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Teachers' Perceptions of Educational Barriers to Preschool Special Education Services

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Abstract

This study focuses on teachers' perceptions of educational barriers to special education services for preschool aged children. The purpose of this study was to determine what teachers saw as barriers to obtaining services for young learners. A review of related research was included in this study. A survey was electronically distributed to general education and special education preschool teachers in the area, and 22 were completed and returned. Overall, teachers identified many possible barriers to services in four (4) sub-groups; parents/families, administrative and support staff, process/procedure, and Early Intervention transition. There was at least one identified barrier in each of those sub-groups.

Keywords: barriers, teacher perceptions, survey research, preschool, special education
Teachers’ Perceptions of Educational Barriers to Preschool Special Education Services

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Chapter I

Introduction

"The early childhood years are crucial for all children, but for the child with special needs these years are especially crucial" (Lerner & Johns, 2012, p. 229). In the first few years of life it is important that children begin to build a foundation of learning that will last for the rest of their lives (Lerner & Johns, 2012). With the federal passage of Head Start programming in 1964, young children from low-income families were able to access preschool education when they may have not been able to before (Lerner & Johns, 2012). Also, the federal legislation passage of Public Law 99-457 in 1975, later amended to what is now known as the Individuals with Disabilities Education Act (IDEA-2004), mandated that every individual with a disability be provided with an education including preschool aged children. Under IDEA-2004 it is required that all states “provide a free and appropriate public education (FAPE) for all children with disabilities ages 3-5” (Markowitz et al., 2006, p. 1). Under IDEA-2004, services for young children are covered under two parts of the law Part C for children aged birth to two and Part B for children aged 3 to 22 (Lerner & Johns, 2012).

According to Danaher, Shackelford, and Harbin (2004), babies as young as a few months old can be referred to Early Intervention (EI) services for a number of reasons, including prematurity, delays in development, etc. As children turn three years old, they transition from EI to the public school setting (Lerner & Johns, 2012). However, there are cases in which services are not given or there is a discontinuity in services for some children (Danaher et al., 2004). There are times when children who had received EI services do not receive services or an Individualized Education Plan (IEP) in the school setting after the age of three. There are several
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reasons for this occurrence, which could include eligibility requirement differences between EI and school districts. (Danaher et al., 2004).

Professionals in the field have also identified what they believe to be barriers in receiving special education services for preschool aged children. According to a study completed by Hardin, Mereoiu, Hung, and Roach-Scott (2009), there are several factors during the referral and evaluation process that can lead to barriers of special education services. These factors include: language barriers, parent participation, time constraints, and procedural issues during the referral and evaluation process (Hardin et al., 2009). Even though early identification of young children’s educational needs is preferable to later identification (Mann, McCarthy, & Park, 2007), the needed services are not always easily secured.

Statement of the Problem

The number of preschool aged children receiving special education services has been increasing in the United States (Lerner & Johns, 2012). The US Department of Education reported that over 329,000 infants and toddlers received Part C programming and over 736,000 preschool aged children (ages 3 through 5) received Part B programming in 2012 (US Department of Education, 2015). This report found that there were also many children benefitting from preschool programs who do not have special needs. According to the US Department of Education (2012) there were over 850,000 children enrolled in Head Start preschool programs across the United States in 2012.

However, there can be a discontinuity in services for children in these programs. Whether it is due to the degree of delay required to qualify for services when transitioning from Part C to Part B services or difficulties during the referral and evaluation process barriers to special education services do exist (Danaher et al., 2004; Hardin et al., 2009).
Purpose of the Study

The purpose of this study is to examine teachers’ perceptions, opinions, and attitudes regarding barriers to preschool aged children receiving special education services in the public school setting. It is important to determine these barriers so that steps can be taken to remove them and support can be given to teachers and students.

Question of the Study

The research question of this study is: What are teachers’ perceptions, opinions, and attitudes regarding barriers to preschool-aged children receiving special education services in the public school setting?

Assumptions and Limitations

One assumption of this study is that there are children who are enrolled in preschool programs that are not receiving special education services and, who by teacher opinion, may need additional support and services. Another assumption is that any perceived barriers to receiving services that teachers and students face are included in the teacher survey, or that teachers remember to write them in under the “additional comments” section on the survey. The limitations of this study include the limited time frame, as it had to be completed during the course of a single semester and the lack of teacher responses from the distributed surveys. Additionally, teachers may be less than honest when answering questions on the surveys or some may provide socially acceptable responses.

Educational Significance of the Study

Research has shown that “the importance of early identification, assessment and provision for any child who may have special education needs cannot be over emphasized” (Taggart et al., 2006, p. 41). It has been shown repeatedly that children who gain access to
quality programming early in their school careers make larger gains than children who do not (Mann, McCarthy, & Park, 2007). When children with special needs are identified early it can help to close learning gaps, lower academic delays, and lower disengagement from school (Mann et al., 2007). However, “concerns have continued about the potential negative impact disparate policies could have on families, who receive early intervention services but are denied services when their children reach 3 years of age” (Danaher et al., 2004, p. 59). If children are able to get a referral for special education services in preschool issues can occur. Hardin et al. (2009) found recurring possible issues during the evaluation process that can lead to disruption of services. These findings may be why barriers to special education services exist for some preschool aged children.
Definition of Terms

At Risk Children. “Young children who are at risk have factors that lead to poor general development and learning failure. Although children who are at risk may not be eligible under the law for special education services, that are at high risk for becoming children with disabilities unless early intervention services are provided” (Lerner & Johns, 2012, p. 231-232).

