PARENTAL STRESS FACTORS DURING THE CPSE TO CSE TRANSITION: A QUANTITATIVE, QUASI-EXPERIMENTAL, STATIC-GROUP STUDY

by

Christine Iturriaga

Liberty University

A Dissertation Presented in Partial Fulfillment

Of the Requirements for the Degree

Doctor of Education

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APPROVED BY:

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ABSTRACT

The purpose of this quantitative research study was to determine if a statistically significant difference existed between parental stress factors related to the transition process between pre-kindergarten and kindergarten, using the Committee on Preschool Special Education to Committee on Special Education transition process, of parents who were exposed to a workshop and those who were not. The study administered a parent survey from the Parenting Stress Index, Fourth Edition Professional Manual. The research addressed if exposure to a workshop on the transition process would decrease stress factors in parents of children who attended a self-contained setting (4410 programs). The study examined parental stress factors, which were possibly related to the CPSE to CSE transition process. The change between pre-kindergarten to kindergarten is a vital and significant developmental milestone for young children and educators, yet the scale to which primary caregivers are included in kindergarten groundwork is rarely considered, especially for parents whose children are classified with an educational classification and/or disability. The research examined parents whose children attended special education preschool programs within a lower urban area in the State of New York, north of New York City. The study included 180 families whose children were identified as students with educational classifications that attended a 4410 program and were in the process of completing a special education program and moving to kindergarten.

Keywords: Transition, CPSE, CSE, IEP, Parental Stress

Copyright Page

Dedication

This dissertation is dedicated to my family and loved ones, especially my mom. Thank you for understanding when you had to share me with other obligations and had to sacrifice weekends and evenings for my studies. You taught me how to go after what I wanted and needed. You showed me in the end hard work pays off. Most importantly, I know you will always be with me no matter where you are. My heart was with you always. I hope I have inspired a lifelong love of learning for family and friends and that it is never too late to fulfill your dreams. I love all of you more than you will ever know.

Acknowledgments

To my previous and current professors: Thank you for your support throughout this journey. Many have been an inspiration to and for me. You have shown me what I want to do, and be, in my future.

Colossians 3:23 states, “Whatever you do work at it with all your heart, as working for the Lord, not for human masters” (New International Version). As a special educator, I believe in the power of helping those who need assistance. I believe in the public education arena, the employee’s strategies for those students who would be lost without guidance and strength. Galatians 6:9 says, “Let us not become weary in doing good, for at the proper time we will reap a harvest if we do not give up” (NIV).

To my school district colleagues and administrators, I am honored to work with such an array of passionate people. Some I count as friends, and others with whom I share the workday. It is an honor to be a part of a group of dedicated and talented individuals, who have knowledge and experience wide beyond their years. Your enthusiasm for Special Education and the families that we help inspire me daily.

I want to personally thank Dr. C. Pearson and Dr. N. Street for helping me on this doctoral journey, especially during the most trying time in my life. I am profoundly grateful.
I also want to thank Margaret Masi who spent countless days/hours reading and re-reading all my work; Thank you!

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List of Abbreviations

Committee on Pre-school Special Education (CPSE)

Committee on Special Education (CSE)

Early Childhood Education (ECE)

Education of All Handicapped Children Act (EAHC)

Education of the Handicapped Act (EHA)

Elementary and Secondary Act (ESEA)

Free and Appropriate Public Education (FAPE)

Individualized Education Program (IEP)

Individuals Disabilities Education Act (IDEA)

Individuals with Disabilities Education Improvement Act (IDEIA)

Least Restrictive Environment (LRE)

Multivariate Analysis of Variance (MANOVA)

National Defense Education Act (NDEA)

No Child Left Behind (NCLB)

Parenting Stress Index, Third Edition (PSI)

Univariate Analysis of Variance (ANOVA)

CHAPTER ONE: INTRODUCTION

Overview

The purpose of the quantitative quasi-experimental static group comparison study was to determine if there was a difference in parenting stress degrees for legal guardians of students with disabilities in preschool special education (CPSE) and school-age special education (CSE) who did or did not attend a transition workshop. The preschool-to-school-age transition process requires a close partnership between educators and parents to aid in a child's well-being and learning skills (Wilder & Lillvist, 2021). The transition to kindergarten is an important milestone for young children and their families (Harper, 2016). Chapter One will provide a background for the topics of parental stress factors during the CPSE-to-CSE transition process. An overview of the theoretical framework for this study is included in the background. The problem statement will examine the scope of the recent literature on this topic. The purpose of the current study will be followed by the significance of the study. Finally, the research question will be introduced, and the definitions pertinent to this study will be provided.

Background

Studies have consistently established that a child's future school attainment was reliant upon the quality of the transition from prekindergarten to kindergarten (McIntyre et al., 2007; Puccioni, 2018; Schulting et al., 2005). The transition to kindergarten is an important milestone for students and families (Abry et al., 2015; Buldu & Er, 2016; Napoli & Purpura, 2018; National Academies of Science, Engineering, and Machine [NASEM], 2016; Puccioni et al., 2020). Preparing students to transition from prekindergarten to kindergarten has been a national priority, but the degree to which parents are involved is rarely considered (Clifford & Humphries, 2018; Fauntleroy, 2009; Sheridan et al., 2019).

The Individuals with Disabilities Education Improvement Act (IDEIA) of 2004 is American legislation that provides an opportunity for parents and legal guardians of children to participate with school districts in designing and implementing comprehensive strategies to improve educational results for children with disabilities; known as Individual Education Programs (IDEIA, 2004). Parents' perspectives about their experiences in special education, and what resources and special education services they want for their children, are important historical components of the federal special education law (Besi & Sakellariou, 2019; Yell, 2005; Zirkel & Gischlar, 2018). Planning and coaching a child, as the child enters kindergarten, has been of national importance, yet the scale to which primary caregivers are invested in the process is rarely measured (Clifford et al., 2018; Fauntleroy, 2009; Margetts & Kienig, 2013).

This research investigation inspected the function of the caregivers' own regulatory capacities performed while guiding their children through prekindergarten to kindergarten, and assesses developmental issues and influences connected to parenting stress. Few studies in the United States have attempted to assess transition preparation events in relation to parental stress factors (Abry et al., 2015; Barnett et al., 2017; Slicker et al., 2021). Children's actions tend to influence a parents' stress balance (Barnett et al., 2017; Beatty et al., 2006; Langberg et al., 2016). For children with special needs, caregivers' stress factors can be considerably heightened, especially due to the unknown special education services (Bassok et al., 2018; Dockett & Perry, 2004; Margetts & Keinig, 2013). Fauntleroy (2009) noted, "Raising a child with a disability can cause more daily stress and long-range health problems than parenting a child without disabilities" (p. 5). Parents of children with disabilities tend to share common concerns with other families. These caregivers often share inquiries connecting to how, when, where, and with whom their children's special education services will be provided (De Feyter & Winsler, 2009;

Goodrich et al., 2015). Preschool special education programs may cause parents to agonize over the likelihood of exhausting solid educational provisions (Woodman, 2014). This study examined possible stress-related factors during the CPSE-to-CSE transition process.

According to IDEA (1994, 2004), the CPSE is composed of mandated participants that include a chairperson, preschool teacher (if applicable), the caregiver(s), and a representative from the evaluation team. When CPSE convenes, they attain agreement on whether the child is deemed a "preschooler with a disability" according to the existing evaluations and assessments. The school-aged committee (CSE) is comprised of the chairperson, school psychologist, general education teacher, special education teacher, the caregiver(s), and any other professionals knowledgeable about the child's educational needs (IDEA, 1994, 2004). When discussing a CPSE-to-CSE transition, the participants at the CSE level are mandated to attend the CPSE meeting as well. During the initial meeting of the CSE, the determination of eligibility is established in accordance with the definition of one of 13 potential federally recognized educational classifications. Children who are deemed eligible for services at the CPSE do not automatically meet the requirements for services when they enter kindergarten. Children who obtained support services under the auspices of CPSE need re-evaluation assessments by the CSE when they reach the age of five to determine their eligibility (Curtis, 2005; Dabkowski, 2004; Fitzgerald & Watkins, 2006; IDEA, 1994, 2004; Puccioni, 2018).

As participants of the CPSE/CSE, caregivers are "equal partners" to the procedure (IDEA, Part 200). Caregivers are also allowed to invite individuals that they deem to have "knowledge or special expertise to be a member of the committee on special education" on their children's behalf (IDEA, Part 200.1, 2011). Once the committee has completed the transitional meeting and determined that the child meets one of the 13 educational classifications that

requires services and supports and/or a specialized learning environment, the results are written on an Individual Education Program (IEP) document. The IEP is a legally binding, written document, that must be assessed and renewed by a subcommittee and/or a full committee yearly (Dockett et al., 2011; Fitzgerald & Watkins, 2006). This review is a safeguard meant to ensure that a student is making acceptable and measurable progress in their educational development. Objectives are reviewed and revised, and programs and/or services are adjusted as needed to aid explicit outcomes. While these guidelines and procedural safeguards appear reasonable, the experiences of committee participants entangled in the procedures can differ. Committee participants who have completed the educational course may have expectations of alternate conclusions. If needs are not achieved, discord and conflict might be observed among participants (Dabkowski, 2004; Eggum et al., 2014; Puccioni et al., 2019). When dissent transpires, mediation is first considered. Mediation is not legally binding and, as such, if participants still cannot settle their conflict, an impartial hearing can be requested.

Historical Overview

The Individuals with Disabilities Education Improvement Act (IDEIA) of 2004 is a section of American lawmaking and regulation that offers families and legal guardians of children the prospect to collaborate with school districts in creating and employing inclusive and comprehensive approaches that enhance educational outcomes for students with disabilities, identified as Individual Education Programs (IEP). Caregivers' considerations about their knowledge and involvement in special education, and what they would like for their children, are vital historic elements of the federal special education law (Hung Lau & Power, 2018; NCLBA, 2001; Yell, 2005).

With the enacting of the Education of All Handicapped Children Act (EAHC) of 1975 and the IDEA amendments of 2004, federal regulation has vested primary caregivers of children with disabilities with explicit rights and responsibilities during the special education process. These regulations afford caregivers the ability to participate in the decision-making procedures (meetings) determining their children's educational wants, needs, and objectives. In this framework of interrelation with the local municipality, the regulations allow caregivers to assist in their children's educational goals and placements and require institutions to respect and value the caregivers' contributions. This procedure also allows caregivers to initiate judicial practices and actions if an agreement cannot be achieved through mediation (IDEA, 2004).

Current federal regulation entitles caregivers to assemble at the meeting with educational professionals and state their requests concerning their perspectives on developmentally applicable and appropriate education for their children (IDEA, 2004). When a special education committee attends and heeds to caregivers in the planning method, and when the committee and parents can reach and achieve positive shared decision outcomes, the caregivers are able to help their children in their education practices (Correia & Marques-Pinto, 2016; Epstein et al., 2002; Sheridan et al., 2017; Walsh et al., 2018). As such, caregiver participation and the reinforcement of a child's learning are important influences on student achievement (Albritton et al., 2003; Balduzzi et al., 2019; Davis & Carter, 2008; Epstein, 2005).

IDEA Commissioner Regulations Part 200 (2011) and 300 (2011) contain procedural safeguards involving how students with educational disabilities are identified. The guidelines were reauthorized with revisions in 1990, 1997, and 2005. The principles describe rights of the legal caregiver of a child with a special need that safeguard the child and provide the child access to free appropriate public education (FAPE) within the least restrictive environment (LRE). The

phrase FAPE should be highlighted and stressed, as this is not considered "ideal" but "appropriate."

Society Context

Prior research has indicated that collaboration between caregivers and schools begins during the transition process (Curby et al., 2018; Dilek, 2018; Lees & Kennedy, 2017). According to Harper (2016), a transition refers to the process of change that children/families experience when moving from one setting to another. This research study examined two separate committees, CPSE and CSE. There are various restrictions and parameters in the federal guidelines that oversee the two types of committees. The CPSE meets concerning preschool children between the ages of three and five. After the age of five, the CSE is responsible for students through age 21 (IDEA, 1994, 2004).

Ultimately, researchers have supported and encouraged better collaborative practices to avoid disagreements between parents and districts (Boyle et al., 2018; Harper, 2016; Hill & Hill, 2012; Mandlawitz, 2002; White, 2014). A collaborative approach has been recognized as supporting the current approach (i.e., legal) embraced by some families (Hill, & Hill, 2012; Mandlawitz, 2002). Hill and Hill (2012) disclosed that parental advocacy attitudes developed into "us versus them" challenges with educational institution systems. In addition, families most likely to implement legal methods typically originated from socioeconomically affluent households (Francis et al., 2016). Hill and Hill (2012) noted that when the CSE speak about a particular child, while focusing on the documents and not the child himself or herself, parents become increasingly skeptical of the educational institution systems.

Theoretical Framework

This study was grounded in ecological systems, which align with research on how a child's environment influences his or her development. Bronfenbrenner (1986) was a prominent educational philosopher who theorized that a child's development is defined by layers. Bronfenbrenner (1986) named this theory *ecological system*, and the theory was later renamed *bioecological systems theory*. The theory explained that a child's own biology is the primary environment fueling his or her development. This system focused on the context of a child's environment. Bronfenbrenner theorized that, as a child grows, interactions within these environments become more complex. His theory proposed that these ecological systems interact and influence each other in all aspects of the child's life. The *microsystem* is the smallest stage and is in the immediate environment. It comprises a child's daily home and community environment. It involves personal relationships with family members and adults (i.e., teachers).

Several other theorists over the years have addressed the vital position of caregivers in education (general and special education). Beginning with Aristotle and Plato during the fourth century, caregivers have been regarded as important motivating and affecting agents in the education of their children, particularly during the early years of life (Epstein, 2001, 2002; Raffagnino, 2019; Vygotsky, 1978). Aristotle believed that the reason for education was to nurture and improve a student's capability for reasoning and understanding. Piaget (1970) and Vygotsky (1978) theorized that children absorbed their education through social collaboration and interaction as well as through exposure within a learning environment. Bronfenbrenner (1986) understood that children's development was formed through the connection between a caregiver and child, as well as the child's surroundings. This connection was an outcome of the motivations and encouragement within the child's surroundings, including caregivers, friends,

educational professionals, and culture (Bronfenbrenner, 1986). The successful transition from prekindergarten to kindergarten gestures back to these three theorists who considered and trusted in the educational process.

Jean Piaget (1970) stated that it was society's responsibility to establish the goals of the education provided. This is viewed in two ways: by restrictions, such as language, opinion, the family or economic disadvantage; and by state. Piaget (1970) theorized that educators can facilitate and assist parents with understanding when it is the correct time to introduce learning and strategies for the child to enhance their development and transition to next level.

Problem Statement

The transition process involved the capacity to escalate stress factors (i.e., anxiety, fear, etc.) for caregivers (Ansari & Winsler, 2016; Durneej et al., 2021). A child's transition from early childhood education (ECE) to kindergarten was the subject of research and policy (e.g., Goodrich et al., 2016; IDEA, 2006; Kielty et al., 2013; Margetts & Keinig, 2013). According to Ahtola et al., (2016), an organized and detailed transition process leads a child to better adjustment in school, which can increase the likelihood of educational success. Parental research of the implications and inferences held by caregivers connected with the CPSE-to-CSE transition process will ensure a smooth adaptation from preschool to kindergarten. Studies from Abry et al., (2015), Ahtola et al., (2016), Mwangi (2016), and Pianta (2001) examined transitional stress apprehensions were related to inform and convey material appropriate to confronting anxiety pressures associated with caregiver expectations regarding the CPSE-to-CSE transition process. However, the studies conducted to date have focused on primary caregivers and educators within the general education sphere, and not with students who were classified as preschoolers with disabilities.

The transition process from CPSE-to-CSE can be a time of significant transformation for families and their children (Ansari & Winsler, 2016; Lago, 2017; Sahin-Sak, 2016). Transition preparation is a collected effort to recognize and operate services to ensure that a child experiences a positive transition into the elementary school age environment (Abry et al., 2015; Kielty et al., 2013; Schilder et al., 2017). The transition to kindergarten is not only about the student, but also about educators arranging and preparing families for alterations in environmental settings (Bailey et al., 2017). Increased levels of anxiety about the alterations, with children moving from one place to another, often mean that caregivers who have children with special needs experience an increase in emotional dysregulation (Thullen & Bonsall, 2017). The literature has not fully addressed the experiences of parents of children with special needs transitioning to kindergarten. It has not specified how parents' stress levels can increase prior to the transition, nor does it reveal if a workshop offered for the parents could assist in decreasing stress factors. The problem is that the literature does not address whether an informative workshop for parents before the transition meeting would decrease their stress.

Purpose Statement

The purpose of this quantitative, quasi-experimental static group comparison was to measure variables related to the CPSE-to-CSE transition process as they relate to parental stress. The researcher surveyed parents of special needs children who were exiting CPSE and entering CSE. The study examined if stress level of parents was different between the group that attended a workshop and a group that did not, prior to a child's transition from Committee on Preschool Special Education (CPSE) to Committee on Special Education (CSE). The research examined the responses of parents of special needs students who attended a specialized self-contained classroom environment and who attended a CPSE-to-CSE Transition Workshop versus parents

of students with special needs who also attended a self-contained classroom environment and did not attend the workshop.

A quantitative, quasi-experimental static group comparison design, applying a survey method, was utilized to obtain the data gathered from a sample of 180 parents with children with disabilities from CPSE-to-CSE. Out of the 180 participants, 90 (n = 90) attended a transition workshop, and the other 90 (n = 90) did not attend the same workshop. The study examined the main effect of legal guardians that attended a transition workshop. The study examined transition workshops, which detailed what a transition meeting entailed to parents, that benefited in decreasing parental stress factors. The independent variables included workshop attendees and non-attendees. The dependent variable was parenting stress score.

According to Wilder and Lillvist (2021), a parent of a child with a disability may feel anxious and nervous about the transition from preschool special education (CPSE) to school age special education (CSE). A parent with a child who has a special need may have developed close relationships with the educator(s) and providers and feel happy and relaxed with them (Lago, 2017; Schmitt et al., 2015). The thought of another (or several) individuals replacing the current provider and/or educator can be stressful. However, the transition process should be viewed as a new opportunity for the parent, child, and the family. When schools and families work collaboratively to help the child transition from prekindergarten to kindergarten, the outcome can be positive for students (Drummond et al., 2016; Rathbun & Germino-Hausken, 2001). Family participation has been indicated as a crucial factor in tackling transition concerns linked to readiness (Boethel, 2004). Representative studies have suggested that early years of school may be predictors of later school achievement (Entwisle & Alexander, 1998; Ramey & Ramey, 2004). The CPSE-to-CSE transition process should be stress free for all parties engaged in

successfully moving a prekindergarten student to kindergarten. The manner in which the primary caregiver perceives the process should be informative and incorporated with collaborated measures that allow a smooth transition.

Significance of the Study

IDEA was originally established to assist parents with securing procedural safeguards to protect a child's services under special education. The CPSE-to-CSE transition process has been considered a leading cause of primary caregiver stress and anxiety (Balduzzi et al., 2019; McIntyre & Wildenger, 2010). The outcomes of these meetings often impair relationships and create an argumentative environment between the members of the committee, which can affect the teamwork in educational settings and the partnerships between the educator and caregiver (Ahtola et al., 2016; Balduzzi et al., 2019; Barroso et al., 2018; Boonk et al., 2018; Cook et al., 2017). Education regarding conceivable answers could prove valuable to caregivers and district stakeholders. Through the recognition and inspection of current prospects and anticipations, it may contribute to the efficient cooperation and expansion of such relationships. Currently, the groundwork of the CPSE-to-CSE transition process includes telephone calls with the chairperson in the school district. At times, the chairperson is not able to connect with the parent until the day of the meeting. This study revealed another opportunity to collaborate with the caregiver to facilitate and/or help with the guardians' ability to grasp the transition process. This study allowed for new discoveries that expand the body of the literature reflected in prior studies (Ahtola et al., 2015; Rimm-Kaufman et al., 2000) by including parents of students with special education concerns and/or needs. Lastly, this study assessed if attending a workshop was beneficial for the transition meeting, and in what way(s).

Parents and/or guardians can be deemed as clients of the educational system, as they promote and support education possibilities for their children (Duncan, 2003; Fauntleroy, 2009). During the 19th century, women requested assistance for child-rearing and coping strategies before the establishment of child training and the promotion of education as an occupation (Beatty et al., 2006). The guardians' function, position, and perspective as participants are important factors in the education of their children (Lo Casale-Crouch et al., 2008; Perras, 1995; Porche et al., 2016). Assessing the attitudes of various parents will give educators a more suitable and specific understanding of each child's desires and needs (IDEIA, 2004; Westling, 1996, 1997). This understanding can help school districts in special education. The reason for this research study was to survey factors that endorse positive parental involvements and participation in the preschool-aged child's transition to kindergarten. The collaborative approach and connection meant to assist parents in the transition planning for their children was included as well. This research added to the cumulative understanding and knowledge in special education, specifically correlated to caregiver approval of the special educational procedures and services obtained. The study was directed to some caregivers that have voiced interest in the past and exhibited concern that their children were excluded from services under the auspices of special education and parent involvement during the meeting process, which ultimately led to the survey paradigm utilized in this study.

The results also exposed parents' concerns for change during the CPSE-to-CSE transition process, while allocating suggestions for improvements. It was the researcher's hope that the findings of the study guided caregivers and school districts into partnerships that advanced and enhanced special education services and programs for children by offering feedback to the school district implementing the survey. It also may give other school districts the opportunity to

examine parental input in the survey to determine if and what changes can be implemented to improve overall collaboration.

The research study was important to the field of special education because it emphasized the need of successful CPSE-to-CSE transition process meetings for children with disabilities in partnership with caregivers. Under federal law (IDEA), input from primary caregivers is now a sustainable means of connecting a student with their educational goals at the meeting table. Additionally, the study disclosed what some caregivers are seeking from special educators and administrators to help them collaborate with the special education department. By using better methods of communication related to special education, parents can better understand the information shared at the meeting and their roles as members of the committee.

Research Question

The following research question guided the study research design:

RQ1: Is there a difference in parenting stress scores between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting?

Definitions

1. *Autism* – Is a developmental disability significantly affecting verbal and non-verbal communication and social interaction, generally evident before age three that adversely affects a student's educational performance. Characteristics often associated with autism are engagement in repetitive activities and stereotyped movements, resistance to environment change or change in daily routines, and unusual responses to sensory experiences. The term does not apply if a student's educational performance is adversely affected primarily because the student has an

emotional disturbance as defined in paragraph four of this subdivision. A student who manifests the characteristics of autism after age three could be diagnosed as having autism if the criteria in this paragraph are otherwise satisfied (Part 200.1, 2011).

