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The Center to Inform *Personnel Preparation Policy and Practice* In Early Intervention & Preschool Education



Data Report

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Study IX Data Report: Section 619 - Parent Perceptions of Competence and Confidence of Practitioners Working with Children with Disabilities

The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Early Childhood Special Education (referred to hereafter as the Center) was established in January, 2003 as a five-year project funded by the Office of Special Education Programs. The purpose of this Center is to collect, synthesize and analyze information related to: (a) certification and licensure requirements for personnel working with infants, toddlers, and preschoolers who have special needs and their families, (b) the quality of training programs that prepare these professionals, and (c) the supply and demand of professionals representing all disciplines who provide both ECSE and EI services. Information gathered will be utilized to identify critical gaps in current knowledge and design and conduct a program of research at the national, state, institutional and direct provider level to address these gaps. This program of research and policy formulation will yield information vital to developing policies and practices at all levels of government, including institutions of higher education.

Purpose of the Report

To maximize the benefits of early intervention and early childhood special education, it is essential that personnel have professional ethics, a specialized knowledge of child development, and the ability to collaborate successfully with families (Caulfield, 1997). Although the need for qualified and trained personnel is well established, nationwide certification or standards to ensure appropriate qualifications are virtually nonexistent. The lack of public policy to address this issue has lead to varied training and qualifications, influencing the level of competence and confidence of personnel providing services to families and children ages birth to five years.

The Center to Guide Personnel Preparation Policy and Practice in Early Intervention and Preschool Education is funded by the Office of Special Education Programs and was established in January 2003 as a five-year project. One of the initiatives of the Center is to conduct research on the level of confidence and competence of personnel working with young children with special needs and their families.

METHODOLOGY

Participants

Parents who have a child with a disability receiving Section 619 services (3 to 5 years of age) were the target population for this study. Participants were recruited nationally between January and August, 2008. To recruit the sample, emails were sent to Interagency Coordinating Councils (ICC's) in all states and territories asking them to electronically mail a recruitment flyer to parents who may be willing to participate in the study (see Appendix A for recruitment flyer). In addition, targeted recruitment efforts were made to three large parent groups; PACER Center, Parent to Parent USA, and Family Voices, Inc. Participants were further recruited through all OSEP regional, state, and community-based parent centers. Administrators were asked to send out the recruitment flyer via their listserv. All directors and administrators who forwarded on the link to the survey were asked to provide the research team with the number of parents who were asked to participate. The recruitment flyer or introductory email was sent to approximately 27,000 potential participants.

Those who chose to participate in the study were directed to follow the web link to SurveyMonkey. com where they could fill out the questionnaire. Participants were also given the opportunity to request a paper version of the survey from project staff if they preferred, though no respondents did. A total of 607 surveys were started on Survey Monkey for both Part C and Section 619 respondents, however 331 cases were excluded from the analysis because none of the questions were answered. One respondent indicated that their child was eight years of age and since the age range for Section 619 services is between three and five, the case was deleted from the dataset.

A total of 201 parents whose children were receiving Section 619 services from 30 states and territories participated in this study. Twenty-three states and Territories were not represented. The majority of responses came from Pennsylvania (19%), Florida (17%), and Oregon (8%) (see Appendix B for state and territory specific participant information).

All items in the current survey were to be answered by the child's parent. A "parent" for this study, is defined as any person who is the primary caregiver for the child. For those who chose to indicate their relationship to the child (n=150), eighty-nine percent of respondents indicated they were the child's mother, five percent indicated they were his or her father, and three percent indicated that they were the child's grandmother or foster mother, respectively. One participant indicated they were the child's legal guardian. The range of ages for parents was extremely widespread. Respondents reported ages between one and 52. The researchers felt that any age reported to be less than 16 was most likely a glitch in Survey Monkey or misunderstood by respondents and was not included in the analysis of mean age. For valid responses (n=102), the mean age was 23 (sd=5.53).

Instrumentation

The Parent Perceptions of the Confidence and Competence of Service Providers Survey was developed by the Center (see Appendix C for full survey). It consists of 59 questions, 19 of which were designed to collect demographic and background information regarding participants and their child who is receiving special education services. Some examples of these questions are; "Is your child a boy or a girl," "How old is your child," "What is your ethnicity," and "What are the reasons your child is participating in special education services."

The remaining 40 questions were designed to assess parent perceptions of the competency and confidence, as well as, overall satisfaction of their child's Section 619 service providers. Twentyeight of them were variations of the Carl Dunst Competence and Confidence Survey items from Study VII; Competence and Confidence of Practitioners Working with Children with Disabilities (2007). The items are meant to gather information in the following seven areas: family-centered practices, assessment and evaluation, IEP practices, instructional practices, natural learning environment, collaboration and teaming, and early literacy learning.

For each domain listed above, two questions pertained to competence and two questions pertained to confidence. Questions were randomized throughout the survey and not grouped together by domain. Response options for all questions in the competence and confidence domains were: never, rarely, some of the time, more often than not, most times, almost always, always, and I do not know/cannot tell.

Internal consistency for this set of items was measured by Cronbach's alpha. The index of reliability for the confidence and competence was .98, well above the value of .70 often cited to support claims of internal reliability.

An exploratory factor analysis using a principal component extraction method and a varimax rotation was conducted on all 28 items. The Kaiser-Meyer-Olkin measure of sampling adequacy was .96, indicating that the present data were suitable for principal components analysis. Similarly, Bartlett's test of sphericity was significant (p < .01), indicating sufficient correlation between the variables to proceed with the analysis. Using the Kaiser-Guttman retention criterion of eigenvalues greater than 1.0, a three-factor solution provided the clearest extraction. These three factors accounted for 74% of the total variance. Appendix D presents the 28 items and their factor loadings. Factor 1: Interpersonal Skills (eigenvalue = 18.28) accounted for 65% of the variance and had 15 items; Factor 2: Content Knowledge (eigenvalue = 1.32) accounted for 5% of the variance and had 8 items; and Factor 3: IEP Familiarity (eigenvalue = 1.30) accounted for 5% of the variance and had 5 items.

The final set of 12 questions in the current survey came from the Multidimensional Assessment of Parental Satisfaction for Children with Special Needs (MAPS) (Ireys, H. & Perry, J., 1999.) This measure gathered parent perceptions of their child's service providers in five core areas; developmentally appropriate care, family-centered care, coordinated care, technical competence, and interpersonal competence (see Appendix E). Internal consistency was measured by the standard alpha coefficient. The index of reliability for the MAPS questionnaire was .87, indicating satisfactory reliability. Pearson correlation coefficients were preformed to measure concurrent

validity. Correlations in the .80s with general satisfaction items indicated strong concurrent validity (Ireys, H. & Perry, J., 1999).

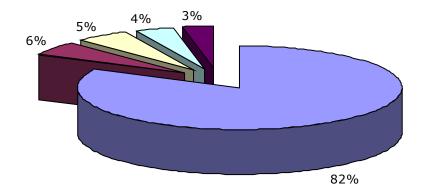
RESULTS

Demographics

For parents who provided information regarding their child's gender (n=198), about two-thirds were boys (68%) and one-third were girls (32%). For those who reported their marital status (n=150), most were married (84%). The remaining responses included divorced/separated (7%), in a co-parenting relationship (6%), never married (3%), and widowed/spouse passed away (0.7%).

Participants were asked to report their race/ethnicity and were allowed to enter more than one response. As Figure 1 displays, most participants were White. Other race/ethnicities that were reported, which are not specified in the pie graph and that accounted for less than five percent of the participants included, East/West Indian, Filipino, Lebanese, Pacific Islander, and not specified.