Free Appropriate Education (FAPE). IDEA requires that all “special education and related services are provided at public expense and meet the standards of the state education agency. The education includes appropriate preschool, elementary school, or secondary school instruction and provides conformity with the individualized education program (IEP)” (Lerner & Johns, 2012, p. 48).

Head Start. “Head Start was intended to provide preschool education to the nation’s low-income children ages 4 and 5 and to offer early educational experiences to low-income children who might otherwise come to school unprepared and unmotivated to learn” (Lerner & Johns, 2012, p. 237).


Individualized Family Service Plan (IFSP). “A plan for young children that includes the family as well as the child. The plan used must ensure due process, confidentiality, and the child’s placement in the least restrictive environment” (Lerner & Johns, 2012, p. 235).

Individuals with Disabilities Education Act (IDEA). “The Individuals with Disabilities Education Act (IDEA) is a law ensuring services to children with disabilities throughout the nation. IDEA governs how states and public agencies provide early intervention, special
education and related services to more than 6.5 million eligible infants, toddlers, children and youth with disabilities” (US Department of Education, 2016, ¶1).

**Part B Services.** “Preschool children with disabilities, ages 3 through 5, are eligible to receive the same full rights under the law that older children have. These provisions are specified in Part B of IDEA-2004. Preschoolers may have a developmental delay in one or more of the following areas: (1) physical development, (2) cognitive development, (3) communication development, (4) social or emotional development, and (5) adaptive development” (Lerner & Johns, 2012, p. 234).

**Part C Services.** “The policies for infants and toddlers, birth to age 3 with disabilities are contained in Part C of IDEA-2004. Services for infants and toddlers with disabilities are not mandated, but Part C authorizes financial assistance to the stated through some grants. The family system is recognized as critical in the child’s development.” (Lerner & Johns, 2012, p. 235).

**Chapter Summary**

Early programming for young children with special needs is crucial in their early educational careers (Mann et al., 2007). Through IDEA and other educational initiatives such as Head Start, young children are able to access quality educational programming during their early years. While research shows that this early programming is important to young learners there are instances in which securing the necessary services proves very difficult.

A brief introduction of the study was included in this section along with the statement of the problem and the purpose of the study. A research question was also formed to address this issue: what are teachers’ perceptions, opinions, and attitudes regarding barriers to preschool-
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aged children receiving special education services in the public school setting. The assumptions and limitations of the study were addressed as well as the educational significance.
Chapter II

Review of the Literature

This chapter offers insight and previous research that has been completed on barriers to special education services. This section also includes a review of special education laws and producers that are crucial to understanding special education at the preschool level. In order to better understand the various aspects of this project this section includes, special education law, identified barriers, and teacher and parent perspectives of this topic.

Special Education Law

A broad and widespread body of rules, regulations and court decisions governs special education. The foundations of special education law come from the U.S. Constitution and the State Constitution (Yell, 2012). The educational rights of children with disabilities were gained largely through the tireless efforts of parents and advocacy groups in courts and legislatures with many years of struggle (Yell, 2012).

History of Special Education

During the 1850s and 1900s, important changes took place in attitudes towards severe and profound emotional and behavioral disorders and mental retardation (Kauffman & Landrum, 2009, p. 410). With attitudes shifting, the 20th century brought about significant milestones regarding legislation for students with disabilities (Kauffman & Landrum, 2009; Yell, 2012). In 1914, the state of Michigan was the first state to have Special Education training programs for teachers and by 1918; all states had compulsory education for all students (Kauffman & Landrum, 2009). However, as Yell (2012) indicated, the responsibility of educating students with disabilities was a cost paid by the states until the 1960s. The Elementary and Secondary Education Act (ESEA) was passed in 1965, and again amended in 1966, marking the first time
the federal government provided assistance to the states to fund the education of all students with disabilities (Yell, 2012). Additionally, according to Yell (2012), the Education of the Handicapped Act (EHA), passed in 1970, brought about funding for the training of teachers in institutions of higher education to teach students with disabilities, along with other improvements. Amendments to the EHA brought about “(a) full educational opportunities, (b) procedural safeguards, and (c) education in the least restrictive environments for students with disabilities” (Yell, 2012, p. 64).

Two important court decisions in 1972, Pennsylvania Association for Retarded Citizens (PARC) v. Pennsylvania and Mills v. Board of Education District of Columbia required that students with disabilities be offered education (Yell, 2012). Throughout numerous meetings of Congress and the Senate, the Education for All Handicapped Children Act (EAHCA) brought a partnership between the federal government and the states to provide public education to students with disabilities (Yell, 2012).

**Individuals with Disabilities Education Act (IDEA)**

Yell (2012) indicated the passage of Public law 94-142 eventually brought around the Individuals with Disabilities Education Act (IDEA) in 1975. IDEA is a federal law ensuring services to children with disabilities throughout the nation. IDEA requires that schools provide special education services to students who are found eligible as outlined in their Individualized Education Plan (IEP). IDEA also provides very specific requirements to guarantee that students with disabilities receive a Free Appropriate Public Education (FAPE) in the least restrictive environments (LRE).

IDEA mandates services for all individuals with disabilities. Because “development of cognitive, language, and social skills in the first years of life provide an essential foundation for
learning more advanced skills throughout the school years” (Jeon et al., 2011, p. 435), there has been specific law written for young children. Part C of IDEA mandates programs for infants and toddlers, and Part B mandates programs for preschoolers (Jeon et al., 2011).