2. *Collaborative partnership* – Parents/schools operating together for the benefit of the student (Yell, 2005).
3. *Deaf/Blindness* – A concomitant hearing and visual impairments, the combination of which causes such severe communication and other developmental and educational needs that they cannot be accommodated in special education programs solely for students with deafness or students with blindness (Part 200.1, 2011).
4. *Deafness* – A hearing impairment that is so severe that the student is impaired in processing linguistic information through hearing, with or without amplification that adversely affects a student's educational performance (Part 200.1, 2011).
5. *Disability* – A child with a disability means a child evaluated in accordance with 300.304 through 300.311 and who meets one of the thirteen educational classifications (IDEA, 2004).
6. *Due Process Safeguards* — The protections afforded to children and their parents under IDEA. Safeguards include, obtaining parental consent for all evaluations and educational placement decisions, confidentiality of all records relating to a child with a disability, independent student evaluation at public expense, and due process hearings when the school and parent may disagree (IDEA, 2004).
7. *Emotional Disturbance* – A condition exhibiting one or more of the following characteristics over a long period of time and to a marked degree that adversely affects a student's educational performance:

(i) An inability to learn that cannot be explained by intellectual, sensory, or health factors.

(ii) An inability to build or maintain satisfactory interpersonal relationships with peers and teachers.

(iii) Inappropriate types of behavior or feelings under normal circumstances.

(iv) A generally pervasive mood of unhappiness or depression; or

(v) A tendency to develop physical symptoms or fears associated with personal or school problems. The term includes schizophrenia. The term does not apply to students who are socially maladjusted, unless it is determined that they have an emotional disturbance (Part 200.1, 2011)

8. *Free Appropriate Public Education* (FAPE) – An educational right of all students in the United States that is guaranteed by the Individuals with Disabilities Education Act (IDEA, 2004).
9. *Hearing Impaired* – An impairment in hearing, whether permanent or fluctuating, that adversely affects the child's educational performance but that is not included under the definition of deafness in this section (Part 200.1, 2011).
10. *IEP* – An Individual Education Program developed by a team of federally mandated participants (Wright & Wright, 2006).
11. *IDEA* – Individuals with Disabilities Education Act, a federal law updated in 2004 that protects the rights of persons with disabilities (Yell, 2005), and which increased the importance of parental involvement (IDEIA, 2004).
12. *Intellectual Disability* – A significantly sub-average general intellectual functioning, existing concurrently with deficits in adaptive behavior and manifested during the

developmental period, that adversely affects a student's educational performance (Part 200.1, 2011).

13. *Learning Disabled* – A disorder in one or more of the basic psychological process involved in understanding or in using language, spoken, or written, which manifests itself in an imperfect ability to listen, think, speak, read, write, spell, or to do mathematical calculations, as determined in accordance with section 200.4(j) of this Part. The term includes such conditions as perceptual disabilities, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include learning problems that are primarily the result of visual, hearing or motor disabilities, or an intellectual disability, of emotional disturbance, or of environmental, cultural, or economic disadvantage (Part 200.1, 2011).
14. *Least Restrictive Environment* (LRE) – Placement of students with disabilities in special classes, separate schools, or other removal from the regular educational environment which occurs only when the nature or severity of the disability is such that even with the use of supplementary aids and services, education cannot be satisfactorily achieved. The placement of an individual student with a disability in the Least Restrictive Environment shall:
    - Provide the special education needed by the student.
    - Provide for education of the student to the maximum extent appropriate to the needs of the student with other students who do not have disabilities; and be as close as possible to the student's home (IDEA, 2004; Part 200, 2011).

15. *Multiple Disabled* – A concomitant impairments (such as intellectual disability – blindness, intellectual disability – orthopedic impairment, etc.), the combination of which cause such severe educational needs that they cannot be accommodated in a special education program solely for one of the impairments. This term does not include deaf blindness (Part 200.1, 2011).
16. *Nondiscriminatory Identification and Evaluation* – The process and instruments used to identify individuals with a disability. Schools are required to use nonbiased methods as well as multiple approaches in the evaluation process to ensure that there is no discrimination based on race, culture, or native language. All evaluation instruments must use the child's first language. No identification or placement decisions may be based on a single evaluation instrument or test score (IDEA, 2004).
17. *Orthopedically Impaired* – A severe orthopedic impairment that adversely affects a student's educational performance. The term includes impairments caused by congenital anomaly (e.g., clubfoot, absence of some member, etc.), impairments caused by disease (e.g., poliomyelitis, bone tuberculosis, etc.), and impairments from other causes (e.g., cerebral palsy, amputation, and fractures or burns which cause contractures) (Part 200.1, 2011).
18. *Other Health Impaired* (OHI) – Having limited strength, vitality or alertness, including a heightened alertness to environmental stimuli, that results in limited alertness with respect to the educational environment, that is due to chronic or acute health problems, including but not limited to a heart condition, tuberculosis, rheumatic fever, nephritis, asthma, sickle cell anemia, hemophilia, epilepsy, lead poisoning, leukemia, diabetes, attention deficit disorder or attention deficit

hyperactivity disorder, or Tourette's Syndrome, which adversely affects a student's educational performance (Part 200.1, 2011).

19. *Parent Participation* – Parents of a child with a disability must be a member of any group that makes decisions regarding the placement and LRE of their child. Parents have a right to notification of all meetings regarding their child's placement, access to planning and evaluation materials, and notification of any planned evaluations. Both parents and students must be invited to attend IEP meetings (IDEA, 2004).
20. *Related services* – Term used in special education referring to supportive services that are required to assist a student with a disability to benefit from special education, such as physical, occupational, or speech therapy (IDEA, 2004).
21. *Speech or Language Impaired* (SLI) – A communication disorder, such as stuttering, impaired articulation, a language impairment of a voice impairment that adversely affects a student's education performance (Part 200.1, 2011)
22. *Transition Meetings* – Meetings that begin (initial), update (annual review), transfer or end (declassify) the special education recommendation in an educational institution in the State of New York (IDEIA, 2004).
23. *Traumatic Brain Injury* – An acquired injury to the brain caused by an external physical force or by certain medical conditions such as stroke, encephalitis, aneurysm, anoxia, or brain tumors with resulting impairments that adversely affect educational performance. The term includes open or closed head injuries or brain injuries from certain medical conditions resulting in mild, moderate, or severe impairments in one of more areas, including cognition, language, memory, attention, reasoning, abstract thinking, judgement, problem solving, sensory, perceptual, and

motor abilities, psychosocial behavior, physical functions, information processing, and speech. The term does not include injuries that are congenital or caused by birth trauma (Part 200.1, 2011).

24. *Visual Impairment* – An impairment in vision that, even with correction, adversely affects a child's educational performance. This term includes both partial sight and blindness (Part 200.1, 2011).

25. *Young children* – Children from preschool through kindergarten age. This definition was specific to the sample in the present study (Wright & Wright, 2006).

CHAPTER TWO: LITERATURE REVIEW

Overview

The purpose of this literature review was to present the elements of the special education transition process. The chapter opens with the theoretical framework. This study was grounded first in Bronfenbrenner (1986) bioecological theory of development. In addition, Vygotsky's (1978) sociocultural theory, and the ecological and dynamic model of transition are also foundational to this research study. The literature review examined parental stress factors, which influenced the transition process from preschool to a kindergarten setting. It also examined possible barriers between cultures and special education. A thorough review of the literature pertinent to the transition and legislation that govern special education completes the chapter which ends with a summary.

Theoretical Framework

Researchers have studied how children transition from one setting or environment to another. In order to effectively assess the current status of the transition process for children with special needs, a thorough understanding of the underlying theory behind child development and the role of parents is necessary. The theoretical framework addressed the ecological and bioecological models described by Bronfenbrenner (1986) that showed the way a child interacts with the family unit throughout the early years of development. The theory demonstrated the hierarchy and factors that influenced a child's development.

Ecological theory offered an effective and beneficial framework for comprehending the various contexts that affect a child's development (Bronfenbrenner, 1986). A child's adjustment to kindergarten is multi-determined; successful transition not only displays an individual child's skills and abilities but also includes a child's parents and his or her family, the early childcare

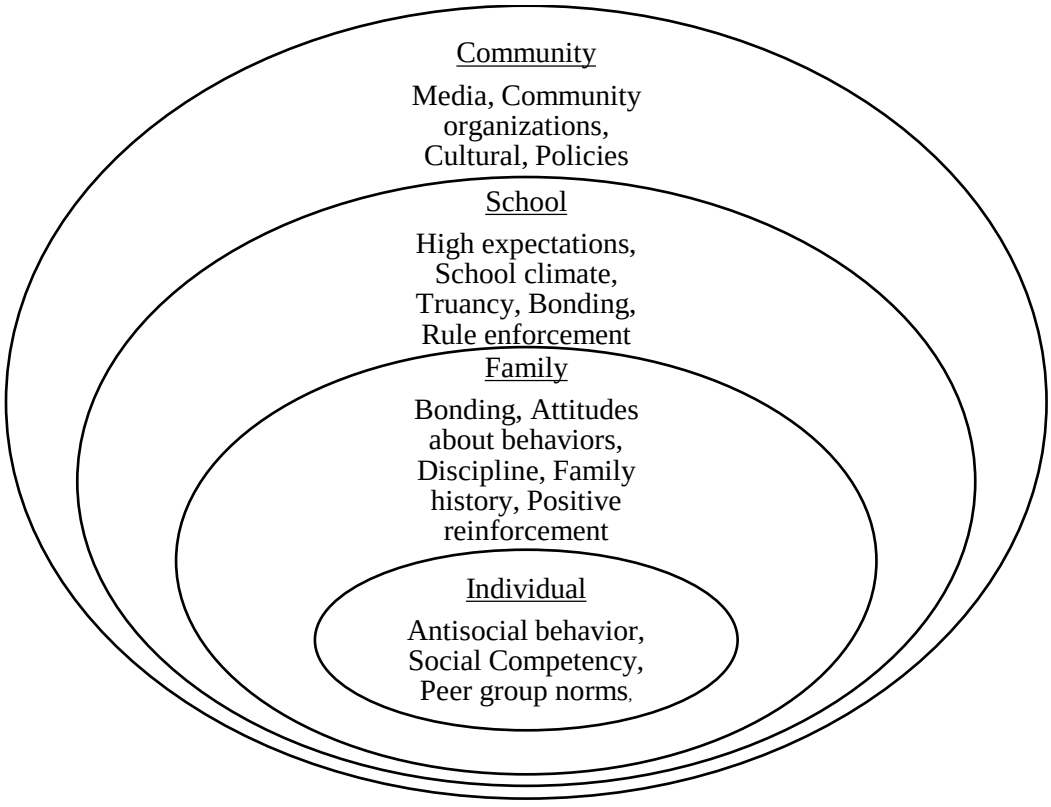
environment, schools, and community resources (Rimm-Kaufman et al., 2000). Both children's personality characteristics (e.g., inhibitory control and attentional focus) and elements of children's environments (e.g., family risk, parental control) are applicable in kindergarten. The start of school signifies a significant time for understanding children's capability to acclimate to a new environment. As children approach the kindergarten age (five), they experience a shift in the degree to which they depend on and trust external support versus internal processes for handling and controlling their behavior.

The theoretical basis for the present work was drawn from the ecological model described by Bronfenbrenner (1986) that emphasized the manner in which children's competencies was distributed across the contexts in which they spent their time; many of these contexts include time spent with family. The ecological model offered a vantage point for examining the family, and other contextual factors (e.g., classification and workshop) that have the potential to influence the transition process. Figure 1 demonstrated the hierarchy of Bronfenbrenner's theory. The theory viewed how, and what, factors influenced and enhanced a child's development. Bronfenbrenner's theory defines complex "layers" of environment, each influencing a child's development. The first level, microsystem, is one of the most influential levels of the ecological systems theory. In the microsystem, the child has direct contact to home and school environment. During this time, children's vocabularies begin to develop. They begin to establish a mature tripod pencil grip and they begin to develop self-esteem. The mesosystem is the next ecological system and consists of the interactions between the different parts of the microsystem. Interconnections become established between parent and child. These interactions positively influence a child's development because many elements of microsystem are working together, which have an indirect impact on the child's development. The exosystem is the third

model of the ecological system theory. This system involves a connection between the child and a social setting (i.e., parent's employment) in which the child is not involved. Macrosystem is the next system and involves the culture in which the child lives. This system also comprises the child's culture and values. It is the largest distant group of people and places to the child that directly influences the child (i.e., cultural values, socioeconomic status, etc.). The last system is the chronosystem. It indicates the influence of both change and constancy in the child's environment. This system may include the family structure (and change in structure) and parent's employment status.

Figure 1

Bronfenbrenner Family System



Note. Alyla. K, CC BY SA. (n.d.). *Bronfenbrenner's ecological theory diagram.* [Pinterest post]

Bronfenbrenner (1986) believed microsystems are important because they incorporate practice, interaction, and teachable learning in the home and community environment. This learning is conducted via direct and indirect modeling. Direct modeling is hands-on learning, and indirect modeling is modeling learned through observation and shared experiences. The system creates a broader arrangement that influences a child's development (i.e., mesosystem). The mesosystem pertains to the relationship between the child and parent. Parents perceive their child's development in various stages of life as they devote time to them in daily activities inside and outside the home setting. This perception allows parents to know the various and continuing needs of their children within different contexts (Mashburn et al., 2018; Purtell et al., 2020).

This research study was based on the premise that a child's parents are the foundation of his or her development. The anxieties parents exhibit and the concerns they display are significant for directing the specialists in planning appropriate educational goals and objectives that meet children's needs (Yelverton & Mashburn, 2018). This is especially true during the CPSE-to-CSE transition meeting process. A transition meeting occurs when the parent(s) meet with the school district of residence to discuss special education eligibility and possible special education services under the school age committee. Under Federal Law Part 200 (Yelverton & Mashburn, 2021) once a child is referred to a school district for evaluations, the school district has 60 calendar days to assess the child's capabilities in the classroom, conduct a meeting, and determine eligibility. If the student does not meet eligibility requirements (two standard deviations below the mean and/or an impairment that affects the cognitive skills and abilities of the student), the case will be closed. Under due process, parents have the right to appeal the decision and, based on that appeal, another meeting is scheduled. Should the evaluation(s) reveal two standard deviations below the mean, for one given area, the child would be deemed eligible

for services. The research conducted examined stress factors for parents that had a child who attended a special education setting (4410 program) during the CPSE-to-CSE transition process.

The Bioecological Theory of Development

Bronfenbrenner (1986) believed that children should be viewed within the complex systems of their changing environments. His perspective considered interactions that occur at the micro-, meso-, exo-, macro- and chronosystem levels and their contributions to a child's development. Essentially, children's transition to school is shaped by multiple systems, including the family (Pianta, 2003). Examining the transition process in special education from the perspective of the parents or guardians necessitates seeing the ecosystems and the development throughout the cycle. Because parents are the individuals who create and control a child's everyday activities, they comprise a microsystem that connects with the other systems. To identify the parents' position in the transition process, the researcher needed to understand the connection between and among the various systems encircling parent and child.

In the 1970s, Bronfenbrenner produced the "ecosystems theory." This theory indicated the importance of recognizing the settings in which the child resides and relates to other people (i.e., family, school, community). The connections among these ecosystems are needed for the child's development, as well as for transitions from one ecosystem to another (Bronfenbrenner, 1986; Bronfenbrenner & Morris, 1998). In 1979, Bronfenbrenner identified the child as the focus of the ecosystem's layers. The microsystems layer influences and affects his or her development. The microsystem is close to the child and signifies where the child interrelates with others (i.e., parents, teachers).

Bronfenbrenner (1979) focused on the family function in childhood development, with restrictions. He defined a microsystem as:

> A pattern of activities, social roles, and interpersonal relations experienced by the developing person in a given face to face setting with a particular physical, social, and symbolic feature that invite, permit, or inhibit engagement in sustained, progressively more complex interaction with, and activity in, the immediate environment. (p. 34)

The next level is the mesosystem. This level refers to the connection between two (or more) microsystems that contain the developing person. When the child is becoming a developing person, a given area (i.e., school) can directly influence the child's development. In other words, a mesosystem is a system of microsystems (Bronfenbrenner, 1986). This section relates to the continuous contact between the family and educators that allows the educational professionals to become more aware of a family's culture and needs. This, in turn, can help the professionals deliver services (organization, timeline, outside resources) that meet the family's expectations (Cook et al., 2017; Cook et al., 2019).

The exosystem follows next in the bioecological theory and can affect a child indirectly. This area denotes the connection between two or more settings. This level includes factors such as policies, media, social networks, and community. This system does not involve the developing person (i.e., the child), but the events (i.e., transition) that can affect the developing person.

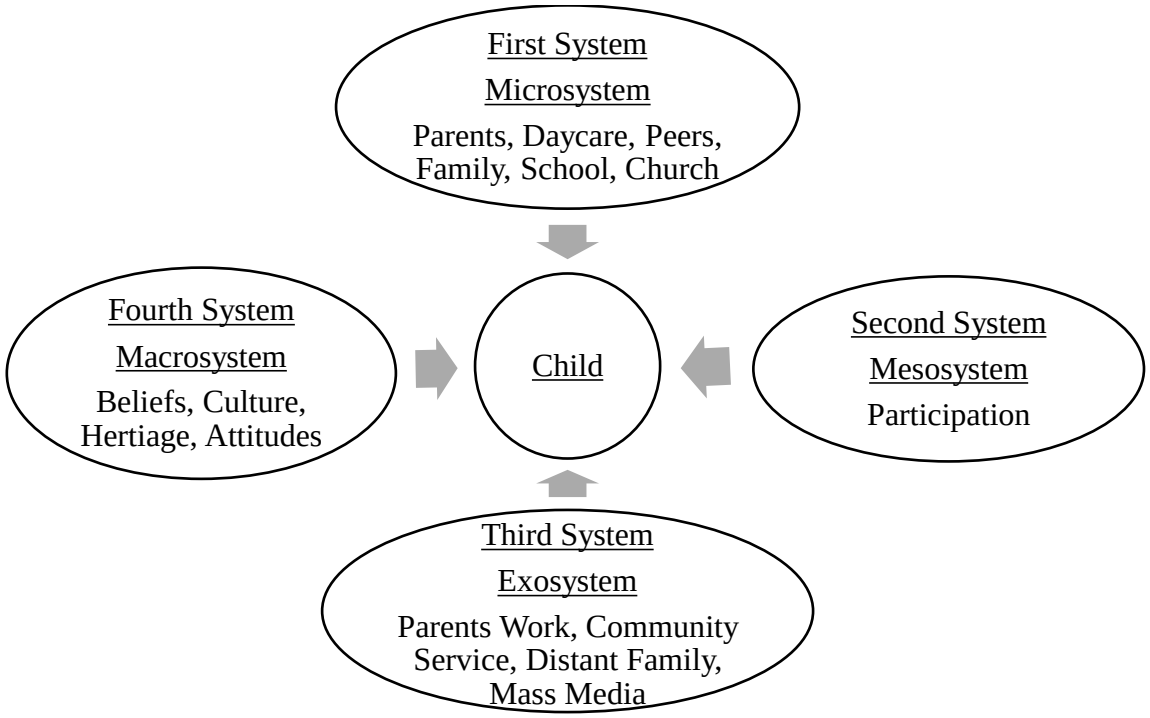
The next level layer is the macrosystems. This level refers to the culture in which the child resides (i.e., beliefs, lifestyle, and traditions). This level pertains to a child's need to explore outside the culture to identify other social and psychological features. This layer also includes the socioeconomic status of the parent and family. It includes the parents and educational setting as part of the larger cultural context.

The chronosystem is another level that interacts with all ecosystems. The change can be seen in a person's characteristics and in the environment in which they live (Bronfenbrenner, 1986). These changes can include changes in family dynamics, economic status, and residence. Within this level, transitions and adaptations in the child's life affect his or her development (Bronfenbrenner, 1986). The many changes that a child undergoes offer opportunities for new learning experiences (Duncan et al., 2018).

Bronfenbrenner (2001) suggested a bioecological model that describes the child's development within the joint interaction with people and the surrounding environment. The changes in the settings that occur in the child's life replicate the transition process. Throughout this process, parents should be active participants and involve themselves with children during transitional times (Cook et al., 2019; Snow, 2013).

Figure 2

The Bioecological Model of Development



Note. Santrock, John. (2008). *Bronfenbrenner: ecological theory of child development*. [Pinterest post].

Accordingly, this research study examined Vygotsky's sociocultural theory and the ecological and dynamic model of transition to concentrate on parents of children with special needs and their position in the transition process. Vygotsky (1896-1934) was a Russian theorist whose philosophies influenced the field of education and psychology. Vygotsky proposed that the child is influenced by the sociocultural (i.e., combination of social and cultural factors) setting during the early stages of life. This account was based on the exposure and influences of parents and others (Lantolf, 2000). Vygotsky's (1978) sociocultural theory stresses the fundamental role of social interaction (i.e., cooperative and associated play) in the development of cognition. He strongly believed that community and caregivers are central in the process of

making meaning.

Vygotsky stressed that learning was necessary in the process of developing (1978). He argued that culture was transmitted from one generation to the next through formal (school setting) and informal (life experiences) education. This can explain the role of transition from one setting to another, as well as increase (when not supported) reactive reflexes (i.e., increased stress). Williams and Burden (1997) disputed that sociocultural theory significantly influences child development. They theorized symbolic language assists learners into their proximal development and aid in the transition process. Sociocultural theory proposes that children are active in their own learning and that the same environmental aspects can have different effects on different children depending on social and/or cultural factors. The ability of a child to create meaning from his or her social and educational interactions will influence his or her experience of the transition. Vygotsky (1978) suggested that the child internalizes social interactions to which they are exposed. This internalization will have direct effects on a child as he or she transitions between preschool and primary school. Based on this theory, the transition is a process achieved through interaction between all the stakeholders (i.e., child, parent, family, school). As Margetts and Kienig (2013) advised:

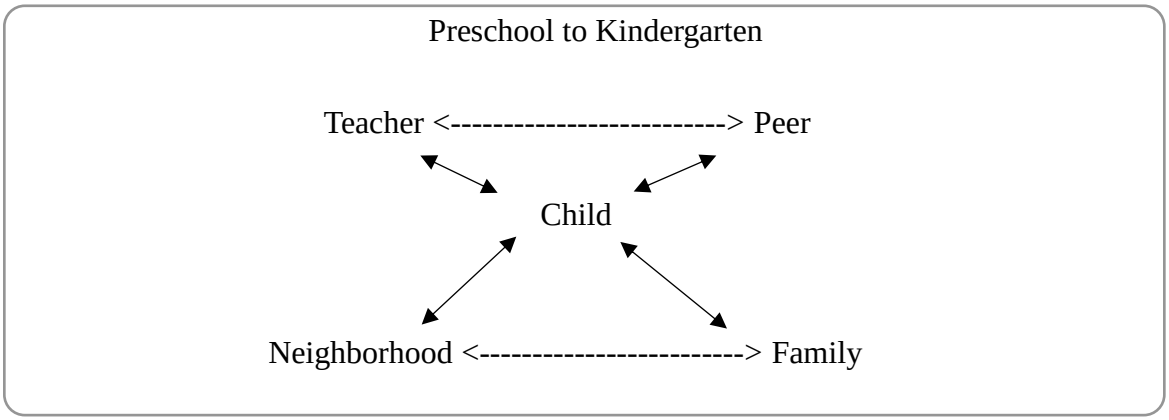
> Socio-cultural theory provides a framework for understanding how belief systems, cultural values and relationships shape the ways that transition to school and children's development and learning are conceptualized and experienced at the individual and macro-system levels, both directly and indirectly…the communication and involvement of all participants is critical in establishing agreed understandings and promoting positive outcomes for all involved. (p.149).