Figure 1. Participants race/ethnicity (n=152)



■White ■Black/African American □Latino/Hispanic □Other ■Asian

Information was also gathered on respondent's current employment status, spouse's employment status, respondent's highest educational attainment, and combined household income. For those who indicated their current employment status (n=150) and their spouse's current employment status (n=148), forty-seven percent of respondents indicated they did not work. However, as seen in Figure 2, respondents indicated that 83% of their spouses worked full-time.

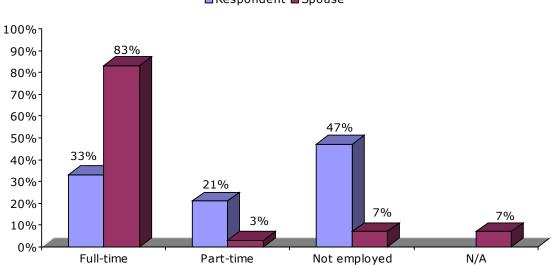
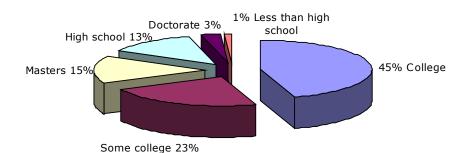


Figure 2. Respondent's (n=150) and spouse's (n=148) current employment status

For those participants who chose to answer the questions about their educational attainment (n=150) and combined household income (n=137), the responses were quite varied. As seen in Figure 3, more than half of the respondents indicated they had a college degree or higher (63%). Thirty-seven percent had some college or less. For combined household income, most families reported earnings of \$50,000-\$59,999, annually. See Figure 4 for full range of family incomes.

Figure 3. Respondent's highest educational attainment (n=150)



■Respondent ■Spouse

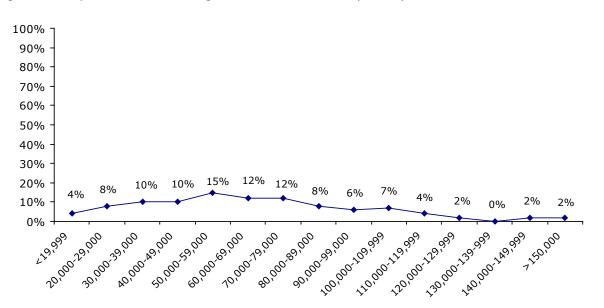


Figure 4. Respondent's combined gross household income (n=137)

The researchers were also interested in where the child was receiving services and how involved the parents were with the interventions their child received. For those who indicated where their child received services (n= 172), most denoted that they received services in a community, clinic or school setting only (66%). Other responses included, at home only (4%), at home *and* in a community setting (7%), at home *and* in a clinic setting (7%), in a community *and* clinic setting (13%), and at day care only (1%).

For those who reported how they were involved with the services their child received (n=154), over 60% of respondents indicated that they are not present while their child is receiving services. Twenty-two percent reported that their child's service provider explains what they are doing with the child, 10% indicated that their child's teacher or therapist either showed them how to do the interventions or helped them learn how to do the interventions without their help. Eight percent of respondents indicated that they watch the provider work with their child.

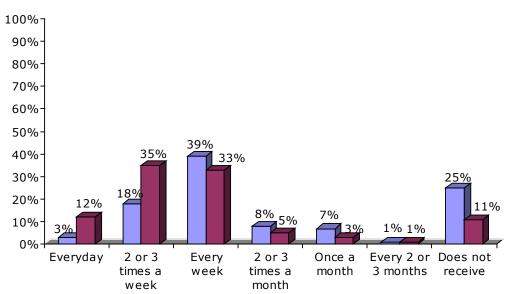
The researchers were further interested in the reasons why a child was receiving special education services and how often that child received specific services. For those who chose to indicate why their child was receiving services, responses mostly consisted of "my child has a known disability" (30%) and "my child is delayed in his/her development" (28%). Other responses included "my child has a special medical problem" (11%), "my child was born pre-mature or at a low birth weight" (6%), "my child is delayed in one area (e.g., language or motor)" (9%), "my child may have problems without special education services" (12%), and "my child has or is at risk for Autism Spectrum Disorder" (3%). The last category was added by the researchers after the data had been collected because 17 individuals reported this in an "other" category. Although these cases may have fit into the "my child has a known disability" group, the researchers felt that since so many respondents answered this way, it was important to make a new category.

Parents were given the option to report how often their child received specific services. Potential responses included; everyday, two or three times a week, every week, two or three times a

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month, about once a month, every two to three months, and does not receive. When asked how often their child received special education/instruction (n=172), most parents reported either everyday (51%) or two or three times a week (21%). When asked how often their child received occupational therapy (n=184), most respondents indicated every week (39%) or not at all (25%). Eighteen percent of respondents said their child received occupational therapy two or three times a week. A few services that most respondents indicated their child does not receive are, nursing care (95%), nutritional therapy (95%), and social and emotional therapy (83%). Several services that parents indicated their child receives but consisted of less than 3% of the sample include, vision therapy, applied behavior analysis, hippotherapy, assistive technology, and para-education. Frequencies varied from everyday to two or three times a month. There were two services in which frequency responses were quite varied; physical therapy and speech/language therapy. See Figure 5 for percentages of responses.

Figure 5. Percentage of responses for frequency of physical therapy (n=174) and speech and language therapy (n=187)



Physical Therapy Speech/Language Therapy

Parents were asked how much choice or control they had in terms of the ways special education services were provided to their child. For those who chose to answer the question about who works with their child (n=149), sixty-one percent indicated that they had very little or no choice and control. Of the parents that responded to their level of choice and control over how often their child received services (n=149), sixty-seven percent indicated they had little or no choice and control. See Table 1 for percentages of responses by question.

	None	Very little	Some	Quite a bit	Absolute
Who works with your child (n=149)	31%	30%	20%	9%	11%
Where services are provided (n=148)	31%	26%	24%	7%	12%
How providers work with your child (n=149)	19%	35%	20%	17%	9%
When services are provided (n=148)	27%	29%	25%	12%	7%
How you are involved in your child's services (n=148)	10%	25%	26%	18%	20%
What your child gets to do as part of services (n=147)	27%	28%	28%	8%	10%
How often your child receives services (n=149)	23%	44%	15%	9%	9%

Table 1. Parent's Perceived Choice and Control Over Child's Special Educational Services

Finally, the researchers were interested in the background of the child's primary teacher or therapist. This person was whom the competence and confidence items in the current survey would pertain to. For those who chose to indicate who their child's primary teacher or therapist was (n=158), two-thirds reported a special instruction teacher. The remaining responses were quite varied (see Figure 6). Some professions accounted for less than four percent of the sample and were not identified. They included a skills trainer, a teacher support specialist, a psychologist, and an interdisciplinary team.