**Part C Services Under IDEA**

For an infant or toddler to qualify for services under Part C, sometimes referred to as Early Intervention, they must have a developmental delay or a diagnosed physical or mental condition, which may lead to a higher probability of a developmental delay (U.S. Department of Education, 2016). Part C services for these young children with disabilities are not mandated but Part C authorizes financial assistance to states through grants (Lerner & Johns, 2012). The family system is viewed as a critical aspect of development and teams use an IFSP (Individualized Family Service Plan), which includes services for the family as well as the child (Lerner & Johns, 2012).

**Part B Services Under IDEA**

Preschool aged children with disabilities are entitled to the same rights under the law as older children are (Lerner & Johns, 2012). These rules and regulations are specified in Part B services of IDEA (Lerner & Johns, 2012). Most preschool aged children who are identified to have a disability usually fall into one of these six (6) categories: (a.) speech/language impairment, (b.) developmental delay, (c.) intellectual disability, (d.) autism, (e.) learning disability, and (f.) other health impairment (Lerner & Johns, 2012). Provisions that are provided for these are the following: each state must provide a free, appropriate public education along with related services, states may determine eligibility non-categorically or by the category of disability, the team may use an IEP or an IFSP to plan for the child, and the lead agency for preschool aged children ages 3 – 5 is the state education agency (Lerner & Johns, 2012). The
law gives each state’s education agency the responsibility of implementing Part B services of IDEA for these children (Lerner & Johns).

**Transition from Part C to Part B Services**

As a child ages out of Early Intervention a specific transition process is required by law (Malone & Gallagher, 2008). A transition meeting with participants from the lead agency and the school district must be convened at least 90 days before a child is eligible for services by the school district (Malone & Gallagher, 2008). It is required that each state has policies and procedures to ensure a “smooth and effective transition” so that an Individualized Education Plan is developed and implemented by a child’s 3rd birthday (Malone & Gallagher, 2008). It is a process that takes place over time and should include collaboration with the child’s family (Malone & Gallagher, 2008).

**Free Appropriate Education (FAPE)**

A major component of IDEA is the special education student’s entitlement to a Free Appropriate Public Education (FAPE). IDEA mandates that all children with disabilities be entitled to a FAPE (Lerner & Johns, 2012). According to Yell, Conroy, Katsiyannis, & Conroy (2013) FAPE refers to special education services that “(a) are provided at public expense, under public supervision and direction, and without charge; (b) meet the standards of the state educational agency; (c) include and appropriate preschool, elementary school, or secondary school education in the state involved; and (d) are provided in conformity with the individualized education program” (p. 677). Conroy, Yell, Katsiyannis, and Collins also noted that parent advocacy plays a role in children receiving a FAPE and there are specific procedural safeguards in place to help maintain children’s access to FAPE (2010).
Least Restrictive Environment

IDEA also mandates that children receive their FAPE in the least restrictive environment (LRE) (Lerner & Johns, 2012). This means that, to the most extent possible, that children with disabilities be educated with their non-disabled peers (Lerner & Johns, 2012). LRE mandates that a child’s placement must be determined based on their Individualized Education Plan (IEP) (Yell, et al., 2013). The child’s placement is determined during an IEP because the student’s unique needs and learning abilities are not known until an IEP is created (Yell, et al., 2013).

Individualized Education Plan (IEP)

IDEA mandates a free and appropriate public education be provided to all children who meet eligibility requirements for a diagnosable disability (Simon, 2006). An Individualized Education Plan (IEP) is a method for providing FAPE for children ages 3 – 21 (Simon, 2006). An IEP is defined as the written plan for the education of an individual student with learning disabilities, and must meet all requirements and regulations of IDEA (Lerner & Johns, 2012). Every IEP that is written must contain certain information about that child (Yell, et al., 2013). These requirements include: a multi-disciplinary team including the child’s parents, the student’s unique needs, measureable goals and objectives, any needed related services, present levels of functional and academic performance, supplementary aides and services, the extent to which the student will participate in general education, state and district-wide assessments, behavior interventions, and transition plans (Yell, et al., 2013). IEPs are implemented after parental consent is given and are valid for one year, after which the team meets again to review and develop the plan as needed (Yell, et al., 2013).
Section 504 Plan

Section 504 is a civil rights law that prohibits discrimination against individuals with disabilities; provision in the Americans with Disabilities Act Amendments (ADAA) applies to students in section 504 (Lerner & Johns, 2012). Under Section 504 a student may have a disability but may not qualify for services under a state’s diagnostic criteria, students are then entitled to a Section 504 Plan (Lerner & Johns, 2012). It should be noted that, the “processes 504 puts in place are not those of special education; they are designed to ensure the student accommodations in the general education setting” (Dobson, 2013, p. 64). These accommodations help to minimize any impacts of the disability (Dobson, 2013).

Identification of Preschool Aged Children

Children grow and develop at all different rates. “For some children differences and delays in abilities are temporary and are resolved during the normal course of development” (National Joint Committee on Learning Disabilities, 2007, p. 65). Even if children do demonstrate some type of delay it may resolve itself as the child grows. However, this is not always the case.

