MEREOIU, MARIANA, Ph.D. Family-Centered Practices for Families of Latino Heritage with Young Children with Disabilities in Rural Areas. (2011)
Directed by Drs. Judith A. Niemeyer and Belinda J. Hardin. 149 pp.

The purpose of this study was to examine the extent to which early childhood educators implement family-centered practices with families of Latino heritage in rural areas and who have young children with disabilities. This research also investigated factors that may influence implementation of practices within the family-centered approach, such as education, access to professional development opportunities and experiences in the field, as well as challenges and needs related to implementation from the viewpoint of early childhood teachers. Finally, the study examined teachers' views on the influences of their professional and cultural background on the extent and ways they use family-centered approach in their practice. To better understand these aspects, quantitative and qualitative data was collected to explore the extent to which teachers reported to employ family-centered practices, as well as the influence of the above-mentioned variables at the implementation level. The responses of 44 participants collected with a survey were analyzed to explore the first questions of this study. Individual interviews with a subsample of 10 participants were conducted to explore the latter questions.

The results of this study indicate that teachers report to implement family-centered practices to an overall high extent. However, the findings of the qualitative data indicate that although teachers are reporting to use family-centered approach in some areas of their practices, they are reporting critical needs in others. In addition, results indicate there may be a significant relationship between variables such as extent of

experience of working with families of Latino heritage, access to professional development opportunities, or extent of experience in the current teaching position, and the extent to which professionals use family-centered practice approach.

FAMILY-CENTERED PRACTICES FOR FAMILIES OF LATINO HERITAGE WITH YOUNG CHILDREN WITH DISABILITIES IN RURAL AREAS

by

Mariana Mereoiu

A Dissertation Submitted to
the Faculty of The Graduate School at
The University of North Carolina at Greensboro
In Partial Fulfillment of
The Requirements for the Degree
Doctor of Philosophy

Greensboro
2011

Approved by

Judith A. Niemeyer
Committee Co-Chair

Belinda J. Hardin
Committee Co-Chair

© 2011 Mariana Mereoiu

Parintilor mei.

To my parents.

APPROVAL PAGE

This dissertation has been approved by the following committee of the Faculty of The Graduate School at The University of North Carolina at Greensboro.

Committee Co-Chairs Dr. Judith A. Niemeyer

Dr. Belinda J. Hardin

Committee Members Dr. Mary V. Compton

Dr. José A. Villalba

May 17, 2011
Date of Acceptance by Committee

May 17, 2011
Date of Final Oral Examination

TABLE OF CONTENTS

Page

LIST OF TABLES vi

CHAPTER

I. INTRODUCTION 1

Rationale for the Study 2
Research Problem 4
Purpose of the Study 6
Theoretical Framework 7

II. REVIEW OF THE LITERATURE 9

Theoretical Perspectives 9
Family-Centered Practice 10
Components of Family-Centered Practice 12
Family-Centered Practice Implementation 22
Outcomes of Family-Centered Practices Implementation 22
Factors Influencing Family-Centered Practice Implementation 26
Challenges in Family-Centered Practice Implementation 32

III. METHODS 35

Research Design 36
Phase I: Quantitative Methods 37
Phase II: Qualitative Methods 37
Research Sites 38
Participants 39
Experience Working with Families 42
Currently Serving Children with Disabilities of Latino Heritage 43
Measures 43
Teacher Survey 43
Teacher Interviews 46
Measures Reliability 47
Procedures 48
Phase I 48
Phase II 48

Analysis....49
Quantitative Data....49
Qualitative Data....51

IV. RESULTS....52

Quantitative Results....53
Total Survey Results....53
Educational Level....60
Licensure Type....63
Years in Current Position....65
Years Teaching....66
Professional Development....66
Experience Working with Families....66
Currently Serving Children with Disabilities of Latino Heritage....67
Qualitative Results....68
Themes....68
Summary....98

V. DISCUSSION....100

Family-Centered Practice Implementation....101
Implementation across the Six Family-Centered Practice Areas....101
Factors Influencing Family-Centered Implementation....109
Influence of Professional and Cultural Factors....113
Support, Needs, and Challenges....117
Diversity of Families of Latino Heritage and Their Young Children with Disabilities....118
Conclusions....119
Directions of Future Research....121
Limitations of the Study....122

