement practices should be a component of each child's early intervention program.

The parent participants had recommendations for changes in the IEP planning process, methods of communication, public awareness, and the evaluation process. As stakeholders in early intervention, parents are an important resource when an agency is seeking to improve its early intervention practices. Parent advice about the ways to improve the effectiveness of the programs provided should be pursued. When consumers and community members are included in dialogue and planning, meaningful, culturally responsive changes, which empower parents as participants in early intervention, can be achieved (Buysse, Wesley & Skinner, 1999). Systematic movement toward family-centered practices requires understanding and leadership at an administrative level (Hayden, Frederick, & Smith, 2003; Askew et al., 2005). Harbin, et al. (1998) described early intervention programs, as having failed to create a comprehensive service system, which fully supports both the child and the family. Program design barriers, which may interfere with successful family-centered practices, can be identified and addressed (Murray & Mandell, 2006). In addition to training needs, early interventionists face practical problems such as demands on their schedules making it difficult to effectively consult with family members. Effective, agency-wide parent communication, engagement and support require planning and leadership. Guralnick (2000) acknowledged that agencies providing early intervention face challenges and adjustments as they shift from a child-focused to family-focused model of services. The DEC recommended practices were based on a wide review of early literature, with extensive comments from expert and stakeholder focus groups (McLean, Snyder, Smith & Sandall, 2002). The DEC publication would be one resource for examining program practices and improving the ability of the early intervention agency to support families.

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