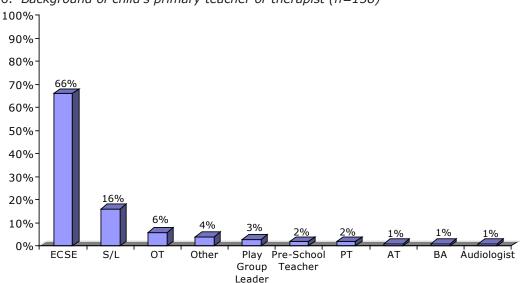


Figure 6. Background of child's primary teacher or therapist (n=158)

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Confidence & Competence Domains

Family Centered Practice. To assess parent perceptions of their child's service provider's competence in family-centered practice, respondents were asked if the teacher or therapist is good at helping them learn how to get the resources and supports their family needs. For participants that responded (n=154), the majority answered never (20%), followed by almost always (15%), and always (15%). Additional responses included I do not know/cannot tell (14%), rarely (13%), most times (11%), more often than not (8%), and some of the time (5%). Participants were also asked if the teacher or therapist knows their family's strengths and how to help them accomplish what is important to them. For participants that responded (n=155), the most frequent responses were always (19%), almost always (17%), and rarely (14%). In addition, participants responded most times (12%), never (12%), I do not know/cannot tell (12%), some of the time (7%), and more often than not (7%).

To assess parent perceptions of their child's teacher's or therapist's confidence in family-centered practice, respondents were asked if it were easy for the teacher or therapist to get them to share ideas about what is important to them. The participants that responded (n=156) most frequently answered always (29%), followed by almost always (16%), and some of the time (12%). Additional responses included rarely (10%), more often than not (9%), most times (9%), never (9%), and I do not know/cannot tell (6%). Participants were also asked if the ways in which the teacher or therapist works with their family makes them feel more capable of helping their children learn. For participants that responded (n=153), the most frequent answers were always (26%), almost always (20%), and most times (11%). In addition, participants responded never (10%), some of the time (9%), I do not know/cannot tell (9%), rarely (8%), and more often than not (8%). See Table 2 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in family-centered practice. High satisfaction was determined by respondents indicating always or almost always.

Table 2.	Participants	Answering	Always or	Almost A	Always to	Family-Centered	1 Practice

Competence

	The teacher of therapist is especially good at helping me learn how to get the resources and supports my family needs $(n=154)$	30%
	The teacher or therapist knows my family's strengths and how to help me use those strengths to accomplish what is important to me (n=155)	36%
Confi	ïdence	
	Getting me to share ideas about what is important to me seems easy for the teacher or therapist (n=156)	45%
	The ways in which the teacher or therapist works with my family makes me eel more capable of helping my child learn $(n=153)$	46%

Assessment and Evaluation. Participants were asked if their child's teacher or therapist is able to accurately identify their child's strengths and needs. For parents that responded (n=154), the majority answered always (28%), followed by almost always (23%), and some of the time (16%). Additional responses included most times (11%), more often than not (10%), never (5%), I do not know/cannot tell (4%), and rarely (3%). Participants were also asked if the teacher or therapist is good at identifying their family's priorities and concerns. For those who responded (n=155), the most frequent responses were always (22%), almost always (20%), and most times (16%). In addition, participants responded rarely (12%), more often than not (9%), some of the time (9%), never (7%), and I do not know/cannot tell (6%).

To assess parent perceptions of their child's teacher's or therapist's confidence of assessment and evaluation, participants were asked how often they are impressed with the fact that the teacher or therapist recognizes my child's strengths and interests. The parents that responded (n=155) answered always (35%), followed by almost always (19%), and some of the time (12%). Other responses included most times (11%), rarely (7%), never (6%), I do not know/cannot tell (5%), and more often than not (5%). Participants were also asked if the teacher's or therapist's judgments of their child's capabilities seem to be right on target. For participants that responded (n=154), the most frequent answers were always (27%), almost always (20%), and most times (16%). In addition, participants responded some of the time (16%), more often than not (8%), rarely (7%), never (4%), and I do not know/cannot tell (3%). See Table 3 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in assessment and evaluation. High satisfaction was determined by respondents indicating always or almost always.

Table 3. Participants Answering Always or Almost Always to Assessment and Evaluation

Competence

The teacher or therapist is able to accurately identify my child's strengths and needs $(n=154)$	51%
The teacher or therapist is good at identifying my family's priorities and concerns $(n=155)$	42%
Confidence	
I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests ($n=155$)	54%
The teacher or therapists judgments of my child's capabilities seem to be right on target (n=154)	47%

Individualized Education Plan. To assess parent perceptions of service provider's competence with Individualized Education Plans (IEPs) participants were asked how often the outcomes the teacher or therapist puts on their child's IEP are typically achieved in about six months. For participants that responded (n=154), the majority answered I do not now/cannot tell (20%), followed by almost always (18%), and more often than not (16%). Additional responses included always (14%), most times (12%), more often than not (7%), rarely (7%), and never (7%).

Participants were also asked if the teacher or therapist takes the time to find out what outcomes the parent wants on their child's IEP. For participants that responded (n=155), the majority answered always (21%), followed by almost always (19%), and I do not know/cannot tell (14%). In addition, participants responded some of the time (11%), more often than not (10%), never (9%), most times (8%), and rarely (7%).

To assess parent perceptions of teacher's or therapist's confidence with IEPs, participants were asked if writing IEP outcomes for their child comes naturally to the teacher or therapist. Parents (n=154) most frequently answered always (30%), followed by I do not know/cannot tell (18%), and almost always (14%). Additional responses included most times (12%), more often than not (10%), rarely (8%), some of the time (6%), and never (3%). Parents were also asked if the teacher or therapist knows which IEP outcomes are important to them. Those who responded (n=153) reported always (31%), followed by almost always (20%), and I do not know/cannot tell (12%). Additionally, respondents answered most times (11%), some of the time (10%), more often than not (9%), rarely (5%), and never (3%). See Table 4 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in Individualized Education Plans. High satisfaction was determined by respondents indicating always or almost always.

Table 4. Participants Answering Always or Almost Always to Individualized Education Plan

Competence

	The outcomes that the teacher or therapist puts on my child's IEP are typically achieved in about 6 months $(n=154)$	32%
	The teacher or therapist takes the time to find out what outcomes I want on my child's IEP ($n=155$)	40%
Со	nfidence	
	Writing IEP outcomes for my child comes naturally to the teacher or therapist $(n=154)$	84%
	The teacher or therapist knows which IEP outcomes are important to me $(n=153)$	51%

Instructional Practices. To assess parent perceptions of their child's service provider's competence in instructional practices, participants were asked if the teacher or therapist has taught them why it is important to respond positively to their child's newly learned behavior. For those who responded (n=154), the majority answered always (26%), followed by never (18%), and almost always (12%). Other responses included I do not know/cannot tell (11%), most times (9%), more often than not (8%), some of the time (8%), and rarely (8%). Parents were also asked if the activities the teacher or therapist shows them have increased their child's interactions with people and objects. For those who responded (n=156), the most frequent responses included always (24%), almost always (16%), and most times (12%). Other responses included more often than not (10%), rarely (10%), I do not know/cannot tell (10%), some of the time (9%), and never (8%).

To assess parent perceptions of their child's service provider's confidence in instructional practices, parents were asked if showing them how to teach their child new things comes easily to the teacher or therapist. Parents (n=155) reported always (27%), most times (21%) and almost always (12%). They also reported rarely (12%), followed by some of the time (8%), never (8%), I do not know/cannot tell (8%), and more often than not (5%). Participants were also asked if the teacher or therapist seems pleased to see their child become more capable and independent. For those who responded (n=156), the majority answered always (53%), almost always (17%), and most times (14%). In addition, 6% indicated more often than not, 5% reported some of the time, 3% said I do not know/cannot tell, and 2% indicated rarely. See Table 5 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in instructional practices. High satisfaction was determined by respondents indicating always or almost always.