REFERENCES....124

APPENDIX A. FAMILY-CENTERED PRACTICES PROFESSIONALS SURVEY....138

APPENDIX B. INTERVIEW QUESTIONS....143

APPENDIX C. FAMILY-CENTERED PRACTICE MATRIX....144

LIST OF TABLES

Page

Table 1. Distribution of Program Types by Research Sites (*N* = 39).....40

Table 2. Distribution of Participants by Research Sites (*N* = 44) 41

Table 3. Demographic Characteristics of the Participants (*N* = 44).....41

Table 4. Demographic Characteristics of the Participants in the Interviews (*N* = 10).....42

Table 5. Frequency Distribution of Number of Years' Experience (*N* = 35).....43

Table 6. Distribution of Participants Based on Number of Children of Latino Heritage with Disabilities Served (*N* = 44).....44

Table 7. Cronbach's Alpha Coefficients for the Subscales and Total Survey (*N* = 44) 47

Table 8. Means and Standard Deviations for the Six Subscales (*N* = 44).....54

Table 9. Means and Standard Deviations across Research Site and Type of Program.....57

Table 10. Means and Standard Deviations across Educational Levels for the Six Subscales.....61

Table 11. Means and Standard Deviations across Licensure Types (*N* = 29).....64

Table 12. Correlation between Number of Years of Experience Working with Families of Latino Heritage and FCPs Individual Items.....67

Table 13. Themes Identified on Cultural and Professional Factors, Supports, Needs, and Challenges 69

CHAPTER I

INTRODUCTION

Services provided to children with disabilities and their families expand over forty years of practice. For more than two decades, researchers in early childhood special education and early intervention have articulated the need for family-centered practices to achieve optimal family and child outcomes (Brorson, 2005; Bruder, 2010; Friend, Summers, & Turnbull, 2009; Murray & Mandell, 2006; Raspa et al., 2010). Studies show that children's disabilities may affect families as a whole, and that it is important for children's well-being and development to be served by professionals striving to establish collaborative partnerships with parents and family members (Turnbull, Turnbull, Erwin, Soodak, & Shogren, 2010; Wang & Brown, 2009). Collaboration between professionals and families allows teachers and specialists to access multiple perspectives and resources, and families to make informed decisions for their children (Friend & Cook, 2010; Olivos, 2009). To support this idea, legislative mandates and regulations place high emphasis on teacher-family partnerships and family-centered practice in regular and special education (Brorson, 2005; IDEA, 2004; NCLB, 2002). They enhanced the rights of the families to participate in planning and delivery of services for children with disabilities in natural environments, as well as the importance of professional sensitivity to individual family needs. For the 77% of English Language Learner (ELL) students speaking Spanish at home, the skill of being responsive to the families' unique needs is critical to support

family engagement for student and family outcomes (Hardin et al., 2010; Keller-Allen, 2006). However, authentic collaboration with culturally and linguistically diverse families is still difficult to achieve and sustain (Harry, 2008; Olivos, 2009).

Rationale for the Study

Supported by extensive research findings on the critical role and expertise families hold in their children's lives, federal law and regulations, as well as professional communities, expect early childhood programs to acknowledge the need of and the value of recommended practices, including the family-centered approach, service plans based on individual family needs, service delivery in natural environments, collaboration between teachers, specialists and families, and interagency collaboration (Bruder, 2010; Bruder & Dunst, 2005; Mandell & Murray, 2009; Rodger, Keen, Braithwaite, & Cook, 2008). Collaborative partnerships with families within a family-centered approach are not only recommended practice, but also constitute a quality and effectiveness indicator for programs serving families of young children with disabilities (Hebeller et al., 2007; Murray & Mandell, 2006). For these families, delivery of family-centered services in natural and inclusive environments is critical to achieve coherence and natural life evolving as part of family and child outcomes (Brorson, 2005). Moreover, the nature and quality of personnel preparation and professional development seems to increase the emphasis on evidence- based practices, including those for supporting family engagement (Pretti-Frontczak, Giallourakis, Janas, & Hayes, 2002; Rodger et al., 2008).