The Ecological and Dynamic Model of Transition

Rimm-Kauffman et al., (2000) implied that the ecological and dynamic model of transition is a crucial area within the transition process. This model is critical for understanding the connection between the individuals who are engaged in the transition process and how the interactions within that process affect the child. This model combines the characteristics of the child to calculate the child's adjustment to the new setting. The concepts of the model build upon the needed relationships for the transition to be successful and to emphasize the development of the family's position in the transition.

Figure 3

Model of Transition



This model focuses on the enhancement of relationships between all parties. The enhancement of relationships is the process of going from parallel to cooperative play. School readiness is a multi-tiered construct that assesses how cognitively, emotionally, and socially children are prepared within the educational environment. Research has focused on school readiness not only because of its importance in the transition process but also for long-term success (Besi & Sakellariou, 2019; NASEM, 2016; NCHS, 2006). The change in an environment and routine can be a challenging, reactive, and stressful experience for everyone involved in it

(Ansari & Winsler, 2016; Pianta, 2003; Fabian & Dunlop, 2006). The significance of an effective and positive transition is perhaps more stressful for the families of children with developmental disabilities (Hill et al., 2015). There is an increasing amount of literature and work connecting children's performance to their outcome of school transitions (Schachter, 2015). The aim is to recognize and understand reasons related to supporting positive outcomes during the transition process for parents of children with disabilities (Bailey & Blasco, 1990; Bailey et al., 2017; Hill et al., 2015).

Each of the learning approaches outlined by these theorists (bioecological and dynamic models) indicate that transitions might be catalyzed by a person's internal process (self-skills), imitation skills (modeling), and prior learning (life experiences and knowledge based). The ability to transition smoothly begins with each person's knowledge that the next stage is a new journey (i.e., steps to a different grade). Modeling of skills (the development of language, familiarity with a daily routine) begins within the home setting (Besi & Sakellariou, 2019).

Famous educational philosophers throughout the years have documented the important role of parents in the education (general and special) of their children. Beginning in the 4th century, and continuing through the centuries, parents have been viewed as crucial influences in the education of their children, especially during the primary years of life (Aristotle, 1967; Dworken, 1959; Epstein et al., 2002; Vygotsky, 1978). Vygotsky and Bronfenbrenner believed the purpose of education was to foster and enhance a student's potential for reasoning and understanding. Bronfenbrenner and Vygotsky believed children learned through social interaction and exposure within a learning environment. Bronfenbrenner understood the development of children was shaped by the interaction between a parent or individual and their environment. The path was a result of the stimuli and inspiration within the child's surroundings,

such as their parents, friends, school, and culture (Bronfenbrenner, 1986). Achieving a successful transition relates to the three theorists who believed in the educational and transitional process (Raffagnino, 2019).

Related Literature

School administrators and educators view collaboration with the parent as a catalyst for helping their child succeed in the transition from CPSE to CSE and academics (Cook & Coley, 2018; Francis et al., 2016; Gallagher et al., 2004). There is no other area (i.e., academics, sports) in the education of young children where collaboration makes more sense than the transition to kindergarten (Cook & Coley, 2017; Farran, 2016; Pianta et al., 2001). Parental involvement in the CPSE-to-CSE transitional process not only positively influences a student's achievements, but also improves the student's overall transition and school participation and improves the parent's satisfaction with the school personnel (Curby et al., 2018; Greene & Tichenor, 2003; Newland & Crnic, 2017; Plowen, 1967; Singh, 2003).

General Education versus Special Education

General education presents a standard state curriculum without modifications. The general education setting involves a typical classroom environment, where the educator lectures to the needs of the whole class (Ahtola et al., 2016; Ansari et al., 2016; Broekhuizen et al., 2016; Morgan, 2018). The educator implements procedures and methods regardless of the differences among students. Special education is the opposite. Although some areas between general and special education overlap, special education utilizes quite a different approach from general education (Duncan et al., 2018). The educator employs a certain modified special curriculum that focuses on individual needs.

Special education was enacted to provide a set of services to students who experience unique learning needs. Special education is defined as, “Specially designed instruction, at no cost to parents, to meet the unique needs of a child with a disability” (Duncan et al., 2018). The special education services may be delivered across a continuum of educational settings to students who have IEPs (Bilal et al., 2021; Brown & Guralnick, 2012; Fauntleroy, 2009; Janus et al., 2008; Martin & Doris, 2018).

Eligibility for services requires the student to have been diagnosed with disabilities (IDEA 2004, 2006; McIntyre et al., 2010; Puccion, 2018). Students who have been diagnosed with disabilities usually demonstrate difficulty in their proficiency to learn. These identified students require additional services and resources to effectively participate in the school setting. Children who typically qualify for special education services include those with one of 13 educational classifications (IDEA 2006; Sahin-Sak, 2016).

Educational Laws

This review of the literature related to educational laws begins with the origins of special education. The landmark civil rights decision, *Brown v. Board of Education* (1954), influenced the methods by which school districts served students. This decision launched the restructuring of government agencies and began to incorporate parental involvement in educational reform (Yell, 2005). The *Brown* decision, a civil rights expansion for minorities, also gave students with disabilities an equal opportunity for education (Duncan, 2003; Harrop et al., 2016; Hines & Winsler, 2016; Lascarides & Hinitz, 2000; Yell, 2005). After the *Brown* decision was delivered in 1954, the National Defense Education Act (NDEA) of 1958 provided for the preparation and training of teachers for children with disabilities. Congress allotted additional funds for the training of teachers in the *Expansion of Teaching in the Education of Mentally Retarded*

Children Act of 1958 (Yell, 1998, 2005). The *Elementary and Secondary Education Act (ESEA) of 1965* afforded further federal money to enhance and foster the education of educationally disadvantaged students through what is known as Project Head Start. The allocation of funds also included students with disabilities. The following year, *Title VI of the Elementary and Secondary Education Amendments of 1966* arranged support of grants for programs working with children with disabilities. Title VI was replaced by the *Education of the Handicapped Act (EHA) of 1970*, which was to become the basis for most of the legislation that followed.

The first civil rights law safeguarded the human rights of individuals with disabilities; this is known as Section 504 of the Rehabilitation Act of 1973. The *ESEA Amendments of 1974* allotted funding for programs reinforcing work with children from low socioeconomic backgrounds and those with disabilities. In 1975, the most noteworthy section of legislation to date was approved. *The Education for All Handicapped Children Act* amplified the federal government's position and responsibility in special education and detailed educational rights along with the agreement of federal funds as enticements. *The Education of the Handicapped Act Amendments of 1990*, also known as *Individuals with Disabilities Education Act* (IDEA), offered key variations in the language of the law for people. This law expanded on the definition of disabilities to include autism and traumatic brain injuries. IDEA implemented transition preparation by age 16 into the IEP. In 1997, IDEA was restructured, and, in 2004, it was amended again (Yell, 2005).

The Commissioner’s Regulations Part 200.1(2011) is facilitated by IDEA at the national level across the state education branches throughout the country. At the municipal level, the federal guidelines are interpreted and deciphered according to a state’s bylaws and policy. The advantages of special education laws for students with disabilities differ across the country

(Brown & Guralnick, 2012; Yell, 1998, 2005; Zirkel and Gischlar, 2008). The processes (referral to special education) and presentation (written document) that comprise the IEP also vary by state (IDEA, 2006). These differences suggest that public opinion about special education institutions and amenities at the national stage may be misinformed since each municipality may sanction rules differently.

The United States government and federal commissioner regulations agreed that early childhood education was important for students' learning and academic achievement (US DOE, 2007). The premise of the IDEA Amendment of 1997 was to increase and encourage collaboration between parents and school employees at the state and local levels. Primary caregivers must now be granted the opportunity to participate as active members in meetings related to the classification, assessment, and educational placement of their child in the context of their child's state-mandated Free Appropriate Public Education (Manship et al., 2015).

Parental participation and connection have long been documented as vital indicators of a school district's success, and parent involvement has similarly positive effects on a child's outlook and social performance (Moore et al., 2015). Collaborations (school districts and parents working together) positively influence achievement and improve parents' stances and attitudes toward the school and employees, which benefit school personnel (U.S. DOE, 2003).

While the *No Child Left Behind Act (NCLB) of 2001* has greatly influenced modern education, the methods and settings in special education are not as effectual as the measures of the first IDEA legislation. The prior legislation concentrated upon the success and value of educational opportunities, while special education law focuses more on access to general education curriculum, the equality of treatment between general and special education students, and the precise parental rights regarding shared decision-making (Yell, 2005; Zirkel and

Gischlar, 2008). NCLB asserted that realistic and reasonable modifications and accommodations were to be allocated during assessments for children receiving special education services (Bassok et al., 2018; Wright & Wright, 2006).

In the U.S. DOE (2007), the NCLB reauthorized the 1965 Elementary and Secondary Education Act, which signaled a fundamental and common-sense change in American education. The academic standards were to be set by states, and schools would be held accountable for meeting or not meeting these standards. The federal government would support these modifications with increased resources and flexibility (Friedman et al., 2016). The role of NCLB was and is to monitor if the additional funding allocated was successful in helping raise test scores and close achievement gaps between disadvantaged and minority students in math and language arts (NCLB, p.328).

The Committee on Preschool Special Education (CPSE) and the Committee on Special Education (CSE)

The Committee on Preschool Special Education (CPSE) is a section of special education law for children who are between thirty months and five years of age that require special education services (occupational, speech, or physical therapies). The Committee on Special Education (CSE) is for students who are between five and 21 years of age. Under the IDEA, institutions must provide a free appropriate public education (FAPE) to every child with a disability (ages three to 21) regardless of the student's level of cognitive function. IDEA also requires a school district to follow six principles (definitions located in chapter one) to be provided for students with disabilities: FAPE, Nondiscriminatory Identification and Evaluation, IEP, LRE, Due Process Safeguards, and Parent Participation (IDEA 2004, 2006; Part 200.1, 2011).

The Committee on Preschool Special Education (CPSE) is designed for students between the ages of three and five. If a parent is concerned about his or her child's development, the parent writes a letter to CPSE requesting an evaluation. The mandated evaluations consist of a psychological and social history assessment and an observation. Supplemental evaluations include speech, occupational, and physical therapy. Once the evaluations are completed, the CPSE will meet with the family to discuss the findings (IDEA, 2004, 2006; Part 200.1, 2011).

In CPSE, the committee determines if the student presents with a delay in one of the following five domains: cognitive, language and communicative, adaptive, social-emotional, or motor development. The CPSE consists of members (parent, chairperson who knows the educational laws, classroom teacher if applicable, county representative, and a representative from the evaluation agency) functioning at the preschool level (Part 200.1, 2011).

The CSE consists of members familiar with development at the school-age level (parent(s), special and general educators, psychologist, and a chairperson). The age range for CSE is five to 21. In CSE, a similar initial process of referral is conducted. However, CSE and CPSE differ in that CSE views the child within their academic setting and skills, and CPSE views social and emotional ability. The CSE committee also determines whether a child has a disability as defined by Federal and State regulations (Part 200.1, 2011).

The CPSE-to-CSE transition to kindergarten is an important developmental milestone for young children, their families, and their teachers. The CPSE-to-CSE transition meeting occurs when a child classified as a *preschooler with a disability* begins exiting CPSE. The process requires a school district to conduct necessary evaluations (i.e., psychological, social history, school, and supplemental reports). Once the evaluations are completed, a chairperson on special education, a psychologist, classroom teacher(s), and the parent(s) meet to discuss eligibility for

the following kindergarten school year (Part 200.1, 2011). To be deemed eligible, the student must meet one of the criteria for the 13 educational classifications (i.e., autism, speech or language impairment, other health impairment, etc.).

Individual Education Program (IEP)

In special education, the Individual Educational Program (IEP) is the cornerstone of the special education process for each individual student (Wright & Wright, 2006). The IEP is the tool through which educators' document how a student's needs will be met within the context of an educational curriculum and environment. The IEP development process and implementation need to be premised on several principles (Yell, 1998, 2005). First, instruction must be scientifically based. Second, data should be gathered via appropriate and measurable goals to demonstrate improved results for students with disabilities. Third, schools and educators must have high expectations for students with special needs and students must be granted access to the general education curriculum when appropriate. Fourth and last, the school district must work collaboratively with parents and caregivers.

IEP's and research-based instructional practices (i.e., special education) are vital to safeguard a free appropriate public education to students with disabilities (Wright & Wright, 2006; Yell, 2005). As special education is a service, and not a single location, an effective special education program depends on the quality of the school district, the training of CSE members and administrative support, and a philosophy and practice that supports the inclusion of students with disabilities in all classrooms, as well as effective communication among schools, chairpersons, special and general education teachers, providers, and parents (Waters & Friesen, 2019).

Within an educational environment, educators enhance the instruction and learning experiences of each student through the application of cognitive theories (Mashburn et al., 2018; Yelverton & Mashburn, 2018). By applying theories, the educator can assist students in retaining important information. In special education, teachers need to use coping strategies (i.e., first/than approach, positive reinforcement) so that a student with special needs can be successful within the educational environment. Bronfenbrenner (1986) and Vygotsky (2007) have theorized that the transition process can potentially decrease a child's anxiety and reactive tendencies during this time of change. Each theorist has explained that the learning process assists a child throughout the course of his or her life. Change is inevitable for families. A family may move, a school may begin to change, and transitions may occur. With each change or transition, a child adjusts internally to handle the change (Besi & Sakellariou, 2019). Children, like adults, feel anticipation and/or anxiety when transitioning (Ahtola, et al., 2011; Curle et al., 2017). The child might convey the experience with a smile or tantrum. The child's responses reflect his or her developmental stage. Because each child is unique, transition may affect him or her in different ways and these affects also influence a child's parent(s).

The Transition to Kindergarten

The transition to kindergarten can be a time of important changes for children and their families. Changes to the physical settings, connections, routines, and expectations associated with this period can be stressful for many families and children (Jung, 2016). Moreover, the concerns surrounding an effective transition to early schooling can be expansive due to a child's individual differences in social and academic settings. The process of an effective kindergarten transition is arguably even more vital and more demanding for the families of children with developmental disabilities. It can also be challenging and stressful for parents of children

classified with an educational classification (Curle et al., 2017; U.S. Department of Health and Human Services, 2020). Spann et al. (2003) reported that parents are considered partners with school districts in developing their children's educational plans, which leads to a more positive outcome after the transition meeting. Effective collaboration with parents can be a vehicle for achievement in their children's educational achievements (Epstein, 2001; Mashburn et al., 2018; Perras, 1995). Parents who have children with disabilities often struggle with acceptance and understanding. As a parent with a child that is disabled, no one can fully understand the trials the caregiver perceives and experiences (Quirk et al., 2016; Rafferty & Boettcher, 2000; Rickmeyer, et al., 2017). These children and their families are concurrently piloting normative encounters across this central developmental period, while also experiencing changes in the special education systems that provide services to their children.

There is a burgeoning body of research connecting children's school participation to their successful school transitions (Yelverton & Mashburn, 2018). Yet, there is a need for much more research on these processes in children with disabilities and their families, especially those from culturally diverse populations (Abry et al., 2015; Ansari & Winsler, 2016; Pianta & Krafft-Sayre, 2003). To this end, the current study aims to explain factors associated with transitions for parents of children with developmental disabilities.

Transition is a process that should begin early in a child's pre-kindergarten year. Cook et al. (2017, 2018) noted that transitions are a process when a child enters an educational environment that presents both new opportunities and new challenges associated with moving a child's education from the child developmental center to a public institution. It is the fundamental right of every child to enjoy a positive and effective school experience in their transition to kindergarten (Ansari & Winsler, 2016). This understanding is designed for all

children and requires consideration of each child's overall social, emotional, cognitive, and physical development (Barnett et al., 2017). Parental perspectives regarding school can influence a child's transition to school (Bassok et al., 2018). Pianata and Kraft-Sayre (2003) noted that 53% of parents included in the research felt confident about their child's transition to school; however, 35% of families noted some degree of anxiety about the child's entry into school.

Preparing students for a successful kindergarten transition has been identified as a national priority, yet the degree to which parents are involved in kindergarten preparation is rarely considered (Buldu & Er, 2016; Curby et al., 2018; Jung, 2016). The parents' perceptions of special education can empower and alleviate anxiety in parents (Bailey & Blasco, 1990; Cook & Coley, 2018; Ryndak & Downing, 1996).

Seligman and Darling (2007) reported that parents present positive attitudes and lower levels of stress during the transitional process when they understand special education and their role in the transition. The authors revealed the family-systems focus is central to understanding and working with families who have children with special needs (Seligman & Darling, 2007). The descriptive research indicated that previous life expectancy estimates of individuals with medical and significant educational needs (i.e., Down syndrome) were lower than that of a child without a disability. As educational and medical intervention improved for the special needs' population, overall lifespan increased. Seligman and Darling (2007) reported that when families work in conjunction with the special area professionals (i.e., special education department) the transition from setting-to-setting can be achieved. Research indicates that during the CPSE-to-CSE transition process, parents were unaware that they possessed the right to develop the IEP necessary for their child's educational development (Duncan et al., 2018; Porche et al., 2016).

Transition signifies the process of change when a child moves from one setting to another (Comenius, 1956; Fabian & Dunlop, 2006; Russell, 2003). Children are moving from preschool settings, where different rates of development were acceptable, to an elementary school that requires the understanding of specific academic skills by predetermined deadlines. While enrolled in a preschool setting, the curriculum is based on social and emotional skills (Puccioni et al., 2019; Puccioni, 2018). Educators help children develop language skills and help them to engage in age-appropriate social integration (Puccioni, 2018). Current studies reveal that early skills are impressionable and may lead to an expansion in children's school readiness (Bailey et al., 2017; Hill et al., 2015). Early skills are defined as the ability to follow one-and-two-step directions, the ability to model action from another individual, and the ability to engage in functional pragmatic language skills (Ali & Khan, 2021; Ansari et al., 2009; Barnes and Puccioni, 2017).

Kindergarten transition signifies a child's admission to formal education and catalyzes future school experiences and performances. The effect of the early school practices and experiences on children's school adjustment and academic performance has been well documented (e.g., Almalki et al., 2021; Crane et al., 2011; La Paro et al., 2003; Louie et al., 2017; McIntyre et al., 2010; Perras, 1995; Ramey et al., 1998). Despite the excitement surrounding this developmental milestone, entering kindergarten can cause an increased level of stress for children and families. This is especially true for families of children with special needs due to the cessation of collaboration between special needs providers and parents (De Los Reyes & Langer, 2018; Gonring et al., 2017; Miles-Bonart, 2002; Pianta & Kraft-Sayre, 1999; Pianta et al., 2001; Rimm-Kaufman et al., 2000; Wilder & Lillvist, 2021). Children with special needs tend to experience more changes to their routines as they transition to kindergarten (Moore et al.,

2015; Pianta, 2016; Puccion et al., 2020). Quirk et al., (2016) noted that children tend to experience increased physiological stress as evidenced by a surge in morning cortisol levels. Furthermore, kindergarten special educators have reported that over 45% of students display difficulties in social and readiness skills because of the change in demands of the transition into kindergarten (Rimm-Kauffman et al., 2000).

The CPSE-to-CSE transition begins before a child with special needs enters the classroom. Parents may initiate the transition process long before a child enters school (Dunlop & Fabian, 2007). Parents' assumptions and expectations, as well as their hopes and fears, affect the method by which a child enters kindergarten (Decaro & Worthman, 2011). Caregivers send strong messages, both verbal and nonverbal, about the transition and school in general. Preparing the child for success in kindergarten is an essential part of the transition process (Anthony et al., 2005; Boonk et al., 2018). Research has shown that parent perspectives on transition influence how a child adjusts to new situations (Fabian & Dunlop, 2002). Yet, many families feel underprepared for the transition (Wilder & Lillvist, 2021).

Children's transition from early childhood education (ECE) to kindergarten settings is an important topic of research and policy (Goodrich et al., 2015; IDEA, 2006; Kielty et al., 2013; Margetts & Keinig, 2013). The transition from CPSE to CSE can potentially exacerbate the stressors of primary caregivers (Ansari & Winsler, 2016). These stressors include families exiting a nurturing environment and moving into public schools where developmental milestones are marked by academics (Abry et al., 2015; Pianta, 2016). Reportedly, the transition from CPSE to CSE can be a period of considerable change for children and their families (Angell et al., 2009; Ansari & Winsler, 2016). Transition planning is a collaborative process between parents and schools to help families identify and manage services (speech, occupational and physical

therapies, and/or placement within a classroom for students with special needs) to ensure that children successfully transition into the school age environment (Abry et al., 2015; Bassok et al., 2018; Bitterman et al., 2008).

The planning begins with the consent to re-evaluate the student exiting CPSE and possibly entering CSE. Once the caregiver signs consent, evaluators begin to assess the student (IDEA, 2004, 2006). When all evaluations are completed, the parents, school psychologist, classroom special educator, and a chairperson on special education meet to review findings and determine if services are warranted. A chairperson on special education is an individual who works for the public-school districts who is knowledgeable in the educational laws that govern special education (Ahtola et al., 2011). Yet, the transition to kindergarten is not only about the child but also about preparing families for the change in environments (Bailey et al., 2017; Thullen & Bonsall, 2017).

As a guardian of a child with a disability, one may feel dysregulated, anxious, and stressed about the transition from preschool special education (CPSE) to school age special education (Ahtola et al., 2015; Barroso et al., 2018; De Los Reyes & Langer, 2018). This feeling originates from a guardian not knowing if their child will be able to matriculate into a new school setting (Mwangi, 2016; Porche et al., 2016). The family–educator collaboration component may mean that parents have close relationships with the child's teacher and service providers (Mwangi, 2016). The family may feel comfortable with them. The notion of another individual supplanting the teacher and/or service provider may be stressful because new providers are unfamiliar to the parent and the child (Derguy et al., 2016). Yet, the time for change from one setting, or person, to another is also a growth opportunity for everyone (parent, child, and the family). When the school and family work together to assist the child with the

transition, the result can be appropriate for the student (Boonk et al., 2018; Eggum-Wilkens et al., 2014; Kagan et al., 2013). To assist the child, the parents or guardians should become organized and ask for clarification when they do not understand the transition process. The parents or guardians can accomplish this clarification by engaging the child's current program and provider(s) and asking them about designing specific goals to ensure a successful transition within a least restrictive environment (Clifford et al., 2018; Crane et al., 2011; Durneej et al., 2021). Maintaining a good relationship and communication system with the individuals (i.e., school district representatives) can be vital and necessary for children to successfully transition into the CSE (Ansari & Winsler, 2016).