Table 5. Participants Answering Always or Almost Always to Instructional Practices

Competence

	The teacher or therapist has taught me why it is important to respond positively to my child's newly learned behavior $(n=154)$	38%
	The activities the teacher or therapist shows me have increased my child's interactions with people and objects $(n=156)$	40%
Coi	nfidence	
	Showing me how to teach my child new things comes easily to the teacher or therapist $(n=155)$	39%
	The teacher or therapist seems pleased to see my child become more capable and independent $(n=156)$	70%

Natural Learning Environments. To assess parent perceptions of their child's service provider's competence in natural learning environments, parents were asked if the teacher or therapist has helped them to use everyday home and community activities to provide their child learning opportunities. For those who responded (n=156), the majority answered always (19%), most times (16%), and almost always (15%). Other responses included rarely (13%), never (13%), I do not know/cannot tell (9%), more often than not (8%), and some of the time (8%). Participants were also asked if the teacher or therapist has taught the importance of using their child's interests to help him or her learn. For those who responded (n=155), most indicated always (28%), almost always (16%), and never (13%). Additional responses included rarely (10%), most times (9%), some of the time (8%), I do not know/cannot tell (8%), and more often than not (7%).

To assess parent perceptions of their child's service provider's confidence in natural learning environments, participants were asked if the teacher or therapist takes pride in the successes they have providing their child informal, everyday learning opportunities. Parents (n=155) answered always (42%), almost always (16%), and most times (9%). Eight percent said more often than not, 7% indicated some of the time, rarely and I do not know/cannot tell, and 5% reported never. Participants were also asked if the teacher or therapist seems at ease suggesting which

informal learning opportunities are good for their child. For those who responded (n=155), the most frequent answers were always (27%), almost always (18%), never (12%), and I do not know/cannot tell (12%). Other responses included most times (8%), more often than not (8%), rarely (8%), and some of the time (7%). See Table 6 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in natural learning environments. High satisfaction was determined by respondents indicating always or almost always.

Table 6.	Participants	Answerina	Alwavs or	- Almost	Alwavs to	Natural	Learning	Environments

Competence

The teacher or therapist has helped me to use everyday home and commun activities to provide my child learning opportunities $(n=156)$	ity 34%
The teacher or therapist has taught me the importance of using my child's interests to help him or her learn ($n=155$)	44%
Confidence	
The teacher or therapist takes pride in the successes we have providing my informal, everyday learning opportunities $(n=155)$	child 58%
The teacher or therapist seems at ease suggesting which informal learning opportunities are good for my child $(n=155)$	45%

Collaboration and Teaming. To assess parent perceptions of their child's service provider's competence in collaboration and teaming, participants were asked if the teacher or therapist does a good job of explaining what other professionals think their child needs. For those who responded (n=154), most answered always (20%), almost always (19%), and never (13%). Twelve percent indicated most times and I do not know/cannot tell, 9% said rarely, 8% reported some of the time, and 7% indicated more often than not. Parents were also asked if the teacher or therapist works well with other professionals to be sure their child gets the right kinds of interventions. Participants (n=153) most often reported always (30%), almost always (21%), and some of the time (15%). Other responses included most times (11%), I do not know/cannot tell (8%), more often than not (6%), rarely (5%), and never (5%).

In order to assess parent's perceived perceptions of their child's service provider's confidence in collaboration and teaming, respondents were asked if the teacher or therapist seems pretty capable of explaining their child's needs to other professionals. For parents who responded (n=156), most answered always (25%), followed by almost always (23%), and I do not know/ cannot tell (14%). In addition, responses included, most times (9%), more often than not (8%), never (8%), some of the time (7%), and rarely (6%). Participants were also asked if involving them in the development of their child's IEP comes easily to the teacher or therapist. Respondents (n=156) most frequently indicated always (33%), almost always (16%), and most times (16%). Other responses were some of the time (10%), I do not know/cannot tell (9%), more often than not (7%), rarely (6%), and never (4%). See Table 7 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in collaboration and teaming. High satisfaction was determined by respondents indicating always or almost always.

Table 7. Participants Answering Always or Almost Always to Collaboration and Teaming	
Competence	
The teacher or therapist does a good job of explaining what other professionals think my child needs $(n=154)$	39%
The teacher or therapist works well with other professionals to be sure my child gets the right kinds of interventions $(n=153)$	51%
Confidence	
The teacher or therapist seems pretty capable of explaining my child's needs to other professionals ($n=156$)	48%
Involving me in the development of my child's IEP comes easily to the teacher or therapist ($n=156$)	49%

Early Language Learning. To assess parent perceptions of their child's service provider's competence in early language learning, participants were asked if the pre-reading and pre-writing activities that the teacher or therapist suggests they do make sense for their child. For participants that responded (n=154), the most frequent answer was always (22%), followed by I do not know/cannot tell (20%), and almost always (17%). In addition, respondents indicated most of the time (15%), more often than not (10%), never (8%), rarely (5%), and some of the time (4%). Parents were also asked if the teacher or therapist talks to them about the importance of pre-reading and pre-writing activities for their child. For those who answered the question (n=156), twenty-five percent indicated always, 22% reported never, and 15% said almost always. Other responses included I do not know/cannot tell (10%), most of the time (8%), some of the time (8%), rarely (7%), and more often than not (6%).

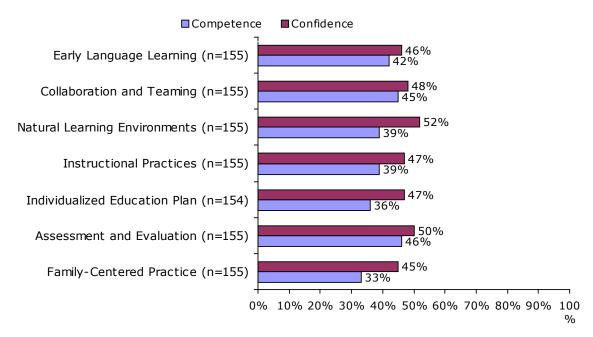
In order to assess parent perceptions of their child's service provider's confidence in early language learning, parents were asked if they were impressed by how much the teacher or therapist knows about pre-reading and prewriting activities for young children. The most frequent responses for those who answered (n=155) were always (25%), I do not know/cannot tell (17%), and almost always (14%). Twelve percent indicated never, 10% said most of the time, 8% reported more often than not, 8% indicated some of the time, and 5% reported rarely. Parents were also asked if they were impressed with the fact that the teacher or therapist recognizes their child's strengths and interests. For those who responded (n=155), they most frequently answered always (35%), followed by almost always (19%), and some of the time (12%). In addition, participants responded most of the time (11%), rarely (7%), never (6%), more often than not (5%), and I do not know/cannot tell (5%). See Table 8 for percentages of participants who judged their child's teacher or therapist to be highly satisfactory in early language learning. High satisfaction was determined by respondents indicating always or almost always.

Table 8. Participants Answering Always or Almost Always to Early Language Learn	ning
Competence	
The pre-reading and prewriting activities that the teacher or therapist sugges do make sense for my child $(n=154)$	sts I 39%
The teacher or therapist talks to me about the importance of pre-reading and prewriting activities for my child $(n=156)$	d 40%
Confidence	
I am impressed with how much the teacher or therapist knows about pre- reading and prewriting activities for young children ($n=155$)	39%
I am impressed with the fact that the teacher or therapist recognizes my chi strengths and interests $(n=155)$	ld's 54%

Confidence and Competence Summary

An overall parent perception of service provider's confidence and competence was determined by percentage of respondents who reported always or almost always to the two items assessing confidence and competence for each of the seven domains. (see Figure7). Respondents judged their child's teacher or therapist to be most *confident* in natural learning environments (52%) and least confident in family-centered practice (45%). Respondents indicated that their child's teacher or therapist was most *competent* in assessment and evaluation (50%), and least competent in family-centered practice (33%).