Families from culturally and linguistically diverse backgrounds represent an increasing proportion among the families of young children with special needs served

under the Part C and Part B programs (U.S. Department of Education, 2009). In fall 2008, 25.44% of the children birth through 2 years old and 3 years old or older served under Part C, and 19.74% of the children 3 to 5 years old served under the Part B were of Latino heritage (U.S. Department of Education, 2009). For these families, family-centered practices are significantly important to create meaningful ways for parent engagement in specialized services. Families of Latino heritage who have a child with disabilities use their cultural capital to conceptualize disability and establish the ways to relate to the education system serving their children (Olivos, 2009). As Olivos (2009) notes, the extent of their experience with the education and care services in the United States, their experiences in their home countries, as well as the extent of time living in the United States prior to accessing educational and care services, are factors that can mediate the ways families of Latino heritage experience partnerships with teachers and school professionals. However, communication gaps between professionals and families, mismatches in the understanding and views on disability or education processes, and overall cultural misunderstandings create significant barriers in establishing effective partnerships (Harry, 1992, 2008; Harry, Allen, & McLaughlin, 1995; Withrow, 2008).

The key indicators for efficacy of services for young children with disabilities translated into family outcomes are mainly viewed as: (a) the families' understanding of their children's strengths, abilities, and needs; (b) understanding of children's and parents' rights, abilities to advocate for their children, as well as to help children's development and learning; and (c) the amount of support systems available for families

and their access to services and activities in the community (Bailey et al., 2006; Hebbeler et al., 2007; Olmsted et al., 2010; Raspa et al., 2010).

However, despite the emphasis on cultural competence and strategies in teacher preparation and professional development programs, these efforts often times do not seem to translate directly into positive outcomes for diverse families. Unlike majority group families, families from culturally and linguistically diverse backgrounds report less satisfaction with family and child outcomes resulting from early intervention services (Olmsted et al., 2010). The rationale in conducting this study was based on the need to have a better understanding on how professionals are addressing needs of families from Latino heritage, and what are their needs of support to fulfill this task.

Research Problem

Research on evidence-based practices implemented throughout the family-centered approach indicates that these practices' efficacy is directly related to a series of outcomes for the families and the child. Family outcomes could be defined in relation to family well-being, family adaptation, family functioning and family's quality of life (Turnbull, Summers, Lee, & Kyzar, 2007). More specific for educational services, they can be translated in the degree to which families gain a sense of control and decision making power, the degree of their understanding of the strengths and needs of their children and family as a unit, their gained abilities to advocate for and to help their children (Bailey et al., 2006; Olmsted et al., 2010).

However, professionals committed to implementing family-centered practices for young children with disabilities and their families face many challenges in achieving this

goal (Fleming, Sawyer, & Campbell, 2011; Murray & Mandell, 2006). Either at the service planning, delivery, or personnel preparation levels, family-centered practice seems to be a difficult component to be incorporated in the practice. The challenges in effectively serving families of young children with disabilities are related not only to the increased heterogeneity of families and children's needs, but also to the complexities of service systems, or the inconsistent availability of resources (Bruder, 2010).

Cultural competence is a particularly important component for establishing collaborative partnerships with families of Latino heritage through family-centered practice implementation. Research indicates that English language proficiency influences the needs and level of support families report to receive (Olmsted et al., 2010; Withrow, 2008). Families who are proficient in a language other than English report significantly lower scores for understanding their child development, knowledge on the services for children with special needs and their families, their perceptions on their abilities to help the child learn and develop, as well as knowledge on how to access help and resources (Olmsted et al., 2010). Yet, the number of studies exploring the experiences and challenges for early childhood educators and specialists in implementing family-centered practices with families of Latino heritage is limited. Although there have been studies investigating diverse families' experiences with special education services (Guiberson, 2009; Harry, 2008; Withrow, 2008) and influential factors (Bailey et al., 2006; Bruder, 2010; Buysse, Castro, West, & Skinner, 2005; Dempsey & Keen, 2008), there is a need for investigating to what degree family-centered practice is implemented, and the

professionals' and families' experiences and recommendations at this level (Wright, Hiebert-Murphy, & Trute, 2010).