When transitioning from the CPSE to the CSE department, the parent should learn and understand rules and regulation changes within the law (IDEA, 2006), as both have different guidelines under special education. Under CPSE, the child's test score(s) must be two standard deviations below the mean to be considered eligible for services (Part 200.1, 2011). CSE, on the other hand, examines the child's academic performance to determine eligibility. In essence, the family should familiarize themselves with what is developmentally appropriate and what federal eligibility mandates require (Barnes & Puccioni, 2017; Coxa et al., 2015; Dosman et al., 2017; Summers et al., 2005). The overall goal is to help support parents and families of students with special needs and to understand and complete the transition process from developmental preschool to the public-school classroom environment (Ansari et al., 2015; Puccioni et al., 2020). The transition from CPSE-to-CSE should reduce the stress and anxiety of parents by providing strategies (i.e., transition workshops) to encourage a smooth and uninterrupted exchange (Ahtola et al., 2015).

According to Ahtola et al., (2016), a structured and comprehensive transition process guides caregivers in making better educational decisions for their children. The transition process begins with a student that is classified as a child with a special need. The family has consented to have the child reevaluated to determine eligibility for the next school year. The committee (parent, chairperson, psychologist, and educator) will meet to discuss the results of the evaluations and determine if the child meets one of the 13 educational classifications. Ahtola et al., (2016) focused on perceptions of practices aimed at easing the transition process. The parental participants consisted of 2,662 individuals (both mothers and fathers) and the participating individuals completed a questionnaire regarding how important they considered the pre-kindergarten transition process. The study examined the importance of transition practices. The first set of questions were adapted from literature (Lo Casale-Crouch et al., 2008; Pianta et al., 2001) which were examined in a pilot study. The researchers followed several practices during the study. First, the researcher instructed the preschool group to familiarize itself with future elementary school activities and to visit the future school. Then, the educators from both pre-k and kindergarten cooperated with each other. Following this, the same educators organized joint events. Next, the child and the family met with the future teacher and then the future educator met with support staff in the building. Finally, the pre-kindergarten teacher created a "growth portfolio" and submitted it to the next teacher prior to the end of the school year, and all the educators collectively designed and revised their curricula for the following year. The participants rated the importance of the practices on a scale of one to five with one being "not at all important" and five being "very important."

The preliminary analyses were conducted using univariate analysis of variance (ANOVA) and *t* tests. The last analysis employed a multivariate analysis of variance

(MANOVA) due to the use of several transition practices as dependent variables. Based on findings, the parents considered the transition practices to be at least "somewhat important" as the average means varied between 3.43 and 4.42 (that is, greater than 3 was "somewhat important") on a scale from one to five. None of the areas was considered "not important." All participants considered familiarization with the next school to be important, whereas the connection between the educators who authored the curriculum was considered least important. Prior research (Lo Casale-Crouch et al., 2008; Pianta et al., 2001) found that the joint curriculum venture was considered "most important." The participants had difficulty understanding what the collaborative interaction between the current and future educator for the child entailed.

The overall aim of the study was to assess the perception of the importance of the school transition. Parents appeared to view the transition practice as more important, whereas educators did not. The author(s) noted that this might be due to educators being familiar with the transition process, and parents having much less experience with it (Ahtola et al., 2016).

Rimm-Kaufman et al., (2000) surveyed educators in the transition process (two questions). The study examined educators' opinions about the types of difficulties students exhibited entering kindergarten. Educators were asked, "Based on your experience, for how many children in a typical class are the following characteristics a problem when they enter kindergarten?" (p. 149). Educators' responses revealed the following problems for new kindergarteners: a "lack of academic skills," "difficulty following directions," "difficulty working as part of a group," "problems with social skills, getting along with other children," "difficulty working independently," "difficulty communicating/language problems," "lack of any formal preschool experience," "highly academic preschool experience," "nonacademic preschool experience," "disorganized home environments," "immaturity," and "other." (p. 160). The study

also addressed three questions. First, what were the types of educator-reported kindergarten adjustment problems? Second, how did the educators' reports intersect with a school's status (economic level, school minority composition, while controlling for other variables)? The third and last question centered on the experience of the educator and their ethnicity.

Findings revealed that 52% of the students experienced a successful entry into kindergarten, whereas 32% experienced moderate difficulty entering, and 16% experienced difficult entry. Reportedly, over one-third of the educators noted about half of the class or more entered kindergarten with pre-established difficulties (i.e., following directions, communicating/language). The study did not account for parental perspectives and stress factors (i.e., home life pressure, socioeconomic). There have been limited studies where parents had the opportunity to attend a transitional workshop prior to their child's meeting. Neither study included parents of students who attended a specialized educational setting within a more restrictive environment nor students that received related services (i.e., speech therapy, occupational therapy, etc.) within a large urban school district and were transitioning from CPSE-to-CSE.

Parental Stress

According to both Lessenberry and Rehfeldt (2004) and Rickmeyer et al., (2017) stressors (i.e., economic, work, family obligations) in parents' lives affect parents' comfort level with the educational settings for their children. Stress encountered by primary caregivers of children with disabilities affects the caregivers' levels of satisfaction with special education services and its processes (Louie et al., 2017; Pruitt et al., 1998). Female primary caregivers of children with developmental disabilities, autism, and behavioral disorders have been shown to exhibit high stress levels (Lessenberry & Rehfeldt, 2004; Rickmeyer et al., 2017). This may be

because children with autism and behavioral concerns require structure and consistency within their environment (Angell et al., 2009; Bitterman et al., 2008).

Seligman and Darling (2007) reported that a child's disability adversely affects the family by exacerbating marital stress, maternal stress, and contributing to a decline in parental confidence. Parents of children with special needs grapple with the reality of tremendous "enduring loss precipitated by a negative life event or episode that usually retains a physical presence, a psychological presence, or both" (Bruce & Schultz, 2002, p. 9) Yelverton and Mashburn (2021) reported this experience of loss can lead to a sense of detachment from everyday life activities. Waters and Friesen (2019) conveyed the need for parents to give sensitive attention to the means through which they communicate with their special needs children to evade further increasing stress levels. Norris and Closs (1999) reported that these parents experience disruptions in their parent–child attachment, resulting in losses that are emotionally comparable to death. For example, Waters and Friesen (2019) noted that parents of children with autism perceive that they do not have a connection with their child because the child self-isolates (i.e., withdraws from society).

According to some studies (Seligman & Darling, 2007; Waters & Friesen, 2019), early interactions between school districts and parents, whether positive or negative, form the basis for future collaboration. Norris and Closs (1999) and Rickmeyer et al., (2017) have reported that some school personnel might be unaware when parents of children with serious medical issues are experiencing numerous unreported pressures. For example, added financial expenditures further impacted by single-income homes made it difficult to keep one parent at home with the child. Brookman-Frazee (2004) and Puccioni et al., (2020) found that effective collaboration by school personnel and parents on the agreed needs of the children reduced parental stress. An

assessment of parental stress aided to recognize the support needs of the parents, hence enhancing the possibility of positive collaboration and less stress factors with special education supports and services their children received in school (Brookman-Frazee, 2004; Lessenberry & Rehfeldt, 2004; Puccioni et al., 2019; Wilkinson et al., 2006).

McIntyre et al., (2007) researched the transition to kindergarten in relation to family experiences and involvement. The study examined the family involvement in kindergarten transition in 132 families. The children attended general education and did not receive services under special education. The children completed early education. The results suggested many of the families wanted more involvement in the planning and transition process. The main concerns were noted in the school their child would attend and difficulties in behavior domain of the child. About half of the families reported they had monthly contact with the child's teacher (48.5%) and had meetings with the staff (53%) to discuss their child's academic skills and performance. Approximately one-quarter (26.5%) reported that the annual meeting was a transition meeting. Even fewer (10.6%) reported being a member of the meeting. In terms of services 59.8% revealed they would have appreciated more communication in the transition process. The researchers' results revealed parents did not fully understand school expectations, nor their role during this time.

In recent studies, both Hamblin-Wilson and Thurman (1990) and Waters and Fiersen (2018) examined the perspectives of parents of children presenting with different disabilities, regarding their experience of the transitional processes from preschool to kindergarten. The results found parental satisfaction related to the amount of support (i.e., training in the process) that caregivers received. Parents indicated that early childhood professionals who work with

children under age three were supportive when the provider worked within the home setting (Seligman & Darling, 2007; Walsh & Jeon, 2018; Wang et al., 2004).

Concurrent regression findings indicated that parental responsiveness predicted life-skills development in areas when age, gender, and socioeconomic status were considered, whereas parental demandingness was not a predictor in all of life-skills development (TEA, 2004). The results of this study suggested that positive connection with educational professionals was related to having been reared by a parenting style high in responsiveness. Freeman et al., (1999) and Slicker et al., (2021) conducted a study to assess stress and anxiety in 825 individuals. The selected district included individuals from 13 middle schools. The survey responses were analyzed using descriptive and inferential statistics. An ANOVA was performed to determine if there were significant differences ($p>0.05$) in response to questions involving selected demographic variables. Results revealed there was a statistical difference ($p>0.05$) in state and trait anxiety scores between participants that had children in different grades and schools, which supported the finding that a correlation exists between state and trait anxiety.

Improvements Needed

Prior research noted areas in which parents would like to see improvement in the transition process for their child with disabilities (Clifford et al., 2018; Duncan, 2003; Johnson et al., 2002; Lindsay & Dockrell, 2004; Russell, 2003; Spann et al., 2003; Waters & Friesen, 2019). These areas include the need for understanding of the laws, the services available to children, and collaboration between educators and families. Brookman-Frazee (2004) found that parents demonstrated limited knowledge about eligibility for services, special education law, and procedural safeguards in interviews with 23 parents of children with autism. The participants ranged in age from 29 to 78 and 83% were female. Among the participants, 78% were

Caucasian, 9% were multi-racial, 4% were African American, 4% were Hispanic, and 4% were Asian American. The data were analyzed using a coding and comparison methodology, which followed an approach rooted in grounded theory (Glaser & Strauss, 1967). Five research teams coded the transcripts. General descriptive comments were discussed regarding the results. Validity and reliability were not discussed.

As federal law changes regularly, parents have sought the services of legal representatives (i.e., student advocates and education lawyers) to help them in their understanding of educational terminology, as well as their parental rights and responsibilities (Yell, 2005; Yelverton & Mashburn, 2021). The federal law has empowered parents in the transition process; however, some parents remain confused by the process. Parental contribution today continues to be low during the CPSE-to-CSE transition as parents are unsure of the process (Ahtola et al., 2015; Holly et al., 2019). School districts and special education departments should understand their roles as diminishing the stress of parents with students in special education and enhancing the benefits of parent collaboration (Case, 2000; Cope, 2011; Puccioni, 2018; Wang et al., 2004). Four studies (Bitterman et al., 2008; Friedman et al., 2007; Spann et al., 2003; Summers et al., 2005) all reported the need for schools to be aware of the importance of (a) communicating with parents about their child's academic strengths and concerns, (b) initiating communication, and (c) encouraging parent participation during special education meetings but did not detail the extent of communication needed to promote a positive transition. When parents feel involved in the special education process, their satisfaction increases and their stress decreases. Some parents of children with special needs reported that they are dissatisfied with their interactions with the special education department, especially over issues of communication and trust (Angell et al., 2009). Many parents want the special education

department to be more receptive to their concerns and to include them more deliberately in the IEP process (Fish, 2008; Gordon & Miller, 2003; Pruitt et al., 1998).

Barriers to Satisfaction

Leiter (2004) noted that barriers to parent satisfaction with transition collaboration included a lack of knowledge and support, parents' lack of a full understanding of procedural safeguards and legal rights, and the personal anxiety and limitations of parents related to work and home responsibilities. Lake and Billingsley (2000) and Waters and Fiersen (2019) noted a connection between conflict in parental perceptions and districts' responsibilities within the school and home setting. Schools would like parents to support education practices and teacher efforts, and parents want educators and schools to be responsive to the needs of their family and children (Lake & Billingsley, 2000; Waters & Fiersen, 2019). Parents regarded the school districts in a negative manner when they were unable to understand the process of special education (Leiter, 2004). Many families reported that they did not know what to expect, nor were they given the opportunity to ask questions. (Puccioni, 2018; Spann et al., 2003).

Communication issues became a deterrent to successful special education interaction and meetings when the parents perceived the school personnel were not listening to them, when parents felt anxious, and when parents felt that they must agree with the professionals (Dabkowski, 2004; Puccioni, 2018). Miles-Bonart (2002) and Waters and Fiersen (2019) found parents of children with physical disabilities were less gratified when school district personnel examined the needs of their children from an educational standpoint. Data analysis of five sets of variables quantified each survey response. The first dependent variable, parent satisfaction, was composed of six separate items ranging from 0 to 11. The rest of the variables were independent.

The results noted that parents were less gratified as the families expected more services and resources for the student with disabilities.

In a National Health Statistics Report (Zablotsky & Black, 2020), children living in rural settings were more likely to be classified with a developmental disability than children living in urban settings (19.8% compared with 17.4%). Specifically, children living in rural areas were more likely be diagnosed with ADHD (11.4% compared with 9.2%) and cerebral palsy (0.5% compared with 0.2%) than those in urban areas (Zablotsky & Black, 2020). Zablotsky and Black (2020) determined that children with developmental disabilities living in rural areas were also significantly less likely (18.6%) to receive special education or early intervention services compared with those living in urban areas (15.2%). Parents felt that they had to seek legal representation to obtain the services needed for their children. Curtis (2005) reported that impartial hearings brought by anxiety-ridden and unsatisfied parents were an indicator for better collaboration with parents.

Another barrier to assisting parents is diversity in cultures. Some proclivities (immigrant families, undocumented individuals) may lead parents to agree with districts, as the district is the "authority" on education (Dabkowski, 2004; Rickmeyer et al., 2017). Lareau's (1989) study of urban elementary schools suggested the presence of an unequal distribution of power among parents in public schools. Those parents who could speak the English language were more involved in the education system (Dabkowski, 2004; Rickmeyer et al., 2017). According to Wilkinson et al. (2006), about 10% of students in preschool through grade 12 were English language learners with limited English skills with parents with the same linguistic limitations. Language barriers are not always of a linguistic nature. The use of special education jargon has excluded parents from being active participants during meetings (Walsh & Jeon, 2018; Wright &

Wright, 2006). The inability to understand the legal language implemented in special education documents can leave parents frustrated, anxious, and confused. Different analyses of perceived needs by members of the IEP team also led to disappointment and unhappiness among parents (Miles-Bonart, 2002; Puccioni, 2018).

A pronounced issue for parents includes the family finances, which have proven to be a barrier to positive results in collaborative procedures with the school (Lovitt & Cushing, 1999; Puccioni, 2018). Socioeconomic situations can affect parents' abilities to participate in meetings. Today, many parents cannot leave work or may not have any means of transportation. Parents mentioned some common barriers during the transition process. These barriers include their work schedules and the time of day that the meetings were scheduled (Gordon & Miller, 2003; Puccioni et al., 2020; Rafferty & Boettcher, 2000). Researchers noted that some school districts reported that parents from socioeconomically disadvantaged settings could not participate in their child's transition meetings due to a lack of transportation (Clifford & Humphries, 2018; Lareau, 1989; Yap & Enoki, 1995). According to Henderson and Mapp (2002), many parents, regardless of income or cultural upbringing, wanted their child to perform well in school.

This research study investigated the differences regarding parental experiences and involvement in the CPSE to CSE kindergarten transition process. The study was meant to examine the effectiveness of a transition workshop in decreasing stress factors concerning the CPSE-to-CSE transition process. This study examined 144 families whose children had completed an early childhood special education program that started in kindergarten with and without special education services. The study investigated the stress factors of a parent with a special needs child who did or did not attend a transition workshop. Such findings attempt to

minimize obstacles and enhance the parents' approval during the important kindergarten transition-planning year.

Support for Special Needs

Transition to elementary school is an essential and complex experience for any family, but even more for a family with a child with special needs. Parents who have children with special needs are unsure of whether their child can adapt and/or learn in a different setting (Green et al., 2016; Hains et al., 1989; Puccioni et al., 2020). Parents view a larger school building as less nurturing, which might impede the child's academic and social potential (Bassok et al., 2018). Children with special needs face challenges in the transition to kindergarten, yet gaps exist in the research knowledge about this process (Ahtola et al., 2011; Ali et al., 2021; Barroso et al., 2018; McIntyre et al., 2010). Children with special needs often require additional support (i.e., one-to-one attention, visual schedule, positive reinforcement) to adjust to the school environment and to function at an adequate level for learning (Hains et al., 1989; Puccioni et al., 2020). The supports are often not established before children enter school (Harper, 2016). Therefore, it is crucial to identify the parental concern(s) that can prevent a child's successful transition and adjustment.

The transition from general education preschool to kindergarten is a significant and complex occasion in any child's life (Farran & Lipsey, 2015; Friedman-Krauss et al., 2016). When the child presents with an educational disability, the transition becomes complicated, involved, and taxing (Foronda et al., 2015; Hines & Winsler, 2016; Manship et al., 2015). In the United States, 3.5% of children under five years of age are reported to have disabilities (National Center for Health Statistics, 2006). While mainstreaming in a general education setting is the

primary goal for children with special needs, the method and process of transitioning to get there is fraught with difficulties (Janus, 2004).

The positive outcome of the transition to kindergarten for a child with special needs depends on the obtainability and ease of supports at school that may aid and increase the child's learning (Abry et al., 2015; Bassok et al., 2018). Concerns with lack of dedicated and specific school personnel or special education programs are among those that most often produce criticisms and grievances from parents of students with special needs (Hill et al., 2015; Newland & Crnic, 2017; Starr et al., 2016). In a sizable community section, a third of primary caregivers and parents of kindergartners with special needs were not pleased with the transition of supports and services, and approximately half were not content with the accessibility of school intensity supports and services for their child (Janus et al., 2008). Limited research explores the concerns of parents participating in the transition and the encouragement and support from education professionals, but most strongly endorse parents' participation in the process to ensure that their child obtains sufficient support services within special education programs (Boonk et al., 2018; Duncan, 2003; Everson & Moon, 1987; Grigal et al., 1997).

Lack of connections between different sources of supports and services has often been recorded among the motives for weak transitions happening both for families and children with special needs (Bernard et al., 2016; Hall & Lindorf (2017); Goodrich et al., 2015; Quirk et al., (2016); Wilder & Lillvist; 2021), and for the general education population (Early, 2004; Janus, 2008). Material and data assembled from parents reveal that evaluations and measurements often make paperwork complicated and daunting, and that contact/communication between numerous agencies may be nearly nonexistent. Most of these studies advocate policy modifications to assist

in the line of communication and connections among the organizations involved in the treatment and care of children with special needs.

Over the last couple of years, early childhood concerns including those related to children with special needs have received increased attention in Canada and the United States. Within this context, many local school districts have created a comprehensive set of policies steering the measurement of needs and the shift to kindergarten for children with special needs (Janus et al., 2004). The task of assisting connections and procedures is part of the directives of agencies providing services for children with special needs. In examination of these more current developments, it has become vital to empirically verify whether the prior rulings (noted above), which were based on investigations performed ten years earlier, continue to persist in the present setting.

Summary

Chapter Two began with a discussion that pertained to theories and philosophers related to child development and the beliefs surrounding how parents cope with stress. In summary, the main theories and models relate to positions that parents assume to support their child's development. The theorists who discussed development and parental involvement were Bronfenbrenner (1986) and Vygotsky (1978). Bronfenbrenner's theory viewed individuals and settings that enhance and/or influence the child's development. According to Besi (2019) and Dilek (2018), adults and children feel anxiety when transitioning from one setting to another. The responses of the individual can be slow while assessing the new situation. Vygotsky (1978) theorized that each culture performs a crucial role in "making meaning." This can be viewed through the transition process. When a person is not supported in the transition process, his or her anxiety might increase (Besi, 2019). When an individual is supported in the process, anxiety

may decrease (Dilek, 2018). Each philosopher believed that the primary caregiver of a child is significant. The caregiver shapes the child's learning, values, and morals. The child observes and learns from the parent by modeling activities and/or tasks (i.e., learned behavior and social cues).

When the child attends a structured learning environment, the educator should collaborate with the parent to ensure success in learning new skills (Barnes & Puccioni, 2017; Farran & Lipsey, 2016). It is imperative to identify factors that may enhance or hinder the CPSE-to-CSE transition process. When all parties are vying for the child to be successful, only good intentions can arise.

Similarly, Dilek (2018) and Rimm-Kauffman et al., (2000) approaches stressed the need for collaborative interactions between the parent and the school district to assist in the child's development. In addition, the participation of the parent gives the education committee feedback on each child's generalized progress during the transition process within the new setting. Moreover, the parent's participation in all stages of the transition process would reduce anxiety and stress caused by the challenges they may experience in new settings (Dilek, 2018; Rimm-Kauffman et al., 2000). Vygotsky introduced the primary caregiver as the early educator for their child. He described this role as exposing the child to new experiences that enhance and foster the child's development (Dilek, 2018). Therefore, encouragement of parental participation should be considered during the transition process from CPSE-to-CSE.

The review of the literature reported where special education legislation began, with *Brown v. Board of Education* (Brown, 1954). The original lawsuit was intended to show the disparities between students from different races. What it also displayed, however, was how students and individuals with special needs were ostracized (Hines & Winsler, 2016). When the determination was heard, the Federation Education Department began to educate and train

educators on how students from all backgrounds and disabilities should be educated (IDEA, 2004). This finding helped lead the way to safeguard the rights of individuals by designing and enacting Section 504 of the Rehabilitation Act. After this safeguard was voted on, other laws and amendments were established. The main reason for the amendment in 1997 was to encourage parental rights (Manship et al., 2015).

The literature section also addressed the importance of the connection of the family with the educators and service providers that work with the child that has a special need. It revealed that parents could assist in the transition process by familiarizing themselves with the laws and regulations that oversee the special education process, eligibility, and services. Researchers recommended that when viewing the child's progress, parents should be looking at eligibility requirements for services (IDEA, 2006; Yell, 1998; Zirkel and Gischlar, 2008).

The chapter also discussed the needs of parents and parental satisfaction with the transition process. Lessenberry and Rehfeldt (2004) and Rickmeyer et al., (2017) noted that stress factors influence the individuals the parents meet throughout the evaluation process. Female caregivers of children with extensive developmental disabilities demonstrate a higher degree of stress and anxiety than those whose children were "typically developing." To assist with the families that have special need children, Hamblin-Wilson and Thurman (1990) reported the amount of support for the families should increase. Seligman and Darling (2007) noted that parents felt more satisfied in early intervention as this committee was more family oriented.