“For other children, delays may persist in different domains of functioning necessitating the child’s referral for targeted screening and/or comprehensive evaluation” (NJCLD, 2007, p. 65). There are different routes to take in order to identify students with potential disabilities; these include: screening, examination for the presence of risk indicators and protective factors, systematic observations, and a comprehensive evaluation. These routes are defined by the NJCLD (2007) each of which are briefly discussed;

1. Screening is used to “determine is additional evaluation is required and in what developmental domains” (p. 65).
2. Risk indicators and protective factors include "a range of environmental, biological, genetic, and perinatal conditions may be associated with adverse developmental outcomes" (p. 65).

3. "Systematic observations of a child's behavior and abilities over time are an important addition to examining the presence of risk factors" (p. 66).

4. Comprehensive evaluations' goal is to "determine the individual child's specific pattern of abilities and needs" (p. 67) in six different domains (cognition, communication, emergent literacy, motor functions, sensory functions, and social-emotional adjustment).

**Importance of Early Identification**

"Early identification has become recognized nationwide as a necessary tool in providing the most effective treatment and intervention services to children with disabilities" (Delgado & Scott, 2006). Delgado & Scott have noted that the initial referral of children for services is often considered the most important step in the special education eligibility process (2006). It is considered the most important step of the process because it identifies which children will be considered for services and it is an important predictor of future eligibility for special education (Delgado & Scott, 2006). Children obtaining services at a young age helps the child later in life (Lerner & Johns, 2012).

**Barriers to Accessing Services**

Webster's Dictionary defines a barrier as law, rule, or problem, etc. that makes something difficult or impossible (2016). Parents attempting to access services for a young child may face any number of barriers (Williams, Perrigo, Banda, Matic, & Goldfarb, 2013). As a result of these barriers there are often delays or gaps in services for young children (Williams et al.,
Much research has been done in this area and there are several identified areas where barriers can exist (Jung, 2011; Werts, Carpenter, & Fewell, 2014; Williams et al., 2013) and they include educator attitudes, diverse families and languages, Early Intervention transition, and administrative and service procedures.

**Educator Attitudes**

When educators are dealing with families, occasionally their own perception of the family may serve as a barrier in obtaining services and this in turn may limit parent participation (Jung, 2011). It has been found that educators may stereotype or blame the parent, deny parent expertise and knowledge about the child, are insensitive to religious beliefs, family traditions, and cultural diversity, and withhold information and use educational jargon and terminology about placement and programming options (Jung, 2011). Educators may feel that their own knowledge and suggestions are more important than the family’s and may hinder services for that child (Jung, 2011). Even teachers who use best practices when working with families may feel that they do not have the support they need in order to do so (Odem, et al., 2004).

**Diverse Families and Languages**

The increase in diversity in American society has expanded the boundaries of education in the United States (Odem et al., 2004). With such diversity barriers often are encountered during the IEP process (Jung, 2011). Research has shown that culturally and linguistically diverse families are not as actively involved in the process (Jung, 2011). These parents do not have knowledge of the processes and systems and therefore cannot advocate for their child as well as other parents (Jung, 2011).

As reported by Peterson, Mayer, Summers, and Luze (2010), sometimes “parent report of disability indicators did not always agree with other evidence of disability indicators (e.g., report
of professionals, developmental delays identified via assessment)” (p. 515) which makes it difficult to find a child eligible for services. These researchers also found that sometimes a lack of parent understanding played a role in discontinuity or lack of services. Some parents did not understand that their child was receiving Part C services and could then be eligible for preschool services and in turn denied permission for their child to continue in the school setting (Peterson, et al., 2010).

With more linguistically diverse families in schools, language barriers can often occur during the referral and IEP processes. (Williams et al, 2013). Language barriers may also prevent appropriate screening referrals for young children as well (Williams et al., 2013), again resulting in the lack of necessary services. These parents may also not know what information is important when requesting these services or even what questions to ask if they do have concerns (Williams et al., 2013).

Parent involvement could also be seen a barrier. Teachers and administrators often found discrepancies between what parents reported and what was found during screening (Hardin, et al., 2009). This makes it difficult to determine if a child is eligible for services. “Both administrators and teachers reported that the timelines required by federal and state laws were a contributing factor” (Hardin, et al., 2009, p. 97).

Many children who receive special education services speak more than one language. When trying to communicate with families who speak a language other than English it becomes difficult; especially since often times the there are no trained staff or interpreters that could help (Hardin, et al., 2009).
Transition from Early Intervention to the School Setting

Studies have been conducted to examine the possibility that children in EI do not qualify for services in the school setting. The study by Danaher, et al. (2004) looked at state-level data for discontinuity of services for preschool-aged children due to procedural issues. The study found, “Of the children who reached age 3 while enrolled in Part C, 39% were determined to be eligible for Part B services. Children who were found not eligible for Part B exited with referrals to other programs (7%) or exited with no referrals (5%). Eligibility for Part B was not determined for 11% of the children exiting Part C at age 3 years” (Danaher, et al., 2004, p. 67).