Figure 7. Overall Parent Perceived Confidence and Competence of Service Providers



Competence and Confidence Results by Item

Each table below reflects participants' percentage responses to the two statements pertaining to competence and the two related to confidence for each of the seven domains described above.

Table 9.	Participants' Responses Relative to Their Perceived Competence and Confidence of Service Providers to Engender Family-	
	Centered Practices	

					Resp	onses			
Confidence or Competence Item	Survey Item	Do not know/ cannot tell	Never	Rarely	Some times	More often than not	Most times	Almost always	Always
Competence	The teacher or therapist is especially good at helping me learn how to get the resources and supports my family needs (n= 154)	14%	20%	13%	5%	8%	11%	15%	15%
Competence	The teacher or therapist knows my family's strengths and how to help me use those strengths to accomplish what is important to me (n=155)	12%	12%	14%	7%	7%	12%	17%	19%
Confidence	Getting me to share ideas about what is important to me seems easy for the teacher or therapist (n=156)	6%	9%	10%	12%	9%	9%	16%	29%
Confidence	The ways in which the teacher or therapist works with my family makes me feel more capable of helping my child learn (n=153)	9%	10%	8%	9%	8%	11%	20%	26%

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 Table 10. Participants' Responses Relative to Their Perceived Competence and Confidence of Service Providers in Assessment and

 Evaluation

					Resp	onses			
Confidence or		Do not know/				More			
Competence		cannot			Some	often	Most	Almost	
Item	Survey Item	tell	Never	Rarely	times	than not	times	always	Always
Competence	The teacher or therapist is able to accurately identify my child's strengths and needs (n=154)	4%	5%	3%	16%	10%	11%	23%	28%
Competence	The teacher or therapist is good at identifying my family's priorities and concerns (n=155)	6%	7%	12%	9%	9%	16%	20%	22%
Confidence	I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests (n=155)	5%	6%	7%	12%	5%	11%	19%	35%
Confidence	The teacher's or therapist's judgments of my child's capabilities seem to be right on target (n=154)	3%	4%	7%	16%	8%	16%	20%	27%

Table 11.	Participants' Responses Relative to Their Perceived Competence and Confidence of Service Providers in Using Individualized
	Education Plans (IEPs)

					Res	ponses			
Confidence or Competence Item	Survey Item	Do not know/ cannot tell	Never	Rarely	Some times	More often than not	Most times	Almost always	Always
Competence	The outcomes that the teacher or therapist puts on my child's IEP are typically achieved in about 6 months (n=154)	20%	7%	7%	16%	7%	12%	18%	14%
Competence	The teacher or therapist takes time to find out what outcomes I want on my child's IEP (n=155)	14%	9%	7%	11%	10%	8%	19%	21%
Confidence	Writing IEP outcomes for my child comes naturally to the teacher or therapist (n=154)	18%	3%	8%	6%	10%	12%	14%	30%
Confidence	The teacher or therapist knows which IEP outcomes are important to me (n=153)	12%	3%	5%	10%	9%	11%	20%	31%

	· · ·	-							
					Res	ponses			
		Do not							
Confidence or		know/				More			
Competence		cannot			Some	often	Most	Almost	
Item	Survey Item	tell	Never	Rarely	times	than not	times	always	Always
Competence	The teacher or therapist has taught me why it is important to respond positively to my child's newly learned behavior (n=154)	11%	18%	8%	8%	8%	9%	12%	26%
Competence	The activities the teacher or therapist shows me have increased my child's interactions with people and objects (n=156)	10%	8%	10%	9%	10%	12%	16%	24%
Confidence	Showing me how to teach my child new things comes easily to the teacher or therapist (n=155)	8%	8%	12%	8%	5%	21%	12%	27%
Confidence	The teacher or therapist seems pleased to see my child become more capable and independent (n=156)	3%		2%	5%	6%	14%	17%	53%

Table 12. Participants' Responses Relative to Their Perceived Competence and Confidence in Using Instructional Practices

					Res	ponses			
Confidence or Competence		Do not know/ cannot			Some	More often	Most	Almost	
Item	Survey Item	tell	Never	Rarely	times	than not	times	always	Always
Competence	The teacher or therapist has helped me to use everyday home and community activities to provide my child learning opportunities.(n=156)	9%	13%	13%	8%	8%	16%	15%	19%
Competence	The teacher or therapist has taught me the importance of using my child's interests to help him or her learn. (n=155)	8%	13%	10%	8%	7%	9%	16%	28%
Confidence	The teacher or therapist takes pride in the successes we have providing my child informal, everyday learning opportunities. (n=155)	7%	5%	7%	7%	8%	9%	16%	42%
Confidence	The teacher or therapist seems at ease suggesting which informal learning opportunities are good for my child. (n=155)	12%	12%	8%	7%	8%	8%	18%	27%

Table 13. Participants' Responses Relative to Their Perceived Competence and Confidence to Use Natural Learning Environments

					Res	oonses			
Confidence on		Do not			,	Mana			
Confidence or		know/			C	More	Marak	A	
Competence		cannot			Some	often	Most	Almost	
Item	Survey Item	tell	Never	Rarely	times	than not	times	always	Always
Competence	The teacher or therapist does a good job of explaining what other professionals think my child needs (n=154)	12%	13%	9%	8%	7%	12%	19%	20%
Competence	The teacher or therapist works well with other professionals to be sure my child gets the right kinds of interventions ($n=153$)	8%	5%	5%	15%	6%	11%	21%	30%
Confidence	The teacher or therapist seems pretty capable of explaining my child's needs to other professionals (n=156)	14%	8%	6%	7%	8%	9%	23%	25%
Confidence	Involving me in the development of my child's IEP comes easily to the teacher or therapist (n=156)	9%	4%	6%	10%	7%	16%	16%	33%

Table 14. Participants' Responses Relative to Their Perceived Competence and Confidence in Collaboration and Teaming

	· ·		•				-	_	
					Res	ponses			
Confidence or		Do not know/				More			
Competence		cannot			Some	often	Most	Almost	
Item	Survey Item	tell	Never	Rarely	times	than not	times	always	Always
Competence	The pre-reading and prewriting activities that the teacher or therapist suggests I do make sense for my child (n=154)	20%	8%	5%	4%	10%	15%	17%	22%
Competence	The teacher or therapist talks to me about the importance of pre- reading and prewriting activities for my child (n=156)	10%	22%	7%	8%	6%	8%	15%	25%
Confidence	I am impressed by how much the teacher or therapist knows about pre-reading and prewriting activities for young children (n=155)	17%	12%	5%	8%	8%	10%	14%	25%
Confidence	I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests (n=155)	5%	6%	7%	12%	5%	11%	19%	35%

TTable 15. Participants' Responses Relative to Their Perceived Competence and Confidence in Early Literacy and Learning

Parental Satisfaction Domains

In order to assess parental satisfaction of their child's primary service provider, participants responded to 12 close-ended items from the Multidimensional Assessment of Parental Satisfaction Inventory. Each item had a 5-point anchored response scale (excellent, very good, good, fair, and poor). Respondents may have also indicated that the item was not applicable (n/a) to the provider in question.