A survey out of Texas noted that the level of the parents' education is associated with an increase or decrease of the success of the transition process. Freeman et al., (1999) found the mother's education (bachelor's degree and higher) influenced the transition process. Duncan (2003), Johnson et al., (2002), Lindsay and Dockrell (2004), Russell (2003), and Spann et al.,

(2003) noted improvement of the process when considering parents' understanding of the laws and regulation of special education. Yell (2005) reported that parents sought assistance with interpreting the laws as the federal government is constantly altering the requirements and statutes.

Another area discussed in the literature review was the barrier between cultures and special education. Dabkowski (2004) and Rickmeyer et al., (2017) found, based on culture, that some parents believe they must agree with a school district as the district is the 'authority.' The authors found that English-speaking families were more involved than other families in which English was not the primary language (Dabkowski, 2004; Rickmeyer et al., 2017). Another study conducted by Lareau (2015) suggested a disproportionality between the parents and the school districts based on socioeconomic status. Economics can also be a barrier within the transition process (Lovitt & Cushing, 1999; Puccioni, 2018). Today, many families are being decimated due to pandemic and work mandates. Lareau (1989) found that upper and middle-class families attended meetings more frequently. Many families have difficulty taking a day off for a meeting and this is especially true for low socioeconomic-status families (Besi et al., 2019; Entwisle & Alexander, 1998; Waters & Fiersen, 2019).

The literature review revealed that parents who have children attending general education experience stress during the transition process. There are not enough studies, however, relating to parents with children attending school in special education settings and the stress that it entails for them during the transition process (Hill et al., 2015; Walsh & Jeon, 2018; Waters & Friesen, 2019). More work is needed to report on the processes for children with disabilities and their families (Schachter, 2015; Yelverton & Mashburn, 2021). This study aimed to identify causes

associated with sustaining explicit results throughout the transition process for parents of children with disabilities (Bailey et. al., 2017; Hill et al., 2015; Slicker et al., 2021).

Prior research studies addressed school readiness as a tier-level diagram that looks at a student's overall development entering kindergarten. (Ansari, 2016; Curle et al., 2017; Pianta, 2003). It was noted that an effective transition is beneficial for families that have a child receiving special education services (Hill et al., 2015). The aim of this study was to assess if prior exposure to a CPSE-to-CSE transition meeting influences families with a child who attends a specialized setting; specifically, children who are educationally classified with autism, speech or language impairments, or other health impairments. The aim of the literature review was to understand possible stress factors of parents with children transitioning from preschool to kindergarten. Ansari (2016), Besi and Sakellariou (2019), and Pianta (2003) reported that an educational environment could routinely alter and affect parents, exacerbating their stress and anxiety.

CHAPTER THREE: METHODS

Overview

The purpose of Chapter Three was to explain the research design of this study. The implemented design was a quantitative, quasi-experimental static group comparison study. The design allowed for the examination of differences in parental stress factors regarding children transitioning from CPSE to CSE that attended (versus did not attend) a transition workshop. Chapter Three began with the design of the research study including definitions of all variables. The research question and null hypothesis followed. After the null hypothesis, the participants and setting, instrumentation, systematic procedures, and data analysis procedures were presented. The Parenting Stress Index, Fourth Edition instrument was administered as the study instrument. The instrument was designed by Richard R. Abidin (1983, 2012) and was analyzed in depth to clarify reliability and validity. The purpose of Chapter Three was to present procedures, research design and an analysis for the research as described. This problem was defined via research reviewed in Chapter Two.

Design

A quantitative quasi-experimental static group comparison design was applied during this research. This approach was implemented as it often involves examining authentic interventions instead of synthetic designs and settings (Almalki et al., 2021). It offered greater internal validity than other non-experimental research designs allowing the researcher better control of confounding variables. A quasi-experimental static group design is where the researcher randomly assigns half the participants in a setting to receive the new treatment while the other half, the control group, receives the typical course of intervention (Siedlecki, 2020).

The study included an examination of parental stress levels for those whose children that transitioned from CPSE-to-CSE. A quantitative quasi-experimental static group comparison design was appropriate as it encompassed a wide range of nonrandomized studies (Gall et al., 2007), it was financial- and resource-friendly, and it cannot dictate the disability categorization of the child. The quasi-experimental static group comparison was suitable because the overall goal of the research was to collect data from a group of people (i.e., parents of children who attend a specialized setting defined by preschool special education services and who will be transitioning to kindergarten in public school) divided into two groups (treatment and control) and then generalize the results to a broader population. In this design, there were two groups. One group received the treatment (i.e., transition workshop) and the other did not (i.e., did not attend a transition workshop). For purposes of the research study, there was one independent variable (attendance status). The dependent variable was parent stress scores as measured by the Parenting Stress Index, Fourth Edition (Abidin, 2012). Because this research was designed to examine stress factors related to the transition process, the survey occurred after the transition meeting (Charmaz, 2014; Duncan et al., 2018; Saldana, 2016). Quasi-experimental static group designs included some limitations. One was that randomization was not applied, because it was difficult to account for all variables. Another limitation was that the design did not eliminate the possibility of confounding biases that can impact one's ability to draw causal inferences.

Research Question(s)

RQ1: Is there a difference in parenting stress scores between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting?

Hypothesis

The null hypothesis for this study is:

$H_0$1: There is no significant difference in parenting stress scores (as measured by Parenting Stress Index, Fourth Edition) between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting.

Participants and Setting

This section included 180 participants who resided in an urban school district. Of the 180 participants, 90 attended a workshop on the CPSE-to-CSE transition process. The other 90 participants did not attend a workshop. Both groups completed a survey. A convenience random sampling was used to acquire the participants. The study was conducted in an urban community school district located in Westchester County, New York.

Population

The participants for the study were drawn from a convenience sample of parents/caregivers located in the northeastern United States. The parents/caregivers had preschool special education children transitioning from CPSE to CSE. There were 180 caregivers. Of the 180 caregivers, half attended a workshop regarding the transition process, the other half did not. For this study, the sample included 180 participants (90 attendees, 90 non-attendees), which exceeds the minimum identified by Gall et al., (2007) assuming a medium effect size with statistical power of .7, $\alpha = .05$. All participants completed and submitted a survey pertaining to demographics and possible parental stress factors. The participants were selected from an urban area located in lower Westchester County, New York. The parents had a child transitioning from a specialized special education setting. Parents of children who only receive related services did not participate in the study. The age range of the children included birthdates

between December 2, 2016 and December 1, 2017, as this date corresponded with the school districts age requirement for kindergarten.

Participants

Parents and/or primary caregivers that had children who attended a specialized setting for children with special needs (4410 program) participated in the study. Parents of students who received only related services did not participate in the study. The targeted sample was drawn from parents whose preschool-aged children birthdates occurred between December 2, 2016 and December 1, 2017. The birthdate coincided with CPSE eligibility aligned to the school district and department of health guidelines for the child's age. At the onset of the transition meeting, the students were classified as a "preschooler with a disability," (Yelverton & Mashburn, 2021). At the end of the transition meeting, the student was classified with one of the 13 educational classifications (i.e., other health impaired, speech or language impaired, autism, etc.).

The participants were chosen from an urban area located in lower Westchester County, New York. The enrollment of students within the CPSE department was approximately 1,000 students. Of the 1,000 students, 450 transitioned from CPSE-to-CSE. Of the 450, 225 attended a 4410 (center-based self-contained setting) program. The remainder of the students received related services, and the families were not involved in the study. Approval for the study was granted by the school district to survey the families of the students transitioning from CPSE-to-CSE. The study did not influence the eligibility of services for the students, nor did it affect the overall recommendations.

One hundred eighty primary caregivers with children who aged out of CPSE and entering kindergarten CSE completed a survey. The participants in the study had children that attended a

specialized classroom setting (4410 program) and transitioned from CPSE-to-CSE. Students who received related services only did not participate in the study.

The sample size consisted of 180 participants, approximately 90 in each group, which exceeded the minimum required for an ANCOVA when assuming a medium effect size, statistical power of .7 at the $\alpha = .05$ level (Gall et al., 2007). The present study included parents from different cultural backgrounds that included data collected as shown in Table 1.

Table 1

Participant Demographics Characteristics (workshop attendees and non-attendees)

Descriptive Statistics: Sample characteristics (n=180)

	Workshop non-attendee		***Workshop attendee***		***Total***	
	N	*%*	*N*	*%*	*N*	*%*
Relation						
Birth parent	79	87.78	85	94.44	164	91.11
Adoptive	3	3.33	1	1.11	4	2.22
Stepparent	0	0.00	2	2.22	2	1.11
Foster parent	2	2.22	0	0.00	2	1.11
Grandparent	4	4.44	2	2.22	6	3.33
Guardian	2	2.22	0	0.00	2	1.11
Marital Status						
Currently married/Committed partnership	53	58.89	57	63.33	110	61.11
Widowed	4	4.44	3	3.33	7	3.89
Divorced	6	6.67	5	5.56	11	6.11
Separated	5	5.56	4	4.44	9	5.00
Never married	22	24.44	21	23.33	43	23.89
Education						
No schooling completed	2	2.22	3	3.33	5	2.78
Grade 1-11	10	11.11	7	7.78	17	9.44
12th grade	7	7.78	7	7.78	14	7.78
Regular high school diploma	19	21.11	21	23.33	40	22.22
GED or alternative credential	4	4.44	3	3.33	7	3.89
Some College Credit (<one year)	6	6.67	8	8.89	14	7.78
1 or more years of college credit, no degree	13	14.44	10	11.11	23	12.78
Associate degree	8	8.89	6	6.67	14	7.78
Bachelor's	1	16.67	1	14.44	28	15.56

Master's	5	5.56	8	8.89	13	7.22
Professional degree	1	1.11	4	4.44	5	2.78
Other Adults						
0	6	6.67	4	4.44	10	5.56
1	19	21.11	28	31.11	47	26.11
2	47	52.22	48	53.33	95	52.78
3	12	13.33	6	6.67	18	10.00
4	4	4.44	1	1.11	5	2.78
5	1	1.11	0	0.00	1	0.56
6	1	1.11	1	1.11	2	1.11
7	0	0.00	2	2.22	2	1.11
Other Children						
0	9	10.00	6	6.67	15	8.33
1	23	25.56	40	44.44	63	35.00
2	31	34.44	26	28.89	57	31.67
3	18	20.00	12	13.33	30	16.67
4	8	8.89	4	4.44	12	6.67
5	0	0.00	2	2.22	2	1.11
6	1	1.11	0	0.00	1	0.56
Income						
Less than $10000	8	8.89	6	6.67	14	7.78
$10000 to $14999	4	4.44	11	12.22	15	8.33
$15000 to $24999	11	12.22	13	14.44	24	13.33
$25000 to $34999	13	14.44	12	13.33	25	13.89
$35000 to $49999	14	15.56	11	12.22	25	13.89
$50000 to $74999	13	14.44	11	12.22	24	13.33
$75000 to $99999	9	10.00	9	10.00	18	10.00
$100000 to $149999	13	14.44	15	16.67	28	15.56
$150000 to $200000	3	3.33	2	2.22	5	2.78
$200000 or more	2	2.22	0	0.00	2	1.11
U.S. Born						
No	31	34.44	27	30.00	58	32.22
Yes	59	65.56	63	70.00	122	67.78
Culture						
Asian	4	4.44	8	8.89	12	6.67
Black	16	17.78	28	31.11	44	24.44
Hispanic	40	44.44	33	36.67	73	40.56
White	21	23.33	17	18.89	38	21.11
Black, Hispanic, and White	1	1.11	0	0.00	1	0.56
Hispanic and White	2	2.22	2	2.22	4	2.22
Black and White	1	1.11	0	0.00	1	0.56
Black and Hispanic	1	1.11	0	0.00	1	0.56
Unanswered	4	4.44	2	2.22	6	3.33

Note. Participants total sample (*n* = 180), non-attendees (*n* = 90)

Setting

The study was conducted in an urban community school district located in Westchester County, New York. The National Center for Educational Statistics Office of Management and Budget (NECES, 2000) groups school districts into categories within four locale codes: city and suburb (defined by population, including size: small, midsize, large) and town and rural (defined by inhabitants and vicinity to municipalities).

The study comprised two groups: one group attended a transition workshop, and the other group did not. Each group comprised 90 participants. Thus, the final sample was 180 parents who resided in an urban school district. Both groups indicated primary caregiver information (i.e., mother, father etc.), age of the caregiver, child classification, the filing status (joint, single) and the ethnicity of the family (see above Table 1). Table 1 compares the differences between the controlled group and the independent group.

Instrumentation

The Parenting Stress Index, Fourth Edition was administered to collect data necessary for the research study. The Parenting Stress Index, Fourth Edition instrument's purpose was to measure parental stress factors by child characteristics, parent characteristics, and situational and demographic life stress. The Parenting Stress Index, Fourth Edition rights holder granted permission to administer the instrument for the study. According to the holder, purchasing survey forms grant the individual permission to administer and write about the survey (see Appendix F).

The Parenting Stress Index, Fourth Edition survey identified themes related to transition factors at the ending of CPSE (prekindergarten) services to the eligibility and beginning of CSE

(kindergarten) school year process, perceptions of family and school collaboration, parenting roles, school/program roles, and the values related to education and learning (Anthony et al., 2005; Hall & Lindorff, 2017; Mwangi, 2016; Pianta & Kraft-Sayre, 2003). The Parenting Stress Index, Fourth Edition survey included parental understanding and awareness of their role in the transition and the factors that elicit stress. According to American Psychological Association (2015), the Parenting Stress Index, Fourth Edition was a more reliable method of reporting parental stress factors than previous versions of the instrument. It aimed to provide a reliable measurement of the parent's stress levels.

The Parenting Stress Index, Fourth Edition comprised scales related to three fields: parent domain, child domain, and parent-child interaction domain. For the purpose of this study, the parent domain was utilized to examine parental stress factors during the CPSE to CSE transition process. The Parenting Stress Index, Fourth Edition and adapted forms (i.e., Parenting Stress Index-Short Form, translations of the Parenting Stress Index) have been utilized in the last 17 years. The instrument has been used in numerous studies (Barroso et al., 2018; De Los et al., 2018; Derguy et al., 2016; Gonring et al., 2017; Gonring et al., 2017; Green et al., 2016; Harrop et al., 2016; Holly et al., 2019; Hunsley & Mash, 2018; Langberg et al., 2016; Louie et al., 2017; Molteni et al., 2017; Newland & Crnic, 2017). Each of these studies measured the effect of some form of parental stress factors pertaining to children with special needs.

The internal consistency of the parent domain for all items was measured via Cronbach's α. A factor analysis yielded factor loading greater than 0.30 for seven subscales: Competence (factor loading range for this subscale), Isolation, Attachment (factor loading range for this subscale), Health, Role Restriction (factor loading range for this subscale), Depression (factor

loading range for this subscale), and Spouse/Parenting Partner Relationship (factor loading range for this subscale). Items within each subscale also demonstrated acceptable internal consistency.

The reliability of the Parenting Stress Index for parents of beginning school-aged children was tested through a study that examined psychometric properties of the instrument (American Psychological Association, 2015). The research studied the value of the Parenting Stress Index for a large population sample of mothers and fathers. The results suggested the shortened version of the Parenting Stress Index seems useful for assessing the transition practice of parents. The study employed a confirmatory factor analysis (CFA) on 596 cases rated by mothers and on 559 cases rated by father. An overall measure of sampling of .83 suggested that the correlation matrix was appropriate for factoring. The subscale indicates the consistency amongst the participants. Cronbach's α for the observed mother ratings were .81 and .82 at Time 1 and Time 2, respectively, for the new Laxness scale and .78 at Time 1 and Time 2, respectively, for the new over-reactivity scale. For the observed father ratings Cronbach's α were .83 and .82 at Time 1 and Time 2, respectively, for the new Laxness scale and were .77 and .76 at Time 1 and Time 2, respectively, for the new Over-reactivity scale. This suggested an internal consistency of the scale. Test-retest reliability coefficients were for over-reactivity .68 in mother ratings and .63 in the father ratings and for laxness .65 in the mother and father ratings.

A researcher-designed demographic survey was administered in concert with the Parenting Stress Index to collect basic characteristics of participating families. (Appendix A)

Table 2

Internal Consistency of Parent

	Laxness scale		Over-reactively scale	
	Time 1	Time 2	Time 1	Time 2
Mother	.81	.82	.78	.78
Father	.83	.82	.77	.76

Note. *n* = 1,155 adults (596 mothers; 559 fathers). An overall measure of sampling of .83 suggested that the correlation matrix was appropriate for factoring.

Table 3

Internal Consistency of Parent Domain 2

	Test-retest reliability	
	Laxness scale	Over-reactivity scale
Mother	.65	.68
Father	.65	.63

Note. *n* = 1,155 adults (596 mothers; 559 fathers).

Correlation with the parent domain suggested that parents who experienced more stress were more likely to be over-reactive. This finding was aligned to the studies of Irvine et al., (1999) and Reitman et al., (2001). Conversely, parenting stress may increase due to parental irritability and explosiveness (Kabat-Zinn et al., 1992). As Kabat-Zinn et al., (1992) reported, stress disrupts parenting practices during the transition process to the extent that the parents become depressed and unstable to respond appropriately. The Parenting Stress Index-Short Form was analyzed to assess the validity of the measurement (Diaz-Herrero et al., 2011; Hasket et al., 2006). Both studies reviewed the sections of Parental Distress, Parent-Child Dysfunctional Interaction and Difficult Child, which accounted for 47.48 % of the variance. The findings revealed the internal consistency coefficients were significant in each factor or subscale. The results offered empirical evidence in support of the reliability and validity of the Parenting Stress Index-Short Form for both mothers and fathers (Spanish and English) and can be useful to

clarify the methods through which stress influences parenting. In the mother and father ratings, the Parent Domain score was positively correlated with the over-reactivity factor (*rT1* = .41; *rT2* = 33; $p < .001$ for mothers and *rT1* = .38; *rT2* = 35; $p < .001$ for fathers).

The Parenting Stress Index, Fourth Edition was a 120-item measure applied to examine parental stress levels. The idea of the completion of the measure was to recognize the possibility of current factors related to parental stress during the transition process. There was no time limit to complete the instrument. The responses did not take more than 10 minutes.

The Parenting Stress Index-Short Form consisted of the Professional Manuel and the hand-scorable record/profile form. The front page of the Parenting Stress Index-Short Form contained instructions for completing the survey. The second and third page of the record/profile form included the questions and an area for the researcher to record the responses. The scoring and profiling were noted on the bottommost sheet of the carbonless form. The participant(s) received the Parenting Stress Form-Short Form through the mail. The respondent(s), using a pen or pencil, read the instructions on the top of the page. The instructions directed the participant(s) to fill in the basic demographic information, then respond to each item by circling SA (strongly agree), A (agree), NS (not sure), D (disagree), and SD (strongly disagree).

The instrument used a five-point Likert scale that ranged from Strongly Agree to Strongly Disagree. Responses were as follows: Strongly Agree = 1, Agree = 2, Not Sure = 3, Disagree = 4, and Strongly Disagree = 5. Once the survey was completed, and received by the researcher, the researcher tore off the perforated strip off the right side of the record/profile form and lifted the top portion of the form to reveal the scoring and profiling sheet underneath. The researcher summed the responses to the seven light-green shaded items and wrote the value in the box labeled ‘Defensive Responding’. The subscale score was then calculated. Each group of

12 items corresponded to a subscale (responses 1 to 12 and 13 to 20) was recorded in the box labeled ‘Parenting Distress’ and Parent-Child Dysfunctional Interaction, respectively. Once completed, the sum of the raw scores (i.e., Parenting Distress and Parent-Child Dysfunctional Interaction) were recorded in the area labeled ‘Total Stress’. The normal range for scores is within the 16th to 84th percentiles. Scores in the 85th to 89th percentile are considered high and scores in the 90th percentile or higher are considered clinically significant. The review considers the practical competence of the test through the reflection of the following: (1) test construction and item analysis; (2) normative sample; (3) reliability; and (4) validity.

The Parenting Stress Index was a valid assessment tool for the concerns in the discipline practices of parents of beginning elementary school age children. Because of the key role of dysfunctional parenting in the development of the broad range of childhood symptomatology, the instrument may be useful in the early identification of “at risk” families.

Procedures

The study procedures were submitted to Liberty University’s Institutional Review Board (IRB) on March 12, 2022, for approval (see Appendix H). The IRB department sent notification of approval notification May 17th. Documentation was received on May 28th, from IRB, which indicated this study was exempt. The school district Accountability and Research Department, where the research was conducted, received a letter and description of the proposal (see Appendix B). The researcher designed and sent the participants a self-addressed letter via United States Postal Service with the following: a cover letter introducing the researcher and an outline of the study, workshop information with the time and date, consent to participate in the study, and a kindergarten transition survey (see Appendix A). The information was mailed by the

primary researcher to families who had a child enrolled in a special education early childhood program and was transitioning to kindergarten.

Caregivers returned the consent found in the packet to the researcher via mail or delivered to the researchers' office. Every business day the primary researcher opened all unread consents. Each family that was not assigned to a condition was randomly assigned to either the control or the workshop conditions. Participants were assigned using a list of randomly generated integers of 1 or 2 (Control = 1, Workshop = 2). The list of integers was created using Excel. A total of 180 rows was created using the 'randbetween' function that returned an integer according to the user defined range (1 or 2). The frequency of control and workshop conditions were checked and adjusted to ensure an even number of participants in each group. The researcher recorded the participants' information on the same row as the assigned condition to ensure each family participated in their randomly assigned condition. Only families assigned to the workshop condition received a flyer (Appendix D) to attend the workshop.

The transition meeting required the school district to receive signed, written consent from a parent that had a child transitioning from CPSE-to-CSE. The letter to re-evaluate consent was mailed to all families transitioning during the middle of May. The consent allowed the school district to reevaluate the child in the present program they were attending. The following confidential evaluations were mandated for the transition meeting: psychological, observation, school report, social history and any other evaluation deemed appropriate (i.e., speech evaluation, occupational and physical therapy evaluation, visual evaluation etc.). The reports and evaluations must be submitted at least five days prior to the parent meeting so that the school district may document and review.

Workshops `

Due to COVID-19, the transition workshops (English and Spanish) occurred virtually (Microsoft Teams). The workshops occurred during the month of May 2022. The workshops commenced on the same day (9:00 am and 12:00 pm). The workshops were conducted prior to the transition meeting.