These researchers also looked at what factors may be causing this discontinuity of services. They concluded that there are five possible sources of discontinuity: inclusion of children at risk, professional judgment, level of delay, psychometric in-equivalence, and the use of disability categories (Danaher, et al., 2004). These five sources will be briefly discussed below:

The inclusion of children at risk contributes some level of discontinuity “due to the fact that their eligibility criteria for infants and toddler include children who are at risk for developmental delay, but these children are not included in Part B entitlement” (Danaher, et al., 2004 p. 64). Some children are able to receive services as a toddler but it is not covered later in life by Part B services. Professional judgment can also be a source of discontinuity when it is “the sole criterion for determining eligibility for the Infant and Toddler Program coupled with a preschool eligibility policy that uses quantitative criteria in determining eligibility” (Danaher, et al., 2004, p. 65). When determining if a child is eligible for services, school districts should not rely on one source alone, it may not give an accurate representation of a child. Level of delay is another possible contributor to discontinuity of services for young children. It can be as simple
as a “higher level of delay is required by the Preschool Program policy than by the Infant and Toddler Program policy” (Danaher, et al., p. 65). A child may be eligible for services as a toddler but do not qualify since the level of delay is higher when it comes time to transition to a preschool setting. Psychometric in-equivalence is also a source of possible discontinuity for preschool-age children. The use of “different quantitative measures such as percentage of age vs. standard deviation between two programs” (Danaher, et al., p. 65) can play a role in the interruption of services simply due to the fact that EI uses one scale and the school district uses another. Finally, the last possible source of discontinuity is the use of disability categories. “How states used the Part B disability categories in conjunction with a non-categorical disability classification (e.g., develop- mentally delayed)” (Danaher, et al., 2004, p. 66) can actually hinder some children from receiving services in the school setting since they do not cover everything Part C services did.

Janus, Lefort, Cameron, and Kopechanski’s, 2007 study indicated that a reason for discontinuity between services may have been lack of compatibility between definition Early Intervention and preschool eligibility criteria. There have been cases where a child had been receiving services through EI but had no official diagnosis. Then when it came time to transition to the preschool setting the lack of diagnosis did not allow the child to qualify for Part B services (Janus, et al., 2007).

**Administrative and Service Procedures**

Administrative and service procedures have been well documented as a barrier to services for young learners (Hardin, et al., 2009; Janus, Kopechanski, Cameron, & Hughes, 2008). “Both administrators and teachers reported that the timelines required by federal and state laws were a contributing factor” (Hardin, et al., 2009, p. 97). It has been reported that some federal and state
laws do not have coordinating timelines that align with the eligibility process making it difficult to comply complete a timely evaluation (Hardin, et al., 2009).

Janus, et al. also found that often the problem lies within administrative practices rather than a lack of resources (2008). Lack of communication between services used prior to school and within the school system have been found to be a barrier during the transition of children to preschool (Janus, et al., 2008). Other administrative barriers include the availability of staff and school based supports as well (Janus, et al., 2008).

Parent Perceptions of Barriers

In order to achieve and effective education experience for children with disabilities parent involvement is crucial (Fish, 2008). Parents of children with special needs are expected to be much more involved their child’s education (Czapanskiy, 2014). These parents are called on to advocate and negotiate for their child in situations where everyone else is a professional (Czapanskiy, 2014), making it an overwhelming process.

Researchers have found that parents do not feel as though they are an equal part of the IEP team (Jung, 2011). Jung (2011) also noted that it is often the case that culturally diverse parents report not knowing as much about the IEP process as White parents. Many of these parents also reported language barriers, lack of connections with professionals, their lack of information, and their different values and practices have isolated or prevented them from meaningful partnerships with education professionals” (Jung, 2011, p. 22). Results of these studies have concluded that it is important for professionals to build positive relationships with parents to overcome any possible barriers (Fish, 2008).
Teacher Perceptions of Barriers

Research on teacher perceptions of barriers to services has been researched in the past (Croll & Moses, 2003 & Hardin, et al., 2009). Teachers have reported that they would like their student’s with special education needs to “receive more help than they are getting” (Croll & Moses, 2003, p. 741). Even when students are identified with a disability, teachers feel that these students could still need extra support than what is provided. This needed support may not be entirely academic. It was found, “Support in other areas of the curriculum or for behavioural and emotional difficulties is much less common”(Croll & Moses, 2003, p. 741). Other studies have found that teachers have a need for improved resources, increased opportunities for professional development, collaboration/collegiality, leadership, and a clear direction (Werts, et al., 2014) would helpful in overcoming barriers.

In a study completed by Hardin, et al. in 2009 teachers were asked what they thought were barriers to services during the IEP process. Their responses will be discussed in this section. During the evaluation process, professionals agreed that while parent participation was important to the process, parents sometimes seemed confused as to what to share (Hardin, et al., 2009). They may think that something their child is exhibiting is not worth noting during the evaluation process even though it is (Hardin, et al., 2009).

During the placement process, many of the same barriers were mentioned. Professionals also noted that the IEP process can be “intimidating and confusing to parents” (Hardin, et al., 2009, p. 99), which can lead to barriers to services. It was noted that teachers often felt that the parents did not understand the placement process and needed support in order to make decisions about their child’s education (Hardin, et al., 2009).
Chapter Summary

Special education law mandates that all children with disabilities receive a free and appropriate public education and dictate how each child will receive services. A review of special education law a procedures has been completed. However, barriers to obtaining services for these children often do exist. The importance of early identification is key to a child’s success and it has been found that preschool plays a crucial role in promoting school readiness (Baker, Tichvolsky, Kupersmidt, Voegler-Lee, & Arnold, 2015). Several barriers to services have been identified along with parent and teacher perceptions of the barriers that exist.
Chapter III

Methodology

The purpose of this study was to identify and analyze preschool teachers’ perceptions, beliefs, and about educational barriers to special education services. A survey questionnaire was developed to collect data from special education and general education teachers, for this study.

Participants

Participants in this study were preschool teachers who were currently working in a preschool classroom. Currently teaching preschool educators were surveyed for this study. Surveys were distributed to teachers electronically through email, Facebook and Twitter. Teachers’ basic teaching information was collected through the survey. A sample of convenience was used. Teachers in the metropolitan Chicago-land, who fit the required criteria, were recruited to take the survey.