For those who responded to how well the teacher or therapist managed their child's chronic condition (n=150), the majority of parents indicated excellent (37%), followed by very good (23%), good (18%), fair (17%), poor (5%), and n/a (1%). For those who indicated how well the teacher or therapist provided general health care (n=150), most parents said the question was n/a (37%), followed by excellent (21%), good (15%), very good (13%), fair (9%), and poor (6%).

Parents were asked how well the teacher or therapist helped in coordinating care. For those who responded (n=150), twenty-four percent indicated excellent. Other responses included fair (28%), very good (23%), poor (9%), good (9%), and n/a (8%). Participants were also asked how well the teacher or therapist communicated with other providers. For those who answered (n=149), most indicated excellent (29%), followed by fair (21%), very good (20%), good (17%), poor (9%), and finally n/a (5%).

When asked about the efforts of the teacher or therapist to be flexible. Parents (n=150) most frequently responded excellent (33%), good (22%), and fair (17%). In addition, participants indicated very good (15%), poor (8%), and n/a (5%). Participants were also asked how sensitive the teacher or therapist was to their background and beliefs. For those who responded (n=150), the most common response was excellent (31%), followed by n/a (29%), and good (17%). Additional responses included very good (13%), fair (7%), and poor (3%).

Parents were asked how well the teacher or therapist really listens to their opinions. For those who responded (n=149), the most frequent responses were excellent (27%), n/a (22%), and good (20%). Other responses included very good (13%), fair (12%), and poor (5%). Participants were also asked how well the teacher or therapist could answer questions about their child's condition. For those who responded (n=150), twenty-eight percent indicated excellent, 22% said very good, 19% indicated good, 18% stated fairly, 8% said poorly, and 6% said the question was n/a.

Participants indicated how satisfied they were with the amount of information and guidance their child's teacher or therapist provided. For those who chose to answer the question (n=150), responses were quite varied. Twenty percent felt the teacher or therapist was doing very good or fair. Nineteen percent indicated excellent. Eighteen percent said good and 16% said poorly. Participants were also asked how well the teacher or therapist made referrals to other providers as needed. Parents (n=150) most commonly reported poor (20%), followed by fair and excellent (19%). Other responses included good and very good (15%), and n/a (13%).

The last two questions of the MAPS inventory referred to how well the teacher or therapist put the parent in touch with other parents and how well they understood the impact their child's condition has on their family. For those who chose to answer the first question (n=150), the majority of respondents indicated poor (34%), n/a (21%), and fair (19%). Other responses included very

good (12%), excellent (8%), and good (7%). Parents who answered the final question (n=149) most frequently indicated excellent (22%), good and fair (14%), and very good (13%). Twelve percent reported poor, and 5% indicated n/a.

Parental Satisfaction Summary

Overall parental satisfaction was determined by the percentage of parents who indicated that their child's teacher or therapist did an excellent, very good or good job at providing assistance to the child and family. Table 16 displays this percentage by service provider type. Since most respondents (66%) indicated that a special education teacher was their child's primary service provider and since all other providers comprised of only 34%, these two categories were compared (refer back to Figure 6).

Most respondents indicated similar satisfaction ratings across service provides. However, parents were 11% more satisfied with their child's special education teacher in regards to how well they provided general health care than all other service providers. They also were 13% more satisfied with how well the teacher listened to their opinions. Conversely, participants indicated 15% less satisfaction with the amount of information and guidance the special education teacher gave them to help prevent future problems for their child.

Understanding condition's impact on family

Mean Satisfaction

Special Education	All Other Service
Teacher	Providers
78%	78%
n=99	n=99
79%	68%
n=66	n=28
58%	62%
n=90	n=47
71%	64%
n=94	n=47
75%	73%
n=94	n=48
87%	83%
n=71	n=35
82%	69%
n=77	n=38
71%	75%
n=93	n=47
56%	71%
n=90	n=48
53%	58%
n=87	n=43
36%	30%
n=76	n=41
	78% n=99 79% n=66 58% n=90 71% n=94 75% n=94 87% n=71 82% n=77 71% n=93 56% n=90 53% n=87 36%

58% n=91

67%

n=87

69%

n=48

66%

n=43

Table 16.	Percent of Respondents Judging Provider Efforts to Be "Good,", "Very Good," or
	"Excellent" by Primary Provider Type

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- Ireys, H. & Perry, J. (1999.) Development and evaluation of a satisfaction scale for parents of children with special needs. *Pediatrics, 104, 5,* 1182-1191.

SPSS, Inc. (2007.) SPSS 16.0 for Windows. Chicago, IL: SPSS, Inc.



Attention:

Parents of Children ages birth to 5 years old who are receiving early intervention or early childhood special education services

Participate in an online survey. Participation is easy. Visit the Survey Monkey website by clicking on a link below.

Link to Survey for Children Receiving Birth to Three (Part C) services:

http://www.surveymonkey.com/s.aspx?sm=mW0HP1UBPaSJBbr_2fF3IuXA_3d_3d

The Center to Inform Personnel Preparation Policy and Practice in Early Intervention and Preschool Education at the University of Connecticut is looking for parents to share perceptions of their child's services and providers to help prepare future service providers.

> If you have questions or would like to contact our Research Director, you may do so via email at cmwilson@uchc.edu.

Questions about this study may be directed to the Principal Investigator, Dr. Mary Beth Bruder, at (860) 679-1500. Questions regarding the rights of research subjects should be directed to the IRB representative at (860) 679-8729 or (860) 679-3054. The end date for participation in this study is June 1, 2008.

Appendix B

State/Territory	Frequency	Valid Percent
Alabama	5	3%
Alaska	4	3%
Arizona	1	1%
California	9	6%
Connecticut	3	2%
Florida	25	17%
Georgia	1	1%
Hawaii	2	1%
Illinois	3	2%
Indiana	9	6%
Kentucky	1	1%
Louisiana	1	1%
Maryland	3	2%
Massachusetts	1	1%
Minnesota	4	3%
Missouri	2	1%
New Jersey	1	1%
New York	3	2%
North Carolina	2	1%
North Dakota	1	1%
Ohio	3	2%
Oklahoma	7	5%
Oregon	12	8%
Pennsylvania	29	19%
South Carolina	3	2%
South Dakota	1	1%
Tennessee	3	2%
Texas	8	5%
Virginia	1	1%
Washington	2	1%
Total	30	100%

Number of Participants by State or Territory

Survey

Parent Survey of Children Receiving Early Childhood Special Education Services

This survey includes questions about your child and family's experiences with early childhood special education. Specifically, we are looking for information about your perceptions of your child's services and providers in order to help prepare future providers. The primary teacher or therapist is the person who works most closely and most often with you and your child.

YOUR RESPONSES AND FEEDBACK ARE CONFIDENTIAL AND WILL NOT BE SHARED WITH ANYONE SERVING YOUR CHILD. The information that you provide us will be used to determine how well early childhood special education professionals are doing with children and their parents.

Thank you for taking the time to fill out this survey!

TELL US ABOUT YOUR CHILD WHO IS RECEIVING

EARLY CHILDHOOD SPECIAL EDUCATION SERVICES

- 1. Is your child a girl or boy?
 - 🗆 Girl
 - Boy
- 2. What is your child's date of birth?