The presenter of the workshop was a licensed certified bilingual employee for over ten years in the district where the research was conducted and was not paid for her service, nor was she a stakeholder of the study. Prior to the workshop, the primary researcher met and trained the presenter on the special education laws (i.e., LRE and FAPE) and regulations (i.e., individuals who attend a transition meeting) and the rules (i.e., organization of the meeting, time frame of meeting) conducting a transition meeting. The presenter possessed knowledge regarding the evaluations (i.e., psychological, speech, occupational) necessary for assisting in the transition process. The individual who presented designed PowerPoint presentation slides (Appendix F) that were viewed during the workshops. The presenter utilized a district assigned laptop with audio and visual capability to conduct the PowerPoint presentation regarding the transition meeting (i.e., required evaluations, participants, discussion of LRE). The duration of the workshop lasted two hours with a question-and-answer session. At the end of the workshops, participants were prompted to ask questions. The goal of the workshop was to ease parental concerns related to the transition process and related meeting. The workshops were necessary to determine the content of the transition meeting. All parents/guardians participated in the transition meeting but only some parents/guardians attended the voluntary workshop.

Transition Meetings

A transition meeting occurred after the workshop and included a meeting with parent(s) and representatives (chairperson on special education and school psychologist) of the special education child's designated school district. The meeting was to discuss potential eligibility of special education services for the parent(s)' child who was exiting preschool special education and entering kindergarten. To be considered eligible, a student must meet one of the 13 educational classifications (i.e., OHI, Speech Impaired, Autism, etc.) and demonstrate a 33% delay (or two standard deviations below the mean) in a developmental area (i.e., speech, fine motor, etc.).

Prior to the transition meeting, permission to conduct evaluations were sent to the parents. Parents return the signed consent to conduct evaluations of the student in areas of potential concern (i.e., speech therapy, occupational therapy, cognitive development, etc.). The evaluations consisted of an intelligence measure and academic readiness skills (psychological), fine and gross motor scales (occupational and physical), and speech and language range, as well current special education teacher report.

When the necessary evaluations were completed, the special education designees (district employees and current school) meet (i.e., transition meeting) with the parents to discuss all the evaluations that were conducted on their child and to determine if the student met special education educational classification eligibility requirements. Once the student was deemed to present with an educational classification (i.e., OHI, Speech Impaired, Autism, etc.) the committee determined the type of educational environment needed. For example, a self-contained classroom (a small classroom ratio with students who maintain IEP's), an inclusion setting (a setting with a mix of IEP and students who do not receive special education services)

or general education with support services (i.e., speech therapy, occupational therapy, etc.). The general default was always general education with students who do not require an IEP. If modification of the environment was warranted, the designated representative and the family began to determine what type of classroom environment will address the needs and concerns of the student. This educational environment can include general education with a related service or services, placement within an inclusive environment, or placement in a separate educational setting with like students.

Upon completion of the discussion of the evaluations, the committee, and parents designed goals for the potential special educator (or general educator) and therapist(s) to work on with the student for the following school year (i.e., kindergarten). The IEP was reflected for the following school year (i.e., kindergarten). The meeting also discussed how the student performed during the current year and the support and learning style (visual learner, auditory learner etc.), the student demonstrated.

Due to COVID-19, transition meetings occurred in the setting where the children attended school from May 2022 to the June 2022 via Microsoft Teams and/or telephone conference. Parents submitted a letter (or telephoned the district) if they were available via Microsoft Teams or telephone conference prior to the scheduled meeting. The meetings occurred hourly from 8:30 am until 3:00 pm. Participants had the opportunity to complete the survey after the meeting and mail the completed survey back to the primary researcher. A self-addressed envelope was available for those who wished to complete the survey. The transition meeting team consisted of the chairperson, school psychologist, child's teacher, a supervisor of the classroom/program and the parent(s) or caregiver(s). (See APPENDIX E) Each evaluation was restrictive and confidential for the specific student under Part 200 and Part 99 of the Family

Educational Rights and Privacy Act (FERPA); therefore, no component of the documents utilized in the transition meeting can be duplicated.

After the Transition Meeting

A survey packet was mailed to participants who attended the workshop after the transition meeting had occurred. The non-attendees also received a survey packet, with directions, after the meeting and a request to complete the survey. Both group packets were mailed by the researcher via U.S. Postal Service and included a self-addressed envelope. A letter, designed and signed by the researcher (Appendix C), was mailed to all the participants indicating participation in this study was optional and would not influence the outcome of their child's CPSE-to-CSE transition meeting and/or other services. Directions on how to complete the survey were indicated on the packet. Participants were instructed, on the letter, to answer the questions, in pencil or pen, when the participant was able to devote time to the questions. Participants were instructed to read the directions on the top of each page and answer the questions accordingly. Completion of the survey required approximately 10-20 minutes. Upon completion of the survey, the parent was awarded a $20 gift card. The outcome of the survey did not influence eligibility of special education services.

Upon completion of the demographic survey and Parenting Stress Index, Fourth Edition the researcher secured all information (once completed and mailed to the researcher). The data was recorded in an Excel format on a secured computer.

In summary, the following data was collected:

Parent Psychosocial Functioning: Parenting stress will be measured with the Parenting Stress Index (Abidin, 2012).

Parent and Child Background: Parents will report basic family demographic information (Appendix A).

Data Analysis

After reporting measures of central tendency, the appropriate data analysis for this study was an independent samples *t*-test. The rationale for conducting an independent samples *t*-test was that there are two independent groups, which produced two statistically different means (Foronda, et al., 2015). An independent samples *t*-test was appropriate to determine whether there was a statistically significant difference between treatment and control group levels (Gall et al., 2007). The independent samples *t*-test was conducted to compare parental stress levels (dependent variable) for those parents who attended a transition workshop with those who did not attend (independent variable).

Similar research applying a *t*-test as the data analysis technique was conducted by Almalki et al. (2021) further justifying this data analysis as appropriate for the present study. The researchers conducted a study on the transition process for children in Saudi Arabia classified with an intellectual disability. The researchers sought to examine the perspectives of special education teachers pertaining to parental involvement in transition planning for children with special needs and the challenges identified by the special educators affecting parental involvement in transition planning. A survey was administered to collect data from 91 special education teachers. Results indicated that parents lacked participation in transition planning for several reasons, such as lack of time and lack of knowledge about transition. The study also found that schools did not seek parental input nor provide guidance about transition services to enable parents to contribute to planning.

Data screening was proceeded first to include visual screening for missing and inaccurate entries. Three assumption tests were necessary to conduct an independent samples *t* test. They included assumption of normality, assumption of equal variance, and examination for extreme outliers. The box and whisker plot was constructed to examine extreme outliers that exerted significant influence on the distribution of data. Considering the sample size was greater than 50, the Kolmogorov-Smirnov test was conducted to ascertain the normal distribution of the data. Levene's Test of Equality of Error Variance assessed the equality of variances in a variable calculated for two or more groups. All analyses were conducted via Excel.

If the independent samples *t*-test yields a significance level of $p < 0.05$, then the simple main effects of workshop attendance will be tested with an appropriate adjustment for familywise error. In a hypothesis test, there is always a type 1 error, which indicates the probability of rejecting a null hypothesis that is true (Gutjahr, et al., 2021). Cohen's *d* will be applied as a determination of effect size. An effect size of 0.2 is considered small while 0.5 is medium and 0.8 is large. After conducting statistical tests and analyzing data, the researcher will reject the null hypothesis at the 95% confidence level.

CHAPTER FOUR: FINDINGS

Overview

The purpose of Chapter Four was to report the findings of the study. The research question and null hypothesis were restated followed by a comprehensive report of results for the data collected during the study. Finally, results of the data analysis were reviewed in detail.

Research Question

RQ1: Is there a difference in parenting stress scores between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting?

Null Hypothesis

The null hypothesis for this study is:

$H_0$1: There is no significant difference in parenting stress scores (as measured by Parenting Stress Index, Fourth Edition) between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting.

Descriptive Statistics

The purpose of this quantitative, quasi-experimental group comparison research study was to determine if a statistically significant difference existed between parental stress factors related to the CPSE-to-CSE transition process of parents who participated in a workshop on that transition process and those who did not. The study examined parental stress factors which were possibly related to the CPSE-to-CSE transition process. For this study, there was one independent variable: attendance status. The participants were randomly grouped in either the control or treatment group. The dependent variable was parent stress as measured by the Parenting Stress Index, Fourth Edition (Abidin, 2012). The descriptive statistics of the study

participants' information regarding the type of transition meeting, the service their child receives, and their child's educational classifications are presented in Table 4.

Table 4

Descriptive Statistics: Education Variables (n=180)

	Workshop non-attendee		*Workshop attendee*		*Total*	
	N	%	*N*	%	*N*	%
Virtual	83	92.22	88	97.78	171	95.00
In person	7	7.78	2	2.22	9	5.00
Center-based setting	90	100.00	89	98.89	179	99.44
Integrated setting	0	0.00	1	1.11	1	0.56
Speech or Language Impaired	36	40.00	36	40.00	72	40.00
Learning Disabled	5	5.56	2	2.22	7	3.89
Deaf	0	0.00	3	3.33	3	1.67
Deaf/Blind	1	1.11	0	0.00	1	0.56
Intellectual Disability	3	3.33	3	3.33	6	3.33
Other Health Impaired	16	17.78	17	18.89	33	18.33
Orthopedic Impairment	3	3.33	0	0.00	3	1.67
Multi-Disabled	2	2.22	7	7.78	9	5.00
Autism	22	24.44	19	21.11	41	22.78
Emotional Disturbance	2	2.22	3	3.33	5	2.78

Composite scores of Parental Stress were calculated by summing the responses of the 20 PSI items (Appendix G). Internal consistency was examined using Cronbach's alpha which resulted in a value of 0.919, well above the recommended value of 0.7 (Hair et al., 2013). Table 5 provides the internal reliability for the instrument and Table 6 depicts a summary of the participant responses of the nine items of the Parent-Child Dysfunctional Interaction.

Table 5

Internal Reliability for Parental Stress.

Construct	*N*	No. of Items	α
Parental Stress	180	20	0.919

Table 6

Descriptive Statistics: Item responses of PCDI (n=180)

	Strongly agree		*Agree*		*Not sure*		*Disagree*		*Strongly disagree*	
	N	*%*	*N*	*%*	*N*	*%*	*N*	*%*	*N*	*%*
My child rarely does things for me that make me feel good.	4	2.2	26	14.4	38	21.1	63	35.0	49	27.2
Most times I feel that my child does like me and does not want to be close to me.	9	5.0	12	6.67	25	13.9	67	37.2	67	37.2
My child smiles at me less than I expected.	5	2.8	20	11.1	30	16.7	57	31.7	68	37.8
When I do things for my child, I get the feeling that my efforts are not appreciated very much.	9	5.0	21	11.7	26	14.4	56	31.1	68	37.8
When playing with my child, he/she does not often giggle or laugh.	16	8.9	31	17.2	24	13.3	35	19.4	74	41.1
My child does not seem to learn as quickly as most children.	31	17.2	34	18.9	27	15.0	47	26.1	41	22.8
My child does not seem to smile as much as most children.	25	13.9	61	33.9	30	16.7	36	20.0	28	15.6
My child is not able to do as much as I expected.	9	5.0	38	21.1	25	13.9	52	28.9	56	31.1
It takes a long time and it is very hard for my child to get used to new things.	20	11.1	42	23.3	26	14.4	63	35.0	29	16.1

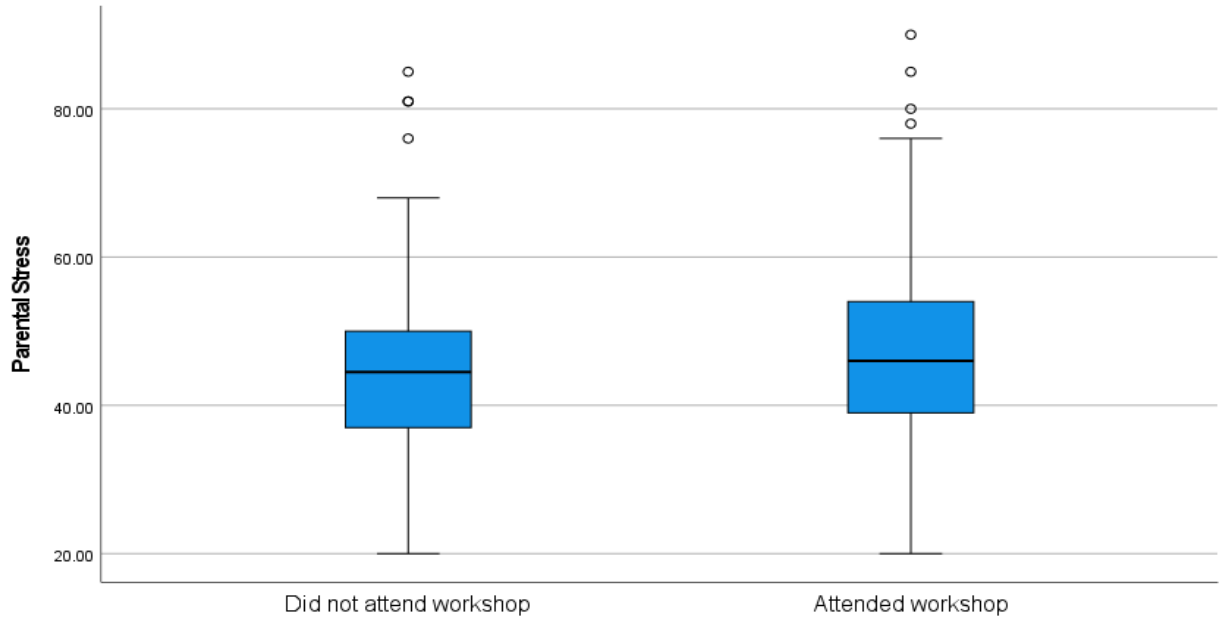
Results

There were 90 workshop attendees and 90 participants who did not attend the workshop. The assumption of normality requires that the dependent variable (Parental Stress) should be approximately normally distributed for each group of the independent variable. There should be no significant outliers in the two groups of the independent variable in terms of the dependent variable. A visual inspection revealed outliers present in the Parental Stress scores for both

groups. However, after removing these eight outliers from the dataset, the subsequently generated boxplot then identified additional outliers given the new Parental Stress score range. Because results did not significantly change with removal of outliers, the outliers were retained in the final dataset.

Figure 4

Box-and-Whisker Plots



The assumption of normality required that the dependent variable (Parental Stress) be approximately normally distributed for each group of the independent variable. Parental Stress scores were not normally distributed for workshop non-attendees and workshop attendees for both datasets ($p < 0.05$); however, the independent samples *t*-test is sufficiently robust to deviations from normality provided the sample sizes of the two groups are equal and the groups are similarly skewed (Green & Salkind, 2008). Therefore, for ease of interpretation, the complete dataset without any transformations was retained for subsequent analyses.

Table 7

Tests for Normality of Parental Stress Scores

	Kolmogorov-Smirnov			Shapiro-Wilk		
	Statistic	*Df*	*P*	Statistic	*Df*	*p*
Workshop non-attendee	0.156	90	<0.001	0.929	90	<0.001
Workshop attendee	0.137	90	<0.001	0.921	90	<0.001

Levene's test for equality of variances was conducted to assess the assumption of homogeneity of variances. Homogeneity of variances was tenable, F (2.342), $p = 0.128$.

Table 8

Levene's Test for Equality of Variances

Attendance	*F*	*df1*	*df2*	*p*
Parental Stress	2.342	1	178	0.128

An independent samples *t*-test was conducted to assess the difference between parents who attended a transition workshop and those who did not regarding parental stress factors during the CPSE-to-CSE transition process. The null hypothesis included that there is no difference in parenting stress scores as measured by Parenting Stress Index, Fourth Edition after a transition meeting for parents of students with disabilities between those who attend a CPSE-to-CSE transition workshop ($M = 47.2667$, $SD = 15.940$) and those who do not ($M = 44.1333$, $SD = 13.5159$). The null hypothesis failed to be rejected as there existed no significant difference between the two groups of parents (t (178) = -1.422, $p = 0.157$).

Table 9

Independent samples t-test comparing Parental Stress scores across workshop attendance

Attendance	*n*	*M*	*SD*	*t*	*df*	*p*
Workshop non-attendee	90	44.133	13.516	-1.422	178	0.157
Workshop attendee	90	47.267	15.940			

Chapter 4 consisted of analyzing and discussing the results from the study. A convenience sample was implemented because "the researcher selected a sample that suited the purpose of the study and that was convenient" (Gall et al., 2007, p. 175). Results revealed parental stress factors, when exposed to a transition workshop, did not produce a significant difference between the two groups resulting in a failure to reject the null hypothesis.

CHAPTER FIVE: CONCLUSIONS

Overview

Chapter Five included an in-depth discussion of the research study and results from the statistical analysis. This section also included a discussion of implications of the research considering prior related studies. Finally, potential limitations of the study were identified and recommendations for further research were discussed.

Discussion

The purpose of this quantitative, quasi-experimental group comparison research study was to assess the effects of parental stress factors during the CPSE-to-CSE transition process when exposed to a transition workshop. The study was framed by one research question:

RQ1: Is there a difference in parenting stress scores between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting?

$H_0$1: There is no significant difference in parenting stress scores (as measured by Parenting Stress Index, Fourth Edition) between parents of students with disabilities who attend a CPSE-to-CSE transition workshop and those who do not after a transition meeting.

An independent samples *t*-test was conducted to analyze the difference in stress factors between the participants in the treatment group who attended the transition workshop and the control group who did not attend the transition workshop. The hypothesis failed to be rejected because a significant difference in parental stress factors did not exist between the treatment and control groups. The study was the first to examine parental stress factors during the CPSE-to-CSE transition process. Ninety participants attended a transition workshop while an additional ninety did not attend a transition workshop. The Parental Stress Index (Abidin, 2012) was

administered to assess stress factors during this process. Despite some studies examining transition processes, parents reported issues with lack of information regarding laws and regulations pertaining to transitions (Ali et al., 2021; Cook et al., 2019; Curby, et al., 2018; Hall & Lindorff, 2017).

The transition from CPSE-to-CSE is a process formed with the assistance of the parent, school, and others (Cook et al., 2019). School employees significantly contribute to a child's connection with school during the transition process as well in later school engagement (Pianta, 2003). Beginning school successfully is a crucial step to favorable reactions to school (Cook et al., 2019). When students and parents feel valued and respected, they are likely to successfully engage. When the reverse occurs, all parties may feel alienated and unsupported resulting in students and families suffering. Vygotsky's (2007) cultural historical model, with its focus on education and relationships among all parties, supposed that teaching and learning be perceived as a transactional process, more specifically, teaching and learning.

While there are many reasons to invest in preschool programs, children's persistent gaps in school readiness are chief among them. For young children, performing well in school means being ready to learn. Readiness requires physical, language, self-control, and social skills as well as the desire to learn (Cook, et al., 2017). School readiness enables the child to experience a smooth transition from home to school and intra-school.

Transition to elementary school is an important and complicated process in any family's life, but more so for a family with a child with special needs (Grigal, et al., 1997; Snow, 2013). The relation between children's performance during early elementary school and their later academic achievement has been well-documented (Entwisle & Alexander, 1998). Enhancing the

relationship between the school, family, and community may improve transition between committees.

Children with special needs may experience a complicated transition to kindergarten, yet gaps exist in the research pertaining to this process (Curle, et al., 2017). Students with special needs often require additional support to adjust and acculturate to the new school environment while functioning adequately for learning (Kagan, et al., 2013). Frequently, these processes are not established for children with special needs in a new school setting (Abry et al., 2015; Entwisle & Alexander, 1998). It is, therefore, helpful to identify the possible concerns that prohibit an effective transition and impede modification.

Consistent with Pianta's (2003) findings on the transition to kindergarten, the transition from preschool to kindergarten occurs in a social context and does not solely require the examination of the child's ability but also the families' experiences. The environment tends to affect the transition process. A child's adjustment to school needs to be better understood in terms of the interaction between their agency and environmental factors. As noted by Bronfenbrenner (1986), parents are influential in forming a child's social and emotional development especially when transitioning through different levels of development. Early relationships with parents provide the basis for social competency and peer relationships. Parents must also ensure a child's legal rights are accessible (IDEA, 2006). Parents can assist and ask for assistance when unsure. They need to understand they are integral in the lives of their child, be it a child that is typically developing or a child with special needs. Transitional success is less likely without the assistance of all parties.

The transition process fosters the social-emotional and academic development of students with special needs and their families. The preschool programs function in reinforcing and

planning children's transitions to school (Curby, et al., 2018). This needs to be established and incorporated in preschool special education, early childhood education, specialized learning institutions, and policy documents (Curle, et al., 2017; Curtis, 2005). The transition to traditional schooling challenges young children to quickly adjust to new environments, new academic applications, and new practices (Pianta & Kraft-Sayre, 2000; Ladd & Dinella, 2009; Ladd & Price, 1987). Positive transition exposures relate to academic and social outcomes (Dockett et al., 2001; Pianta & Kraft-Sayre, 2003; Schulting, et al.,2005). Children who adjust more easily to new school routines tend to be more likely to engage and share in classroom activities and to like school (Ladd &Price, 1987; Ladd et al., 2009).

Implications

Research implications from this study reveal the transition process did not support the hypothesis. The study was designed to examine participants who attended, and did not attend, a transition workshop. The findings reveal there is no significant difference in the degrees of parenting stress for parents of students with disabilities in preschool special education (CPSE) and school-age special education (CSE).

Empirical Implications

The period during which the child transitions from pre-school to primary school is considered crucial comprising significant changes. The transition is a very complex process as it looks at eligibility for a continuum of services for the school age committee. It requires adapting to a new peer group, role, teacher and expectations and a possibility of different special education services (Margetts & Kienig, 2013; Pianta & Kraft-Sayre, 2003). Some researchers emphasize the transition from pre-school to primary school as a necessary challenge for children through which they will develop and learn to be more flexible while others stress the importance

of continuity of their lives and their education (Brown & Guralnick, 2012). The family's relationship with the school affects how well the child adapts to and how much the child benefits from school.

Most research in the childhood transition process focuses on general education and the period after which the student has entered a new grade level rather than parents of a child with special needs. For children with special needs, parental stress can affect the child when transitioning from one setting to another especially when the parent misunderstands special education services (Bassok et al., 2018; Margetts & Keinig, 2013). These caregivers often question how, when, where, and with whom their children's special education services will be provided (De Feyter & Winsler, 2009) inducing stress. Based on this study, attending transition workshop did not determine if a statistically significant difference exists between parental stress factors related to the CPSE-to-CSE transition process of parents who were exposed to a workshop on that transition process and those who were not. This implies both groups (attendees and non-attendees) experience the same levels of stress during prekindergarten transitions and benefit from some support but the workshop, in general, did not significantly affect the parental stress level(s). To continue assessing parental stressors during the CPSE-to-CSE transition period, researchers should determine if stressors are connected to a child's educational classification, and if stressors are increased prior to gaining some insight into the process, or are stressors brought on as a result of transitioning from a restrictive and nurturing environment to a less restrictive environment where the emphasis is considered more academically.