Instrumentation

The data collection instrument used in this study was a survey. The first section the survey asked for some basic teacher information, and the second was comprised of items relating to education barriers to special education services of preschool-aged children. The items were based on a Likert-scale from (1) strongly disagree to (5) strongly agree. In addition, a final open-ended question asking respondents for any additional comments.

Validity

This survey was submitted to an expert panel of graduate students and a supervising professor, who examined the content and determined it to be valid in conducting this study. The survey was also determined to be factual in relation to the research question. The questions were worded to avoid bias on the researcher’s behalf.
Reliability

The expert panel of graduate students and professor determined this survey to be a reliable tool to be used in order to find the answers to the research question. The panel determined that this is an appropriate tool for conducting this study.

Procedure

This study was conducted from January 2016 through May 2016. A survey approach method was used to gather data and information from preschool teachers who were currently teaching in a public school setting. An email describing anonymity, and the purpose of the study were included in the survey and distributed to preschool teachers to determine what their perceptions were of barriers to educational services for their children. Teachers were emailed the introductory letter and survey and were asked to complete the included survey. The teachers were emailed reminders to complete the surveys if they had not initially responded.

Data Collection

The surveys were distributed to preschool general education and special education teachers, via email. This survey was created on Google forms and teachers answered the questions electronically. Responses were immediately returned back to the researcher through Google forms. After receiving the surveys the researcher analyzed the data from the Likert-scale and open-ended questions. The information that was collected from the surveys what analyzed thoroughly for commonalities amongst the respondents to identify possible barriers to obtaining special education services for preschool children. Four (4) basic subgroups were identified based on the questions on the survey.
Data Analysis

Once the surveys were completed the responses were immediately coded within Google forms. Then the coded responses were then transferred into the Excel spreadsheet program, which allowed for accurate calculation, and were summed for trends among the responses. Percentages were used to calculate the degree to which teachers responded whether or not a subgroup was indeed a barrier. This allowed the identification of any clusters within the data. Themes in the data were then identified.

Chapter Summary

A survey style research method was used to examine teachers' opinions and perceptions of barriers to obtaining special education services for preschool-aged children. Quantitative data was gathered through a survey that was distributed to preschool teachers who currently teach in a public school setting. This data was used to help understand what these barriers may be for schools' youngest learners.
Chapter IV

Results

A total of 22 preschool teachers responded to a survey asking their perceptions and thoughts about barriers to special education services for preschool aged children. After reviewing teacher responses of the survey, there are some areas in which teachers identify barriers to services for preschoolers. The responses of this survey were analyzed in sub-categories broken up by related theme to help identify the possible barrier areas. The areas that were then created were parents/families, administrative and support staff, processes and procedures, and Early Intervention transition. The results of the survey are included in a table format; neutral responses were not included in the results as they were not helpful in identifying if a sub-category is in fact a barrier to services.

Demographics

This survey was distributed electronically to preschool teachers through school email, Facebook, and Twitter. 22 total responses were collected from this survey. Of the respondents eight (8) teachers hold a bachelors degree and 18 hold a masters degree, no teacher who responded held a doctoral degree. Of the respondents eight (8) teachers teach in a general education classroom with no special education students, four (4) teachers teach in an instructional special education classroom with no general education students and ten (10) teachers teach in a blended preschool classroom with general and special education students. The average number of years teaching of the respondents is 13.6 years; ranging from one first year teacher to a 35 year veteran teacher.
Table 1

*Teacher Responses Barriers in Percent Agree and Disagree by Themes*

<table>
<thead>
<tr>
<th>Area</th>
<th>Agree (%)</th>
<th>Disagree (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parents/Families</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proactive Parents</td>
<td>36%</td>
<td>31%</td>
</tr>
<tr>
<td>Home Language</td>
<td>73%</td>
<td>18%</td>
</tr>
<tr>
<td>Parent Education Level</td>
<td>0%</td>
<td>86%</td>
</tr>
<tr>
<td><strong>Administrative &amp; Support Staff</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative Support</td>
<td>59%</td>
<td>14%</td>
</tr>
<tr>
<td>Child Find Effective</td>
<td>59%</td>
<td>36%</td>
</tr>
<tr>
<td>Administration Not Supportive</td>
<td>56%</td>
<td>32%</td>
</tr>
<tr>
<td>Support Staff in Agreement</td>
<td>82%</td>
<td>6%</td>
</tr>
<tr>
<td>Support Staff Concur</td>
<td>73%</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Process/Procedure</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lack of Resources</td>
<td>14%</td>
<td>82%</td>
</tr>
<tr>
<td>Referral Quick &amp; Easy</td>
<td>9%</td>
<td>86%</td>
</tr>
<tr>
<td>Clear Referral Process</td>
<td>36%</td>
<td>45%</td>
</tr>
<tr>
<td>Length of Referral Time</td>
<td>45%</td>
<td>27%</td>
</tr>
<tr>
<td><strong>Early Intervention Transition</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EI Reports Accurate</td>
<td>40%</td>
<td>41%</td>
</tr>
<tr>
<td>Clear EI Transition Process</td>
<td>37%</td>
<td>45%</td>
</tr>
</tbody>
</table>

Note. $N = 22$, neutral responses were dropped from the results, totals will not equal 100%

**Perceptions of Teachers on Barriers to Educational Services**

The responses from the surveys were grouped by sub-category and the percent of agreement (4, 5) and disagreement (1,2) was calculated for each question. Once that had been completed the data was then analyzed by each sub-category for barriers at each theme. If any
response had an agreement or disagreement rate near 50% it was determined that teachers perceived a barrier in that group. There was at least one identified barrier by teachers in each sub-category.