Month Day Year

3. How old is your child?

Years Months

4. When did your child start receiving early childhood special education services?

Month Year

5. Please tell us why your child is participating in early childhood special education.

Check all that apply:

- My child has a known or identified disability
- □ My child has a special medical condition or problem
- □ My child was born premature or low birth weight
- □ My child is delayed in his/her development
- □ My child has a delay is only one area (e.g., language or motor)
- □ My child might have problems without intervention
- Other (please describe):_

FREQUENCY OF THE SERVICES THAT YOUR CHILD RECEIVES

A child might receive different kinds of services as part of an early childhood special education program. Please indicate how often your child receives each of the following services or supports.

How often does your child receive each of the following:	Does Not receive	Everyday	Two or Three Times a Week	Every Week	Two or Three times a Month	About Once a Month	Every Two to Three Months
a) Physical therapy	1	2	3	4	5	6	7
b) Occupational therapy	1	2	3	4	5	6	7
c) Speech/language therapy	1	2	3	4	5	6	7
d) Special Education/ Special Instruction	1	2	3	4	5	6	7
e) Nursing care	1	2	3	4	5	6	7
f) Nutritional therapy	1	2	3	4	5	6	7
g) Social and emotional or mental health services/ therapy	1	2	3	4	5	6	7
h) Other (please describe)	1	2	3	4	5	6	7

INFORMATION ABOUT YOUR CHILD'S PRIMARY TEACHER OR THERAPIST

1. Please check the background of your child's primary teacher or therapist. This is about whom you will be completing the rest of the survey.

Please choose only one of the following:

- Physical Therapist
- Speech/Language Therapist
- Special Instruction (teacher)
- Occupational Therapist
- Assistive Technology
- Derived Parent/Child Play Group Leader
- Nutritionist or Nurse
- Audiologist
- □ Other _____ (please describe)
- 2. Where does your child receive services? Check all that apply:
 - My home only
 - □ My home and a community setting
 - □ My home and a program center/clinic
 - □ Community setting only
 - Community setting and program center/clinic
 - Program center/clinic only
 - Other (please describe):_____
- 3. Which of the following responses best describes how you are involved with your child's teacher or therapist?
 - □ When my child receives services I am not present
 - □ I watch the teacher or therapist work with my child
 - □ The teacher or therapist explains what she/he is doing with my child to me
 - □ The teacher or therapist shows me how to do the interventions
 - □ The teacher or therapist helps me learn how to do interventions without his or her help

YOUR CHILD'S PRIMARY TEACHER OR THERAPIST

Please answer the following questions while thinking about how your primary teacher or therapist works with you and your child. Mark the response that best describes your opinions.

		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
1	Involving me in the development of my child's IEP comes easily to the teacher or therapist.	0	1	2	3	4	5	6	7
2	The teacher or therapist seems pleased to see my child become more capable and independent.	0	1	2	3	4	5	6	7
3	The teacher or therapist seems knowledgeable about pre-reading and prewriting activities for infants and toddlers.	0	1	2	3	4	5	6	7
4	Showing me how to teach my child new things comes easily to the teacher or therapist.	0	1	2	3	4	5	6	7
5	The teacher or therapist is good at identifying my family's priorities and concerns.	0	1	2	3	4	5	6	7
		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
6	The activities that the teacher or therapist shows me have increased my child's interactions with people and objects.	0	1	2	3	4	5	6	7

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		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
7	The teacher or therapist has helped me to use everyday home and community activities to provide my child learning opportunities.	0	1	2	3	4	5	6	7
8	Getting me to share ideas about what is important to me seems easy for the teacher or therapist.	0	1	2	3	4	5	6	7
9	The teacher or therapist works well with other professionals to be sure my child gets the right kinds of interventions.	0	1	2	3	4	5	6	7
10	The outcomes that the teacher or therapist puts on my child's IEP are typically achieved in about 6 months.	0	1	2	3	4	5	6	7
		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
11	The teacher or therapist takes pride in the successes we have providing my child learning opportunities in the least restrictive environment.	0	1	2	3	4	5	6	7
12	The teacher or therapist's judgments of my child's capabilities seem to be right on target.	0	1	2	3	4	5	6	7
13	The teacher or therapist is especially good at helping me learn how to get the resources and supports my family needs.	0	1	2	3	4	5	6	7

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		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
14	The reading and writing (or pre-reading and prewriting) activities that the teacher or therapist suggests I do make sense for my child.	0	1	2	3	4	5	6	7
15	The teacher or therapist knows which IEP outcomes are important to me.	0	1	2	3	4	5	6	7
		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
16	The ways in which the teacher or therapist works with my family make me feel more capable of helping my child learn.	0	1	2	3	4	5	6	7
17	The teacher or therapist is able to accurately identify my child's strengths and needs.	0	1	2	3	4	5	6	7
18	The teacher or therapist does a good job of explaining what other professionals think my child needs.	0	1	2	3	4	5	6	7
19	Writing IEP outcomes for my child comes naturally to the teacher or therapist.	0	1	2	3	4	5	6	7
20	I am impressed by how much the teacher or therapist knows about reading and writing (or pre-reading and prewriting) activities for young children.	0	1	2	3	4	5	6	7

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		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
21	The teacher or therapist has taught me why it is important to respond positively to my child's newly learned behavior.	0	1	2	3	4	5	6	7
22	The teacher or therapist knows my family's strengths and how to help me use those strengths to accomplish what is important to me.	0	1	2	3	4	5	6	7
23	The teacher or therapist takes the time to find out what outcomes I want on my child's IEP.	0	1	2	3	4	5	6	7
24	The teacher or therapist seems at ease suggesting which least restrictive environments are good for my child.	0	1	2	3	4	5	6	7
25	I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests.	0	1	2	3	4	5	6	7
		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
26	The teacher or therapist has taught me the importance of using my child's interests to help him or her learn.	0	1	2	3	4	5	6	7
27	The teacher or therapist seems pretty capable of explaining my child's needs to other professionals.	0	1	2	3	4	5	6	7

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		Do Not Know / Cannot Tell	Never	Rarely	Some of the Time	More Often Than Not	Most Times	Almost Always	Always
28	The teacher or therapist talks to me about the importance of reading and writing (or pre-reading and prewriting) activities for my child.	0	1	2	3	4	5	6	7

MUTLIDIMENSIONAL ASSESSEMENT OF PARENT SATISFACTION

- 1 Your teacher or therapist's skill in managing your child's condition is:
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 2 Your teacher or therapist's ability to provide general health care, like the care of your child would need for a cold or flu, is:
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 3 When it comes to helping you coordinate services for your child, your teacher or therapist does a(n) ______ job.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable

- 4 When it comes to communicating with other professionals about your child's care, your teacher or therapist does a(n) ______ job.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 5 Your teacher or therapist's effort to be flexible in the way that he/she works with your family is
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 6 Your teacher or therapist's sensitivity to your family's cultural background and your beliefs is
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 7 When it comes to really listening to your opinions about your health care, your teacher or therapist does a(n) ______ job.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable

- 8 Your teacher or therapist's ability to answer your questions regarding your child's condition is
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 9 The amount of information and guidance the teacher or therapist gives you to help prevent future problems for your child is ______.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 10 When it comes to referring you to other teacher or therapists or services your child needs, your teacher or therapist does a(n) ______ job.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable
- 11 Your teacher or therapist's effort to put you in touch with other parents who have similar concerns is
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable

- 12 When it comes to understanding how your child's condition affects your family, your teacher or therapist has a(n) ______ understanding.
 - A. poor
 - B. fair
 - C. good
 - D. very good
 - E. excellent
 - F. not applicable

PARENT CHOICE

How much choice or control do you have in terms of the ways early childhood special education services are provided to your child and family?