Theoretical Implications

The vast amount of existing literature for transitions relies heavily on students entering general education mostly ignoring parents of students with special needs. This study focused on

a transition workshop designed to potentially alleviate stress. Several theorists, Bronfenbrenner (1986), Piaget (1970), and Vygotsky (1978) theorized that children make sense of the world through exposure, modeling, interactions, and "making meaning" (i.e., transition process). Diek (2018) revealed when supported, anxiety may decrease. This study designed a strategy to address if exposure to a workshop on the transition process would decrease stress factors in parents of children who attend a self-contained setting (4410 program). Findings revealed exposure to a workshop do not relate to the theories framing this study, which differ from Bronfenbrenner and Vygotsky's theories, where parental input and transition practices are beneficial to the child. Although these findings counter conventional wisdom, the act of participants attending the workshop to assist the children during the transition process is consistent with Bronfenbrenner and Vygotsky's theories regarding parents employing different systems to assist their children in the development of the child. Bronfenbrenner and Vygotsky theories support the belief that humans (i.e., children) encounter various environments throughout their life that influence development. The theories explore the development of children through a system of relationships (i.e., parent with child, etc.) that comprise the child's environment.

Practical Implications

The research literature discussed in chapter two reported prior studies on the transition process support implementing strategies that would benefit parents during this time (Besi & Sakellariou, 2019; Diek, 2018). Yet, the findings of this study revealed a significant difference for parents attending a transitional workshop and those who did not attend did not exist. Researchers can add to this research by examining if the child's educational classification (i.e., speech or language impaired, etc.) or medical disability (i.e., autism, deafness, etc.) affects the parental stress level during the transition process. Researchers can also conduct a pre-survey to

assess baseline parental stress levels and then post-survey to compare the results. Based on the current results, parents were willing to attend a workshop to support their child during this process. Educators can apply these results to narrow the type of information needed during the process and tailor their workshops based on classifications.

Limitations

There were several limitations to the study. First, the setting and timeframe of the study were limiting. The results were limited to a small number of families from one city and school district, and with families of children that are classified with a special need. The timeframe was limited to the middle and end of one school year (i.e., April, May, and June). A more longitudinal study range and broader setting could return more generalizable results.

Another limitation was prior parental knowledge. During the study, 80 participants first attended a workshop and then participated in their child's transition meeting. A pre-survey should have been administered to assess parental knowledge of regulations and laws.

All special education programs were designated "4410" settings supported by the state and local government, not independent programs. The scope of this study did not include how educators in other settings (general education, parochial schools, etc.) support children's transitions to kindergarten. Furthermore, the scope did not include how not-for-profit settings support children during kindergarten transitions. The study included parents, not childhood educators and directors.

Another limitation pertains to PD scores for both groups which were not normally distributed as evidenced by Kolmogorov-Smirnov test. However, independent samples *t*-test are relatively robust to deviations from normality provided the sample sizes of the two groups are equal and the groups are similarly skewed with a tenable Levene's test for equality of variances

($p = 0.128$). The independent samples *t*-test was also conducted after removing the outliers. This resulted in the same findings of an insignificant difference between the two groups, therefore, the outliers were ultimately included.

Lastly, when assessing the data findings, it did not account for a child's educational classification and/or medical diagnosis. A medical diagnosis is such that a developmental neurologist or psychiatrist examines the child with a medical condition (deafness, autism, etc.) which has the potential to impede on overall function. An educational classification (i.e., speech or language impaired, etc.) is assigned at the end of a CPSE and/or CSE meeting.

Recommendations for Future Research

Future research should include the exploration of the role of private childcare centers (as well general education settings) in children's transitions to kindergarten in different geographic locations. It may also be helpful to study how committee members on the IEP team or in the same district collaborate to ensure they offer an appropriate level of support to families during the transition. While it is important that therapists (e.g., occupational therapists, speech-language pathologists, etc.) continue to examine their professional role during the transition process, it is also vital to understand other members' (e.g., special education teachers) roles and perceptions of eligibility.

Another recommendation suggests a future study include the student's educational classification. Parents and educators may consider one disability as more stressful than another disability. School districts can survey parents based on the disability as well as the age/grade of the student. A future study should include specific disabilities (i.e., autism, other health impaired, etc.) to determine if stress factors are affected based on the educational classification. The few studies comparing transition preparation interventions to child outcomes have primarily

concentrated on children entering general education (Lo Casale-Crouch, et al. 2008; Schulting et al. 2005).

If school districts are to ease families' anxiety in the transition, the districts may need to assist parents with the policies and laws that govern transition at a local and federal level. However, stakeholders first need to recognize how family involvement and practices affect outcomes for their children before they can conclude how policy changes regarding transition may help families and children with special needs. There has been little focus on interventions and strategies to best support the families and students during the transition process (McIntyre & Wildenger, 2010). Given that students with disabilities may be at risk for complications upon entering kindergarten, there is a need for additional studies to examine the influence of transition preparation on kindergarten outcomes.

In addition, studies that examined the value of parent support on reducing parent anxiety during kindergarten transition would address a gap in the empirical literature. Research should focus on longitudinal studies that investigate children with and without disabilities. With the exception of one study that monitored Head Start children progressing from pre-kindergarten program through third grade (Redden et al. 2001), there are no other longitudinal studies that addressed the outcomes of students with disabilities as they transitioned from preschool to elementary school. Lastly, future research could examine ways to align early childhood and elementary education curricula to help families navigate the transition to kindergarten.

Summary

Chapter 5 included a discussion pertaining to the findings of the study. The chapter included the implications (empirical, theoretical, and practical) and study limitations as well recommendations for future research. Overall findings included that parental stress factors during

the CPSE-to-CSE process were not significantly different for the attendees and nonattenders of the study. Veteran educators who conduct transition meetings may find the outcome surprising. Often, parents repeatedly ask the same questions regarding the transition process and eligibility criteria for school age special education services. Transition workshops can be considered solutions to alleviate the stress parents display during the transition process as evidenced by the repetitive questions. However, the results of the study demonstrated no significance difference between attendees and non-attendees. Future research should include a presurvey prior to the workshop to assess if there is a potential significance in parental stress factors between both groups (attendees and non-attendees) when surveying parents' knowledge of laws and regulations pertaining to the transition process. The presurvey should be designed to examine parental knowledge prior to the introduction of a workshop's benefits.

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APPENDIX A

PARENTS' EXPERIENCES WITH THE CPSE TO CSE TRANSITION

STUDY INSTRUMENTS

Study ID #_____

PARENT & CHILD BACKGROUND

What is your relationship to the child?

___ Birth parent

___ Adoptive parent

___ Stepparent

___ Foster parent

___ Grandparent

___ Guardian

___ Other (please specify)

How old are you?

_____ years

What is your marital status?

____Currently Married/Committed Partnership

____Widowed

____Divorced

____Separated

____Never married/partnered

What is the highest level of school you have completed?

____No Schooling Completed

____Grade 1 – 11; Specify Grade _____

____12th Grade

____Regular High School Diploma

____GED or alternative credential

____Some college credit but less than one year of college credit

____1 or more years of college credit, NO Degree

____Associate degree (for example, AA, AS)

____Bachelor's Degree (for example, BA, BS)

____Master's Degree (for example, MA, MS, MBA)

____Professional Degree (for example, MD, DDS, DVM, JD)

____Doctoral Degree (for example, PhD, Ed. D)

How many adults (aged 18 years and older) live in your household? _____ adults

How many children under age 18 live in your household? _____ children

What is your total household income?

_____Less than $10,000

_____$10,000 to $14,999

_____$15,000 to $24,999

_____$25,000 to $34,999

_____$35,000 to $49,999

_____$50,000 to $74,999

_____$75,000 to $99,999

_____$100,000 to $149,999

_____$150,000 to $199,999

_____$200,000 or more

How do you identify culturally/ethnically (check all that apply):

_____Asian or Pacific Islander

_____Black or African American

_____Hispanic/Latino/Spanish origin

_____White/Caucasian

Were you born in the United States?

Yes_____ No _____

If no, at what age did you move to the United States? _____ years old

If no, what was your country of origin? _____

If any of your family members (parents, grandparents, great-grandparents) were born outside of the United States, please let us know which family members and where they were born.

__ Father Country of origin _____

__ Mother Country of origin _____

__ grandparent on father's side Country of origin _____

__ grandparent on mother's side Country of origin _____

__ great-grandparent on father's side Country of origin _____

__ great-grandparent on mother's side Country of origin _____

My child receives:

Center-based setting_____ Integrated setting_____

Dual Services_____ Related Services only_____

What is your child's educational classification? (choose the current classification):

CPSE

Preschooler with a disability_____

CSE

Speech or Language Impaired_____ Multi-Disabled_____

Learning Disabled_____ Traumatic Brain Injury_____

Deaf_____ Blind_____

Deaf/Blind_____ Autism_____

Intellectual Disability_____ Emotional Disturbance_____

Other Health Impaired_____ Hearing Impaired_____

Orthopedic Impaired_____

PARENTING STRESS

We are interested in understanding parents' experiences with the parenting role. For the following statements, please let us know how much you agree or disagree with the statements. Please circle your answer choice.

	1 Strongly Agree	2 Agree	3 Not Sure	4 Disagree	5 Strongly Disagree
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
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	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5
	1	2	3	4	5

Questions were removed to comply with copyright.

January 2022

Dear Parents:

As a doctorate student in the School of Education (Curriculum and Instruction/Special Education) at Liberty University, I am conducting research as part of the requirements for a doctoral degree and to better understand parental stress factors during the Committee on Preschool Special Education (CPSE) to Committee on Special Education (CSE) transition process. The purpose of my research is to examine factors that promote positive experiences among parents of preschool-aged children during the year prior to their transition to kindergarten and as they engage in transition planning for their children. I am writing to invite eligible participants to join my study.

Participants must have a child born between December 2, 2016, and December 1, 2017, who is in the process of exiting CPSE and entering CSE during the 2021 to 2022 school year. All participants are invited to take part of completing the survey and some participants will be asked to attend a transition workshop via Microsoft Teams. It should take approximately one hour to complete the workshop. The selection of participants attending the workshop will be randomized. All participants will attend the transition meeting and it will be conducted in person at the school their child attends. After the meeting, all participants will complete a paper survey. It should take about twenty minutes for the completion of the survey. Participants will have an option of competing the survey after their meeting or taking the survey home and completing and mailing the survey to the researcher. Identifying information will be collected as part of your participation, but participant identities will not be disclosed.

To participate, please contact me at 914-XXX-XXXX by May 20th, and I will provide additional information about the workshop date(s) and time(s). If you chose not to participate, please contact me at 914-XXX-XXXX to decline.

A consent form is attached to this letter. The consent document contains additional information about my research. If you choose to participate, you will need to read and sign the consent form and return it to me prior to the CPSE-to-CSE transition meeting. A self-addressed envelope will be mailed to the families with the consent to participate in the survey.

Participants will receive twenty-dollar gift card at the completion of the packet survey. The gift card will be mailed to your home within a week of my receipt of your completed survey.

Sincerely,

Christine Iturriaga
Investigator/Researcher
914-XXX-XXXX
XXXXXXXXXX@aol.com

APPENDIX C

Consent

Title of the Project: Parental Stress Factors for Parents during the CPSE to CSE Transition Process

Principal Investigator: Dr. C. Pearson, Liberty University
Christine Iturriaga, MS (Special Education and SAS/SDA), Liberty University

Invitation to be Part of a Research Study

You are invited to participate in a research study. In order to participate, you must be a parent of a child who attends a specialized setting and is in the process of transitioning from CPSE to CSE. The birthdate of the child should be born between December 2, 2016 and December 1, 2017. Taking part in this research project is voluntary. The consent to participate will in not part impact on eligibility of the recommendations.

Please take time to read this entire form and ask questions before deciding whether to take part in this research project.

What is the study about and why is it being done?

The purpose of the study is to examine factors that promote positive experiences among parents of preschool-aged children during the year prior to their transition to kindergarten and as they engage in transition planning for their children.

What will happen if you take part in this study?

If you agree to be in this study, I will ask you to do the following things:

1. Seventy-two parents will participate in a transition workshop.
2. The task is to complete a survey post the transition meeting. The completion of the survey should take approximately twenty minutes.

How could you or others benefit from this study?

There are no direct benefits for participating in this study. The information obtained should help us learn more about the factors that contribute to parents' experiences during the transition to kindergarten, and in particular, after district meetings.

There will be one hundred forty-four parents taking part in the study. Seventy-two of the parents will take part in a transition workshop. All participants will take part in a packet survey.

What risks might you experience from being in this study?

There are no known risks associated with participation in this study.

How will personal information be protected?

The investigator is taking precautions to keep your information confidential and prevent anyone from discovering or guessing the identity of the participant, by using an ID number instead of your name and keeping all information on a password protected computer and locked in a file drawer. Only the researcher will have access to the records. All of the information obtained will be kept confidential. The family's name will not be used on any of the forms completed, and no information about your answers will leave district/school premises with your name attached. The survey that is complete will be marked with a randomized number.

The information collected from this study will be complied into a report that will be available for you to view upon request at the completion of the study. The report will not contain any individual information about specific families. The records of this study will be kept private. It will describe the experiences of all families in the study as a group.

If you decide to participate, you will be asked to complete a questionnaire about your child and yourself, your experiences as a parent, and your experiences as a parent, your experiences with the special education process within your child's school district. The study consists of one survey. It will take about twenty minutes of your time to compete the survey. You will receive a self-addressed envelope, for your convenience, to mail the survey to the researcher upon completion.

How will you be compensated for being part of the study?

Participants will be compensated for participating in this study. Following your participation in this study, you will receive a twenty-dollar gift card. The gift card will be mailed to your home within a week of receipt of the survey.

Does the researcher have any conflicts of interest?

The researcher serves as the CPSE to CSE Chairperson for the school district your child is registered. This disclosure is made so that you can decide if this relationship will affect your willingness to participate in this study. No action will be taken against an individual based on his or her decision to participate in this study. Participation in this study will not impact on the meeting or recommendations made at the end of the meeting.

This study is funded by researcher, not the district your child is enrolled. This disclosure is made so that you can decide if this relationship will affect your willingness to participate in this study.

Is study participation voluntary?

Participation in this study is voluntary. Your decision whether to participate will not affect your current or future relations with Liberty University or the school district your child is registered. If

you decide to participate, you are free to not answer any question or withdraw at any without affecting those relationships.

What should you do if you decide to withdraw from the study?

If you choose to withdraw from the study, your responses will not be recorded or included in the study. If you choose to withdraw from the study, please contact the researcher at the email address/phone number included in the next paragraph. Should you choose to withdraw, data collected from you will be destroyed immediately and will not be included in this study.

Whom do you contact if you have questions or concerns about the study?

The researcher conducting this study is Christine Iturriaga. You may ask any questions you have now. If you have questions later, **you are encouraged** to contact her at 914-XXX-XXXX or email her at XXXXXXXXXX@aol.com. You may also contact the researcher's faculty sponsor, Dr. Pearson, at XXXXXXXX@liberty.edu.

Whom do you contact if you have questions about your rights as a research participant?

If you have any questions or concerns regarding this study and would like to talk to someone other than the researcher, **you are encouraged** to contact the Institutional Review Board, 1971 University Blvd., Green Hall Ste. 2845, Lynchburg, VA 24515 or email at irb@liberty.edu

Your Consent

By signing this document, you are agreeing to be in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records. If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and have received answers. I consent to participate in the study.

_____

Printed Subject Name

_____

Signature & Date

Legally Authorized Representative Permission

By signing this document, you are agreeing to the person named below participating in this study. Make sure you understand what the study is about before you sign. You will be given a copy of this document for your records. The researcher will keep a copy with the study records.

If you have any questions about the study after you sign this document, you can contact the study team using the information provided above.

I have read and understood the above information. I have asked questions and have received answers. I agree for the person named below to take part in this study.

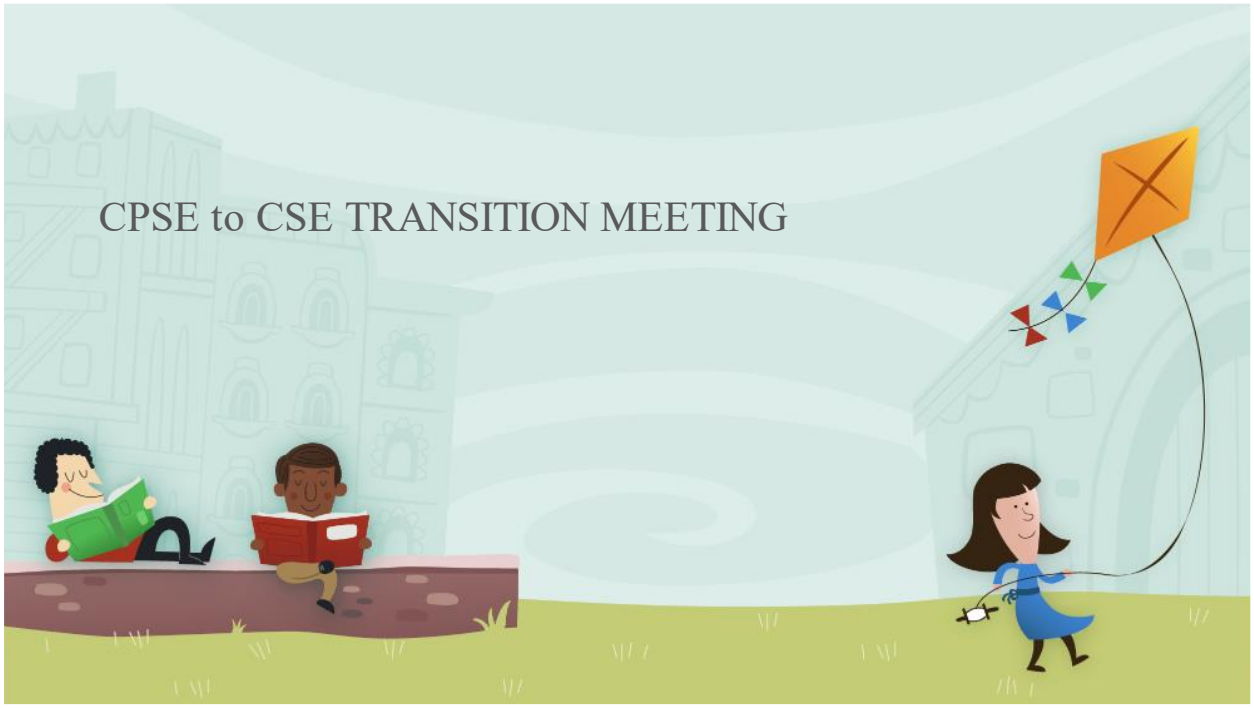
_____
Printed Subject Name

_____
Printed LAR Name and Relationship to Subject

_____
LAR Signature Date

APPENDIX D

Workshop: PowerPoint Slides (English/Spanish)



Some children currently receiving Preschool Special Education Services will:

- Move to Special Education services under the Committee on Special Education (CSE).
- Others who no longer need specialized services will be declassified.
- Regardless of what programming decisions are made, transition planning will be part of your child's final annual review under CPSE.

CPSE to CSE Transition Process

Introduction:
The CPSE is responsible for children with disabilities ages 3-5 .
The CSE is responsible for children with disabilities ages 5-21.
Special education means specially designed individualized or group instruction or special services or programs to meet the unique needs of students with disabilities.
Special education services and programs are provided at no cost to the parent.

Transition planning will include:

- A review of your child's progress
- Identification of community resources needed by and available to you and your child
- A determination whether your child will be referred to Committee on Special Education (CSE)
- Timelines to ensure continuity of services
- Clarification about how information will be passed from CPSE to CSE
- A determination of whether services will be 10 or 12 months
- Steps to help your child adjust to a new setting

What will happen:

- This meeting is the beginning of the process for your child
- The CPSE refers your child to the school districts' Committee on Special Education if services need to continue.
- We will discuss how best for you to prepare.

Month of November to January

Consent to Re-Evaluate

Social History

Medical

Evaluations conducted as part of the process
Psychological
Speech, OT, PT, Vision screens
Teacher/School Reports
Therapist(s) report(s)
Social History (sent home with re-evaluation consent).
Updated medical (submitted by the family)
Private Reports

Place where the meeting will take place:

Current Program

Central Office

Day of the meeting:

Introductions
Demographics
Health/Medical
Social History
Psychological
Speech/OT/PT/Vision screens
Teacher Report/Input
Therapist report
Private Reports

Private Reports will be documented.
Please note the committee will acknowledge the information.

**Submit independent reports, at least, 10 days prior to the meeting.

After review of information:

It must be determined if the student meets eligibility requirements (one of the 13 disabilities): Other Health Impaired; Speech or Language Impaired; Learning Disabled; Autism; Intellectual Disabled; Deafness; Blind; Deaf/Blindness; Traumatic Brain Injury; Multiple Disabled; Orthopedic Impaired; Emotional Disturbance; Hearing Impaired

Preschool children with a disability who stop receiving preschool services due to program completion or declassification will be given an exit assessment.

Information from the exit assessment is part of the discussion at the child's annual CPSE meeting. Information is gathered in the following three areas as part of the exit assessment:

- Positive social-emotional skills, including social relationships
- Acquisition and use of knowledge and skills including early language/communication and early literacy
- Appropriate behaviors to meet their needs

Difference between an educational classification vs. medical diagnosis.
Section 504 of the Rehabilitation Act: A 504 plan outlines how a child's specific needs are met with accommodations. These measures "remove barriers" to learning.

Section 504 requires evaluation procedures that prevent students from being misclassified, incorrectly labeled as having a disability or incorrectly placed.

THINGS TO REMEMBER ABOUT 504
An effective 504 plan is tailored to meet the needs of your child

Your child's informal accommodations will have the law behind them if they're formalized in a 504 plan.

Reminder to be proactive about participating in your child's 504 meetings.

Recommendations:

L.R.E. (Least Restrictive Environment): means that placement of students with disabilities in special classes, separate schools or other removal from the regular educational environment occurs only when the nature or severity of the disability is such that, even with the use of supplementary aids and services, education cannot be satisfactorily achieved.

F.A.P.E. (Free Appropriate Public Education): A free appropriate public education is provided at no cost to parents. School districts must allow parents to review and examine records, participate in IEP meetings and have access to complaint procedures. Law states that a school district is NOT required to provide the BEST possible educational program, only one that meets the unique needs of the child and demonstrates educational benefit.

Default: General Education

Specialized settings (i.e., 12:1:1 etc.)

Related Services

504

WE DO NOT RECOMMEND SCHOOLS – WE RECOMMEND SERVICES

The CPSE is required to notify the Board of Education (BOE) that your child is eligible for Special Education services under the Committee on Special Education, CSE.

The Committee on Special Education will:

- Determine eligibility for CSE services
- Develop and Individualized Education Plan (IEP)
- Discussion of Free Appropriate Public Education (FAPE)
- Arrange for delivery of programs/services
  - Type
  - Duration
  - Frequency
  - Location
  - Identify the Least Restrictive Environment for your child (LRE)
  - Discuss 10 month vs. 12 month programming to prevent substantial regression
  - Discuss a Functional Behavioral Assessment if needed.