**Parents/Families**

In the parent and families’ sub-category one barrier that was identified by teachers is a parent’s education level. 86% responded that they disagreed that a parent’s education level plays no effect on how well they advocate for their child. If a parent has a lower education level they do not advocate as well for their child and the child may not receive the services that they need. 73% of teachers also responded that they agreed that a family’s home language also plays a role in whether a child receives special education services; if a parent does not communicate well in the same language as the IEP team, a barrier may exist. Teachers were split fairly evenly when asked if parents were proactive in advocating for their children; 36% agreed and 31% disagreed with the statement.

**Administrative & Support Staff**

In the administrative sub-category an identified barrier by teachers is that administrators are not supportive of staff when they want to recommend a child for evaluation; 56% of teachers reported a lack of administrative support. A lack of administrator support can impact if a child receives the necessary services; and administrators may be hindering staff from accurately identifying children. More than half (59%) of teachers agreed that Child Find is an effective way to identify children who may be eligible for special education services. Also, based on the responses, teachers have identified that support staff is not a barrier to services and that teachers (82%) are usually in agreement with their support staff.
Process/Procedure

There are three (3) identified barriers to services in the processes and procedure sub-category. The first barrier identified by teachers is a district's lack of resources; 82% disagreed with the statement that a lack of resources has no effect on whether a child receives services. If a district lacks the necessary resources it may hinder whether or not a child gets the needed services. The second area, as identified by teachers is that there is not a clear process for referral in their district; 42% of teachers disagreed with a statement that there is a clear process for referrals in their district. Again, if there is no clear process some children may not get what services they need. Teachers also identified that the referral process is long and complicated which can also affect a child getting services. Teachers also responded that the length of time that referral takes may also play a role in securing the necessary special education services.

Early Intervention Transition

In the sub-category of Early Intervention (EI) transition there was one identified barrier by teachers. Teachers identified that there is not a clear process set in their district for transitioning children from Early Intervention into the school district. A lack of a clear procedure can make it difficult to identify children who may need continuing services as they age out of Early Intervention. Responses from the survey showed that teachers were essentially split on whether to not Early Intervention reports of children were accurate. 40% of teachers agreed that the records were accurate and 41% felt that the records were not accurate. It is not possible to determine if this is a barrier to services based on the responses.

Chapter Summary

Currently practicing teachers responded to a survey to help identify what teachers perceive as barriers to services for preschool children. Twenty-two responses were received
from the survey and were included in the data. There were identified barriers in every sub-category except for support staff.
Chapter V
Discussion and Conclusion

Based on the responses from the teacher survey it can be concluded that teachers perceive that there are barriers that exist that to obtaining special education services for preschool aged children. Teachers who responded to this survey reported that there is at least one barrier in every sub-category that was included on the survey. These barriers may negatively be impacting children in their classrooms.

Discussion

When comparing these results to other studies that have been completed on this topic it can be concluded that, overall, teachers perceive many of the same barriers that have already been identified. When reviewing the previous research four (4) major areas were found to be barriers to services. The areas were educator attitudes, families, transition practices and administration (Danaher et al., 2004; Hardin, et al., 2009; Janus et al., 2007; Jung, 2011; Odem et al., 2004; Peterson et al., 2010, & Williams et al. 2013). These identified areas are very similar to what teachers identified in this study. The areas in which teachers perceived barriers were in parents/families, administration and support staff, process/procedure, and Early Intervention transition. Teachers in this study did not identify personal attitudes or support staff as a barrier to services.

In the area of families both the teachers surveyed and previous studies have identified that diverse families can play a negative role in children receiving special education services. In Jung’s research it was found that many culturally and linguistically diverse families are not comfortable or familiar with the IEP process (2011), which can adversely affect how they advocate for their child. According to Williams et al., language barriers can also prevent
screening or referrals of children (2013). In this study teachers agreed that a families home language does play a role in whether or not a child receives services.

While this and previous studies have found transition to be a possible barrier to services it is because of different reasons. Previous research found that a lack of compatibility between EI and school eligibility was the major contributing factor (Danaher et al., 2004; & Janus et al., 2007). This makes it difficult for professionals to provide services for children who had previously qualified. However, in this study the transition issue that was identified was the lack of a clear process in the transition process. Again, this makes it difficult to determine if a child is eligible for services in the school setting. Overall, it can be said that transition is a barrier, just for different reasons.

Administrative and service procedures have been a well-documented barrier to services for young children. A lack of staff to complete required paperwork and to provide necessary services (Janus et al., 2008) had been identified previously in the research. This negatively affects children receiving the services they may need. In this study the responding teachers reported that they did not feel supported by administration when they had a concern about a child. This can result in teachers not being able to evaluate children for possible special education services.

Conclusion

When looking at the four sub-categories that were identified in this survey it is clear that preschool teachers do perceive barriers to services for young children. Teachers identified at least one barrier in each of these categories. These perceptions may be why some children do not qualify for services they may need.
An area that has been identified as a barrier to services is a child’s family. Teachers have found that a child’s home language may play a role in whether they qualify. Parents may not communicate well with a child’s teachers and services may be overlooked. Or these parents may not know that these services exist or how to begin the process. Teachers also found that a parent’s education level may also play a role as well. If a parent is not aware of what services are offered in school their child may be missing out on services. Parents also may not know what to look out for in regards to their child’s development. Overall, families/parents can be a barrier to services for preschool aged children.