Type of choice/control	No Choice and Control	Very Little Choice and Control	Some Choice and Control	Quite a Bit of Choice and Control	Absolute Choice and Control
a) Who works with your child	1	2	3	4	5
b) Where services are provided	1	2	3	4	5
c) How providers work with your child	1	2	3	4	5
d) When services are provided	1	2	3	4	5
e) How you are involved in your child's services	1	2	3	4	5
f) What your child gets to do as part of services	1	2	3	4	5
g) How often your child receives services	1	2	3	4	5

PARENT/FAMILY BACKGROUND INFORMATION

- 1. What is your relationship to the child?
 - □ Mother □ Father
 - □ Stepmother □ Stepfather □ Grandmother □ Grandfather
 - □ Foster mother □ Foster father □ Aunt □ Uncle
 - Other (please describe) _____
- 2. What is YOUR age in years? _____

- 3. What is YOUR race/ethnicity? (You may check all that apply)
 - White
 - Latino/Hispanic
 - Black or African American
 - Asian
 - Other:
- What is your current marital status? 4.
 - married
 - never married
 - co-parenting relationship
 - □ divorced/separated
 - widowed/spouse passed away
- 5. Are you currently employed?
 - Yes, full-time
 - Yes, part-time
 - No
- Is your spouse/partner currently employed? 6.
 - Yes, full-time
 - Yes, part-time
 - No
 - N/A
- 7. What is your highest educational attainment?
 - Less than high school
 - High school
 - Some college
 - College
 - Master's
 - Doctorate/Ph.D./Ed.D./M.D./J.D.
- 8. In 2006, what was your approximate combined gross household income in U.S. dollars?
- Less than \$19,999

- \$60,000-\$69,999
- \$70,000-\$79,999
- \$30,000-\$39,999

\$20,000-\$29,999

- \$80,000-\$89,999
- \$40,000-\$49,999
- \$90,000-\$99,999
- \$50,000-\$59,999
- \$100,000-\$109,999
- \$110,000-\$119,999
- \$120,000-\$129,999
- \$130,000-\$139,999
- \$140,000-\$149,999
- More than \$150,000

What state/territory do you currently live in?

9.

Alabama	Illinois	Nebraska	South Carolina
Alaska	Indiana	Nevada	South Dakota
Arizona	Iowa	New Hampshire	Tennessee
Arkansas	Kansas	New Jersey	Texas
California	Kentucky	New Mexico	Utah
Colorado	Louisiana	New York	Vermont
Connecticut	Maine	North Carolina	Virgin Islands
Delaware	Maryland	North Dakota	Virginia
District of Columbia	Massachusetts	Ohio	Washington
Florida	Michigan	Oklahoma	West Virginia
Georgia	Minnesota	Oregon	Wisconsin
Guam	Mississippi	Pennsylvania	Wyoming
Hawaii	Missouri	Puerto Rico	Other:
Idaho	Montana	Rhode Island	Specify

If you would like to participate in any or our follow up surveys or receive a copy of our results from this study please provide your contact information. We will also post our results on our web site: <u>http://www.uconnucedd.</u> <u>org/index.htm</u>

Your contact information will not be connected to any of the information you have provided, it will be kept separate from your responses and will be kept confidential and locked and destroyed after 3 years from the completion of this project.

- □ I would like to be contacted for other studies
- I would like to receive the results of this study

Name:			
Address:			

Email:		

Phone:			

Principal Component Analysis Results

Item		Component Loading		
		2	3	
The teacher or therapist takes pride in the successes we have providing my child informal, everyday learning opportunities (n=155)	.78	.25	.36	
The teacher or therapist seems pleased to see my child become more capable and independent (n=156)		.07	.22	
I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests (n=155)	.78	.37	.32	
The teacher or therapists judgments of my child's capabilities seem to be right on target (n=154)		.25	.37	
The ways in which the teacher or therapist works with my family makes me feel more capable of helping my child learn (n=153)		.50	.29	
Getting me to share ideas about what is important to me seems easy for the teacher or therapist (n=156)		.48	.31	
The teacher or therapist is able to accurately identify my child's strengths and needs (n=154)		.38	.41	
The teacher or therapist is good at identifying my family's priorities and concerns (n=155)		.41	.34	
The teacher or therapist has taught me the importance of using my child's interests to help him or her learn (n=155)		.57	.26	
The activities the teacher or therapist shows me have increased my child's interactions with people and objects (n=156)		.55	.30	
The teacher or therapist works well with other professionals to be sure my child gets the right kinds of interventions (n=153)		.34	.44	
The teacher or therapist seems at ease suggesting which informal learning opportunities are good for my child (n=155)		.42	.42	
The teacher or therapist seems pretty capable of explaining my child's needs to other professionals (n=156)		.47	.30	
Showing me how to teach my child new things comes easily to the teacher or therapist (n=155)		.56	.21	
The teacher or therapist does a good job of explaining what other professionals think my child needs (n=154)		.54	.34	
The teacher or therapist talks to me about the importance of pre-reading and prewriting activities for my child (n=156)		.79	.31	
The pre-reading and prewriting activities that the teacher or therapist suggest I do make sense for my child (n=154)		.78	.32	
I am impressed with the fact that the teacher or therapist recognizes my child's strengths and interests (n=155)		.76	.37	
The teacher or therapist knows my family's strengths and how to help me use those strengths to accomplish what is important to me (n=155)	.55	.66	.26	
I am impressed by how much the teacher or therapist knows about pre-reading and prewriting activities for young children (n=155)	.30	.65	.18	

	Component Loading		
Item	1	2	3
The teacher or therapist is especially good at helping me learn how to get the resources and supports my family needs (n=154)	.51	.61	.32
The teacher or therapist has taught me why it is important to respond positively to my child's newly learned behavior (n=154)		.61	.19
The teacher or therapist has helped me to use everyday home and community activities to provide my child learning opportunities (n=155)		.60	.23
Involving me in the development of my child's IEP comes easily to the teacher or therapist (n=156)	.33	.17	.82
Writing IEP outcomes for my child comes naturally to the teacher or therapist (n=154)		.30	.80
The teacher or therapist takes time to find out what outcomes I want on my child's IEP (n=155)		.37	.76
The teacher or therapist knows which IEP outcomes are important to me (n=153)	.38	.34	.64
The outcomes that the teacher or therapist puts on my child's IEP are typically achieved in about 6 months (n=154)		.45	.61
Eigenvalues	18.28	1.32	1.27
% of Variance	65%	5%	5%

Dimensions of Care Pertaining to MAPS

Dimension	Definition
Developmentally Appropriate Care	Services that account for developmental processes intrinsic to childhood and acknowledge the complex interactions between development and health status; includes elements such as anticipatory guidance, developmentally appropriate assistive technology, and mental health promotion.
Family-centered Care	Recognition that the family has a pivotal role in the care of a child with special health needs; includes provider sensitivity to a family's cultural background and health beliefs, and willingness to include the family in decision- making.
Coordinated Care	Care that is planned and implemented so as to create a cohesive therapeutic program that facilitates entry into the system and links various treatment plans; includes communication with other healthcare professionals and referrals to other providers or family support programs.
Technical Competence	Provider knowledge of medical issues related to the primary and specialty care of children with special needs, and capacity to perform procedures properly; involves provider capacity to assess risk of treatment and make judgments about treatment risk in light of expected outcomes.
Interpersonal Competence	Refers to the art of applying technical skills in the context of human relationships; includes extent to which the provider demonstrates kindness and respect, and capacity for effective communication with child and other family members.