The following information is reviewed

Adaptive—self-help in areas, ex. dressing and eating

Cognitive—thinking, figuring things out, problem solving

Motor—moving fine muscles development like grasping

Speech and Language —talking, understanding and communicating

Social Emotional—getting along with others, coping

An evaluation is a careful examination of a child's skills, strengths and weaknesses to determine:

- current levels of functioning
- how best to plan for your child
- What can he do?
- What does she like to do?
- What kinds of things should he/she be encouraged to do next?

If additional information is needed the CSE may ask for the following information to help determine CSE eligibility and for developing the most appropriate IEP (Individualized Education Program).

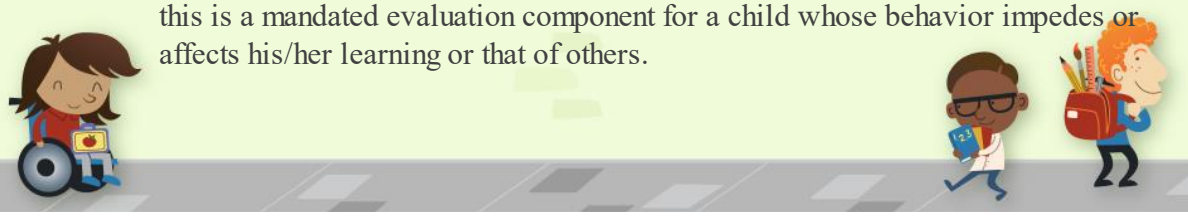
- Physical examination
- Individual psychological evaluation
- Social history

Observation of your child in the student's learning environment

Possible assessments for:

- Speech
- Occupational Therapy
- Physical Therapy

Other appropriate assessments, such as a Functional Behavioral Assessment (FBA) this is a mandated evaluation component for a child whose behavior impedes or affects his/her learning or that of others.



The laws about Special Education identify parents as members of the CSE. The CSE is responsible for creating the Individualized Education Program (IEP) which is designed to identify the programs and services to meet your child's educational needs. Your child's IEP is developed by a team that includes:

- you, the parent
- an administrator from the district
- teachers (general and special education)
- people that you feel have information on your child.

Parents must put a request in writing to the committee that they will bring an additional person to the meeting.

That is quite a crowd!

Preparing for the Meeting

Before your child's CSE meeting think about your answers to the questions below:

- Are there aspects of your childs behavior that you believe interfere with learning? If so, what?
- What are your childs strengths and weaknesses?
- What methods have you found to be effective in supporting your childs growth and development?
- How well does your child interact with other children their age?

You should leave the meeting with a clear understanding of:

- Your child's strengths and weaknesses
- The goals that will be worked on for the school year
- The methods and services that will be used to reach these goals

Developing the Individual Education Plan (IEP)

The Individualized Education Program (IEP) may include the following components:

- Present Levels of Educational Performance (PLEP)
- Classification
- Measurable annual goals
- Special education programs/placement
- Related services
  - Frequency, location and duration of services
- Extended school year eligibility
- Participation in district wide/state assessments
- Special Transportation

Rethink Autism:

Rethink aims to place evidence -based treatment solutions in the hands of every educator, clinician or parent working with a child with special needs.

Rethink uses technology to provide clinical support, best -practice tools, and research-based content, reaching more children with special needs than any other solution. Teachers and parents have access to the program. Students have their own login to do activities in school and at home. There are web -based trainings and resource

Rethink uses evidence -based practices delivered via training instruction and webinars.

The program and core principles behind Rethink Autism are based on applied behavioral analysis.

Rethink uses principles in nearly all domains of services; from discrete trial instruction to data collection.

Rethink offers teaching staff a comprehensive curriculum that addresses the needs of special education students across functioning and grade levels with four main pedagogical focuses: core developmental skills, inclusive practices, transition planning, and behavior.

Areas included in the evaluation:

For children being declassified an evaluation must be conducted. Evaluations do not always need to be completed for children who are moving from CPSE to CSE as a review of current information is appropriate.

Declassification for Some Students

Areas included in the evaluation:

For children being declassified an evaluation must be conducted. Evaluations do not always need to be completed for children who are moving from CPSE to CSE as a review of current information is appropriate.

Declassification for Some Students

Some children may no longer need an IEP under Special Education Services. For those children there is a process identified as declassification.

Questions that you as a parent may be asking yourself as your child approaches the end of Preschool Special Education:

What is declassification?
How does declassification happen?
Who decides if my child will be declassified?
What should I do if my child begins to struggle once he/she is in school?

Tips for Parents

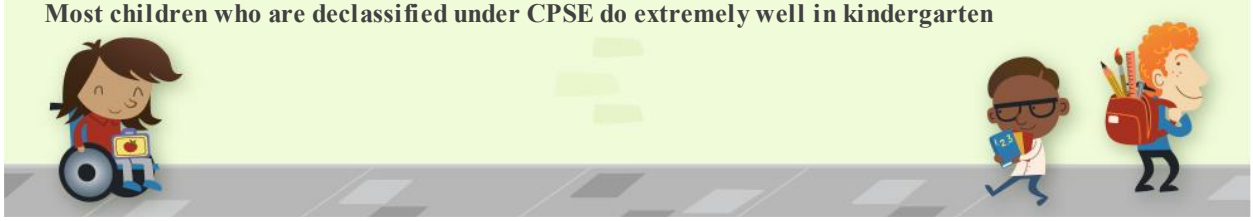
Declassification can be a wonderful opportunity for your child. It indicates that your child has made progress and he/she no longer requires services under CPSE or CSE.

If a child is recommended for declassification, a process MUST be followed. This process includes the following components:

The CPSE reviews existing evaluation data as part of the reevaluation process and identified what if any additional data is needed.

The CPSE has the responsibility to arrange for additional assessments by an approved evaluator selected by the parent. The results must be provided to the CPSE, the parents and the municipality. The CPSE must review the reevaluation and assessment results and determine the child's progress rating in each of the three outcome areas.

Most children who are declassified under CPSE do extremely well in kindergarten

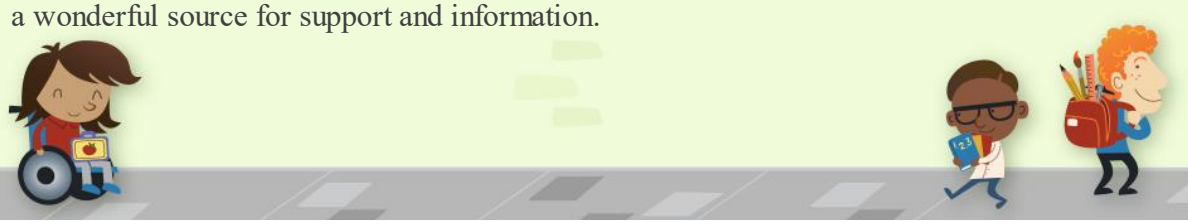


Tips for Parents

When your child talks about school environment. Pay attention to his/her feelings. If you notice behavioral changes speak with the school personnel and teacher. It is also great to share the positive changes or observations with the school.

It is always helpful to keep good records. Organize folders or boxes early so that you have a place to store medical records, written reports, test results, etc. This will help you later when you need them.

Try to meet and talk to other parents. Get to know parents through informal talks or by joining parent groups at your school or community (i.e., PTA and SEPTA). Other parents are a wonderful source for support and information.



You are an excellent source of information about your child. Your input to your child's program is valuable and important.

A team approach, in which you and the school are working together, is the BEST approach.

Keep in contact with your child's teacher on a regular basis. Informal conversations or notes are an excellent way to stay informed and establish a relationship with your child's teacher.

SUMMER ELIGIBLE??

LAW: NYSED Part 200 – The committee must determine whether a student requires extended school year special education services in order to prevent substantial regression. Substantial regression would be indicated by a student's inability to maintain developmental levels due to a loss of skill, set of skill competencies or knowledge during the months of July and August.

QUESTION:
SHOULD I BALLOT FOR A KINDERGARTEN SEAT?
ANSWER: YES!!

IEP's distribution

Suggestions to assist with the transition

Proceso de Transicioń
Introduccioń

Mes de noviembre

Consentimento para re-evaluar
Historia social

Las evaluaciones realizadas como parte del proceso

Psicolõgica

Habla, terapia ocupacional, fisioterapia, pantallas devision

Infome(s) Terapeutas

Historia social (enviado a casa con las re-eval consentimiento)

Actualizado medica (presentado por la familia)

Lugar de encuentro

Programa actual
Oficina central

Dia de la reunion:
Introducciones
Demografia
Salud/Medicina
Historia social
Psicologica
Analisis de habla/OT/PT/Vision Infomes de proveedores privados
terapeuticos Reportes

Seran documentados infomes privados

El Comite' cosiderara' informes privades que usted someta.

**Favor de notar que informes independientes tienen que ser sometidos al Comite, al menos, 10 dias antes de la reunion.

Determinacion de Egibilidad:
(uno de los 13 discapacidades).
Diferencia entre discapacidad educative y diagnostico medico.

Recommendaciones :

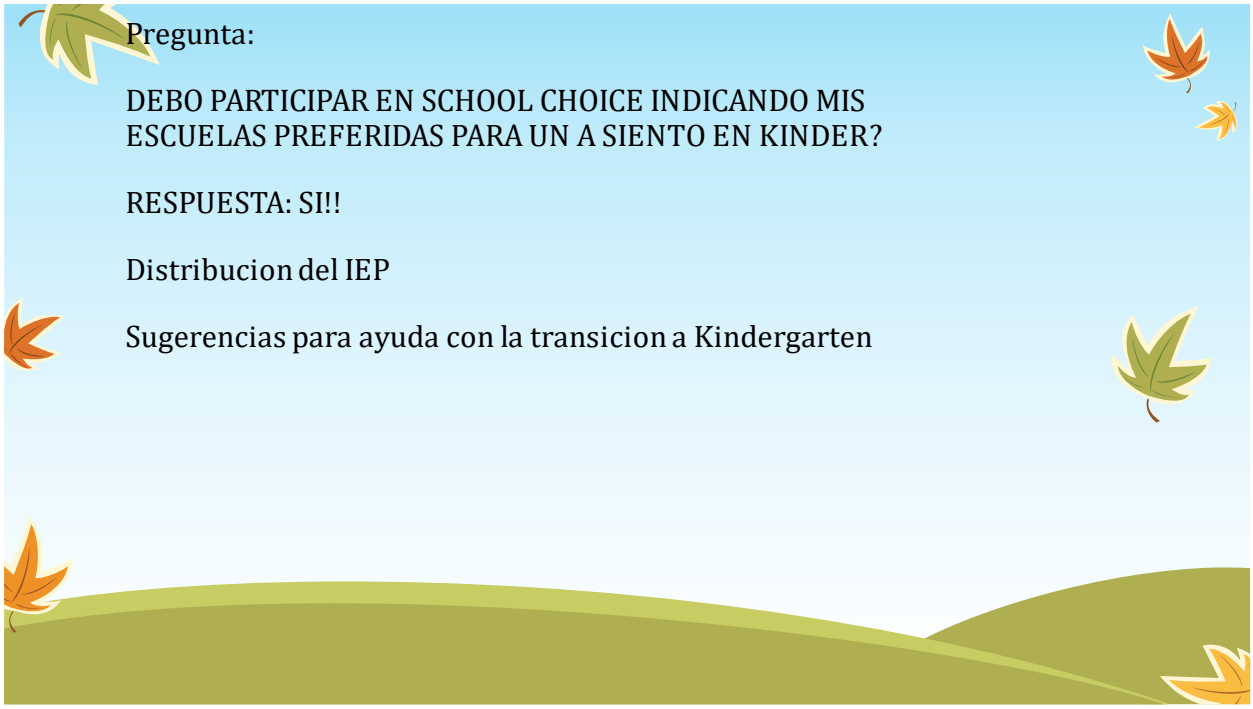
Programas Especializadas (es decir, 12:1:1 etc.); servicios relacionados

EL DISTRICTO NO RECOMIENDA ESCUELAS, SINO RECOMENDAMOS PROGRAMAS Y SERVICIOS

- QUIEN ES ELIGIBLE PARA SERVICIOS DURANTE EL VERANO ??

LEY:

- NYSED Parte 200 - El comité debe determinar si un estudiante requiere servicios de educación especial durante el año escolar extendido, a fin de evitar la regresión sustancial.
  - Regresión sustancial estaría indicada por la incapacidad del estudiante para mantener los niveles de desarrollo
    - debido a una pérdida de habilidad, un conjunto de competencias o conocimientos de habilidades
    - durante los meses de julio y agosto.


Pregunta:
DEBO PARTICIPAR EN SCHOOL CHOICE INDICANDO MIS ESCUELAS PREFERIDAS PARA UN A SIENTO EN KINDER?
RESPUESTA: SI!!
Distribucion del IEP
Sugerencias para ayuda con la transicion a Kindergarten

APPENDIX E

Day of the CPSE-to-CSE Transition meeting

On the day of the meeting, the following will occur:

1. Introductions – all parties in the meeting will introduce themselves and state their roles.
2. The chairperson will review the demographics (i.e., address, active telephone numbers).
3. The age of the student will be noted, and if required, corrected.
4. An updated physical exam as required by IDEA) will be reviewed.
5. The chairperson will discuss the social history of the student and family and request any other new information. The social history will entail birth history, family dynamics and developmental milestones.
6. The psychologist will discuss the findings of the updated psychological that was conducted on the student. The psychological will entail current intellectual measure, academic skills, and an adapted measure completed by the legal guardian.
7. Any supplement reports (i.e., speech, occupational, physical etc.) will be reviewed.
8. The classroom special educator will discuss the students learning style and strengths or concerns within the classroom setting.
9. If the family submits an independent report/evaluation, the chairperson and/or psychologist will discuss the findings.
10. Upon completion of all reports/evaluations, the committee will discuss whether the student meets eligibility classification, and, if so, his or her classification. The classification is defined per IDEA and PL-142. For purposes of this research, parents of students presenting with Autism, Other Health Impaired, and Speech or Language Impaired will participate in the study.
11. After classification, discussion will proceed pertaining to the classroom setting. The settings include general education, integrated/inclusion, self-contained classroom, out-of-district. General education is defined as a setting intended for students who do not require trained specialists. Integrated/inclusion refers to educating children with learning disability and other types of disability (ies). A self-contained setting is one which the students all share similar academic requirements that must be conducted by a teacher who holds special education certification.
12. The committee will discuss support services (speech, occupational etc. if required) and mandates.
13. The committee will discuss transportation (typical bus protocol or small bus).
14. Adaptive physical education (i.e., gym) and testing accommodates will be determined and reviewed.
15. Prior to the ending of the meeting academic/speech/motor/adaptive goals will be designed and written on the individualized educational program (IEP).

At the end of the meeting, the parent/guardian will be asked if he or she understood the discussion. If there is any concern or lack of understanding, the committee will review the recommendations and/or concerns. Throughout the meeting, parents (and others) can ask

questions and clarify the findings indicated on the evaluations/reports. The meeting is approximately one hour in duration.

The goal of the transition meeting is to discuss the student's current intellectual, language, motor, and adaptive function and determine eligibility for possible special education services within the least restrictive setting for the kindergarten school year.

APPENDIX F

Invoice Number: 28836D-1
Sales Order Number: 28836D
Account Number: 4773
Invoice Date: 7/13/2021
PO: PP

Ship To: 4773

Bill To: 4773

SHIP VIA: UPS GROUND
Payment Terms: CREDIT CARD PAYMENT

Item #	Description	Ordered Qty	Shipped Qty	List Price	Unit Price	Extended Price
10266-KT	PSI-4 SHORT FORM KIT	1	1	$192.00	* $115.20	$115.20

* Discount applied to line item Unit Price

Subtotal: Discount:	$192.00
40% OFF PAR PRODUCTS	Applied
Total Price Adjustments:	($76.80)
Subtotal (with Discount):	$115.20
Shipping & Handling:	$11.52
Tax:	
Total:	$126.72
Amount Paid:	($126.72)
Balance Due:	
Carrier:	UPS GROUND
Tracking #:	
Sales Rep:	

Thank you for placing your order with us!

If Balance Due, Please Remit Payment to:

PAR, INC
16204 N. Florida Ave
Lutz, FL 33549

To: ITURRIAGA, CHRISTINE
Subject: Fw: Request: PSI-4, Parent Domain plus Sample items - Cust #4773 in M2K [ePRF] *lturriaga
Attachments: 28830-1-8585578004843696316.pdf

Christine,

Purchase of the forms for use in your study is permission to use them as printed by PAR. There is no license when you purchase and use published materials. Your order confirmation is proof that you purchased the number of forms that you need for your project.

There is no letter that we provide regarding the possible future purchase of materials. You can use this email as verification that the purchase of materials is permission to use them for the data collection. You simply purchase one PSI-4-SF Record Form for each person you wish to assess.

The forms cannot be photocopied, reproduced or use in any other format than printed by PAR.

Best Regards,

Ms. Vicki McFadden

Sr. Permissions Specialist

Psychological Assessment Resources, Inc., 16204 N. Florida Avenue, Lutz, FL 33549, www.parinc.com

Appendix G

Descriptive Statistics: Item responses of Parental Stress for workshop non-attendees (n=90)

	Strongly agree		***Agree***		***Not sure***		***Disagree***		***Strongly disagree***	
	N	%	N	%	N	%	N	%	N	%
I often feel that I cannot handle things for my child well.	2	2.22	23	25.56	15	16.67	28	31.11	22	24.44
I find myself giving up more of my life to help my child with special needs.	9	10.00	20	22.22	5	5.56	30	33.33	26	28.89
I feel trapped by my responsibilities as a parent.	2	2.22	6	6.67	8	8.89	39	43.33	35	38.89
Since having a child I feel that I am almost never able to do things that I like to do.	2	2.22	10	11.11	6	6.67	32	35.56	40	44.44
I am unhappy with the last purchase of clothing I made for myself.	2	2.22	12	13.33	12	13.33	31	34.44	33	36.67
There are quite a few things that bother me about my life.	2	2.22	7	7.78	8	8.89	49	54.44	24	26.67
Having a child has caused more problems than I expected in my relationship with my spouse (male/female friend).	2	2.22	12	13.33	7	7.78	32	35.56	37	41.11
I feel alone and without friends.	0	0.00	8	8.89	7	7.78	38	42.22	37	41.11
When I go to a party, I usually expect not to enjoy myself.	0	0.00	6	6.67	15	16.67	36	40.00	33	36.67
I am not as interested in people like I used to be.	0	0.00	11	12.22	13	14.44	35	38.89	31	34.44
I do not enjoy things like I use to.	0	0.00	11	12.22	11	12.22	36	40.00	32	35.56
My child rarely does things for me that make me feel good.	0	0.00	13	14.44	20	22.22	31	34.44	26	28.89
Most times I feel that my child does like me and does not want to be close to me.	4	4.44	7	7.78	11	12.22	30	33.33	38	42.22
My child smiles at me less than I expected.	2	2.22	9	10.00	14	15.56	32	35.56	33	36.67
When I do things for my child, I get the feeling that my efforts are not appreciated very much.	6	6.67	9	10.00	15	16.67	23	25.56	37	41.11
When playing with my child, he/she does not often giggle or laugh.	7	7.78	18	20.00	11	12.22	17	18.89	37	41.11
My child does not seem to learn as quickly as most children.	11	12.22	19	21.11	13	14.44	25	27.78	22	24.44
My child does not seem to smile as much as most children.	7	7.78	33	36.67	14	15.56	21	23.33	15	16.67
My child is not able to do as much as I expected.	2	2.22	19	21.11	10	11.11	26	28.89	33	36.67
It takes a long time and it is very hard for my child to get used to new things.	8	8.89	21	23.33	9	10.00	39	43.33	13	14.44

Appendix H

Descriptive Statistics: Item responses of Parental Stress for workshop attendees (n=90)

	Strongly agree		***Agree***		***Not sure***		***Disagree***		***Strongly disagree***	
	N	%	N	%	N	%	N	%	N	%
I often feel that I cannot handle things for my child well.	8	8.89	20	22.22	10	11.11	27	30.00	25	27.78
I find myself giving up more of my life to help my child with special needs.	14	15.56	21	23.33	9	10.00	26	28.89	20	22.22
I feel trapped by my responsibilities as a parent.	8	8.89	6	6.67	11	12.22	34	37.78	31	34.44
Since having a child I feel that I am almost never able to do things that I like to do.	7	7.78	12	13.33	8	8.89	34	37.78	29	32.22
I am unhappy with the last purchase of clothing I made for myself.	7	7.78	10	11.11	10	11.11	40	44.44	23	25.56
There are quite a few things that bother me about my life.	6	6.67	3	3.33	12	13.33	41	45.56	28	31.11
Having a child has caused more problems than I expected in my relationship with my spouse (male/female friend).	7	7.78	12	13.33	10	11.11	24	26.67	37	41.11
I feel alone and without friends.	1	1.11	6	6.67	10	11.11	34	37.78	39	43.33
When I go to a party, I usually expect not to enjoy myself.	1	1.11	9	10.00	15	16.67	34	37.78	31	34.44
I am not as interest in people like I used to be.	3	3.33	8	8.89	17	18.89	33	36.67	29	32.22
I do not enjoy things like I use to.	2	2.22	8	8.89	11	12.22	45	50.00	24	26.67
My child rarely does things for me that make me feel good.	4	4.44	13	14.44	18	20.00	32	35.56	23	25.56
Most times I feel that my child does like me and does not want to be close to me.	5	5.56	5	5.56	14	15.56	37	41.11	29	32.22
My child smiles at me less than I expected.	3	3.33	11	12.22	16	17.78	25	27.78	35	38.89
When I do things for my child, I get the feeling that my efforts are not appreciated very much.	3	3.33	12	13.33	11	12.22	33	36.67	31	34.44
When playing with my child, he/she does not often giggle or laugh.	9	10.00	13	14.44	13	14.44	18	20.00	37	41.11
My child does not seem to learn as quickly as most children.	20	22.22	15	16.67	14	15.56	22	24.44	19	21.11
My child does not seem to smile as much as most children.	18	20.00	28	31.11	16	17.78	15	16.67	13	14.44
My child is not able to do as much as I expected.	7	7.78	19	21.11	15	16.67	26	28.89	23	25.56
It takes a long time and it is very hard for my child to get used to new things.	12	13.33	21	23.33	17	18.89	24	26.67	16	17.78

Appendix I

Descriptive Statistics: Constructs of PD and PCDI by workshop attendance

Construct	***Workshop attendance***	***M***	***SD***	SE_M	**Median**	**Min**	**Max**	**Skewness**	**Kurtosis**
PD	Workshop non-attendee	2.073	0.704	0.074	2.000	1.000	4.450	0.972	1.309
	Workshop attendee	2.231	0.872	0.092	2.000	1.000	4.820	0.974	0.638
PCDI	Workshop non-attendee	2.370	0.824	0.087	2.389	1.000	4.677	0.244	-0.319