Teachers have identified that their administrators are often not supportive of teachers when they feel a child may need more support than they are currently receiving. When administration does not support their teachers it can negatively impact a child getting the needed supports in school. Whatever reasons an administrator has for not wanting to begin the referral process; in the long run the one who is hindered is the child. Administration can be a barrier to services for preschool children.

The teachers who completed this survey have identified special education processes and procedures as barriers to services. Teachers found the referral process to be long, difficult, and time consuming. This can delay services beginning for these children. It was also found that a lack of a clear process in the district might impede services for children. If teachers do not know how to begin a referral a child may have to wait a longer period of time for an evaluation. Teachers have also identified a lack of resources as a barrier as well. If a school does not have adequate resources it may take longer for a child to be found eligible. Processes and procedures play a major role in whether a child receives special education services.
The last area that teachers identified that as a barrier to special education services is the transition between Early Intervention and preschool services. Teachers responded that there is not always a clear EI transition process in their district. If schools do not always follow the same procedure some children may be missing needed services in the school setting. Transitioning between these two programs can be a barrier to services.

**Educational Implications**

Given the results of this study educators need to be aware of the barriers that exist to services for young children. Educating teachers on this topic is crucial. The results of this and similar studies should be shared with pre-service teachers, currently practicing teachers, and administrators. Professional development and in-service opportunities should be offered so that teachers are aware of this issue and will know how to advocate for their children. It is important that pre-service teachers also be aware of these issues before they reach the classroom. This will allow all teachers to have a better understanding of how to help secure needed services for the children in their classrooms.

**Recommendations for Further Research**

Given that this was a small-scale teacher survey research study more research is warranted to better understand the role the barriers play in securing necessary services for children. Further research that can be done in this area is a records review study. A researcher can study children's academic records and interview teachers to see if they had concerns about those children during their preschool years; if concerns had existed, did the children receive services in preschool, or if not what were the barriers and did they receive services in later grades. This can allow researchers to see if these barriers actually do exist and what they were, or if teachers were indeed able to overcome the barriers and secure services for their children.
Summary

This study was conducted to determine preschool teachers perceptions of barriers to special education services. A questionnaire was created and distributed to preschool teachers electronically to gain their input. Once the responses were received back it was determined that there are some barriers to special education services for preschool aged children. Teacher’s found barriers in each of the four (4) identified subgroups. The barriers that were identified by teachers in this study were very similar to previous research.
References


Appendix A.

Teacher Perceptions of Barriers Survey
Educational Barriers to Obtaining Special Education Services for Preschoolers Survey

Completion of this survey will serve as documentation of your consent of participation in this project. You are under no obligation to complete this survey and all responses will be kept confidential. If you have any questions about this survey please feel free to contact me at [redacted] or my project supervisor Dr. Philip Boudreau at [redacted].

Thank you!

* Required

1. Total Years of Teaching Experience *

2. Highest Level of Education *
   *Mark only one oval.*
   - Bachelors Degree
   - Masters Degree
   - Doctoral Degree

3. Type of Preschool Classroom in Which You Teach *
   *Mark only one oval.*
   - Instructional (self-contained) Special Education
   - General Education (no special education students)
   - Blended Classroom (special education and general education students)

4. I feel that parents are proactive in trying to obtain special education services for their child. *
   Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
   *Mark only one oval.

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
</table>
   | strongly disagree | | | | | strongly agree

https://docs.google.com/a/d123.org/forms/d/1JbMNxScbD4C3dBQ4qL7nOcaCW9V_DkeLoLWsw-SHfs/edit
5. I feel that families' home languages play a role in students receiving special education services.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree   strongly agree

6. I feel that the lack of resources has no effect on whether a child receives services.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree   strongly agree

7. I feel that administrators support my concerns to refer a child up for a special education evaluation.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree   strongly agree

8. I feel that a parent's education level has no effect on how well they advocate for their child.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree   strongly agree

9. Child Find is an effective way to help identify students who may have special needs.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree   strongly agree
10. School administration does not always support professionals’ opinions regarding students who need an educational evaluation.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree           strongly agree

11. Support staff (e.g. speech pathologists, occupational therapists, etc.) and I are usually in agreement about whether a child may need additional services.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree           strongly agree

12. Referral of students for and evaluation is a quick and easy process.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree           strongly agree

13. There is a clear process for referrals in my district.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree           strongly agree

14. The length of time from identification to referral plays a role in whether a child may receive special education services.*
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree           strongly agree
15. Support staff concurs with my professional opinion of a child's needs in the classroom. *
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree 0 0 0 0 0 strongly agree

16. Early Intervention exit reports are accurate of a child's abilities and make determining a child's needs easy. *
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree 0 0 0 0 0 strongly agree

17. There is a clear process in my district for determining programming and services for children transitioning from Early Intervention. *
Please indicate whether you strongly disagree (1), disagree (2), no opinion (3), agree (4), strongly agree (5) with each statement.
Mark only one oval.

1 2 3 4 5

strongly disagree 0 0 0 0 0 strongly agree

18. Please tell me anything else that you would like to know, or that you feel is important about this topic. All of your opinions are very important to me! Thank you!
Appendix B.

Ethics Training Completion Certificate