Purpose of the Study

As the value of family-centered approach has become widely recognized by the research community, legislators and professionals, teacher preparation and professional development programs aim to prepare early educators and specialists in establishing collaborative partnerships with families and emphasize family-centered beliefs and practices as their core components (Summers et al., 2005). To explore and validate their findings on ways to improve early childhood services, researchers in the field are focusing on designing valid and reliable instruments to help understand ways of improving practices that facilitate meaningful parent engagement.

The purpose of this study was to examine the degree to which early childhood educators report to implement family-centered practices with families of Latino heritage who have young children with disabilities. In addition, this research investigated factors that may influence implementation of these kinds of practices, such as education and access to professional development opportunities and experiences in the field. In addition, the study examined influences of cultural factors at the family-centered practice implementation level. Finally, this study explored the sources of support, the challenges and needs related to implementation from the viewpoint of early childhood teachers. To better understand these aspects, quantitative and qualitative methods were used to explore the degree of implementation, as well as the influence of the above-mentioned variables on the implementation of family-centered practice.

To explore the family-centered practice implementation, the construct has been operationalized into six areas of practice that: (a) focus on family as a unit; (b) utilize and support strengths of the families; (c) support families' sense of empowerment; (d) are individualized to the unique needs of the families; (e) reflect collaborative approaches; and (f) utilize and reflect the community and the cultural group of the families.

Theoretical Framework

Research on family-centered practices offers with a variety of definitions, most of them capturing essential characteristics that include respectful and dignifying relationships between professionals and families, meaningful information sharing and family informed choice for establishing collaborative partnerships, strengths-based and individualized service planning (Dunst, 2002; Dunst, Trivette, & Hamby, 2007). Family-centered practices are flexible and individualized ways of addressing family needs, requiring effective communication skills from professionals, and collaboration with families. Bruder and Dunst (2005) summarized family-centered approach as based on practices that treat families with dignity, respect, sensitivity to the cultural diversity of the family, information sharing with families so they can make informed choices, providing families with information and access to a variety of resources, as well as empowering them through help-giving practices. Essentially, family-centered approach is considered to support family participation in all aspects of service for their children, in a way in which families are equal partners, with shared power, rights and responsibilities (Dunst, 2002).

Four main principles guide the family-centered approach. The first one states that it is the family, and not the professionals, who is the constant in a child's life, and that professionals need to recognize the central and life-long role parents and family members have in a child's life (Bruder, 2010; Gallagher, Rhodes, & Darling, 2004). Therefore, the second principle follows with the family being the best and in most appropriate position to determine the needs and well-being of the child. The third principle states that given the family's central role and expertise, professionals can best help the child by helping the family and understanding its context. Finally, the forth principle places family choice and respect and recognition for its strengths in the center of the decision making process as a priority for professionals serving young children and their families (Dunst, 2002).

For the purpose of this research, the following main conceptual areas of family-centered practices will be addressed in relation to the experiences and perceptions of families and educators: (a) focusing on the family as a unit as a characteristic of service planning and practices (Dempsey & Keen, 2008); (b) strengths-based strategies in family-centered practice (Dunst, 2002; Trivette, Dunst, & Hamby, 2010); (c) empowerment of the families (Dempsey & Dunst, 2004; Olmsted et al., 2010); (d) the collaborative approaches in family-centered practice (Turnbull et al., 2010); (e) practices individualized to the family needs (Kaczmarek, Goldstein, Florey, Carter, & Cannon, 2004); and (f) the ecological approach utilizing and reflecting the communities and cultural groups of families (Bailey et al., 2006; Swick & Williams, 2006). These areas will be explored in detail in the following chapter focused on the review of the literature on family-centered practices.

CHAPTER II

REVIEW OF THE LITERATURE

Theoretical Perspectives

The ecological approach for human development views child development as an interaction between environmental and human factors of interrelated systems, exerting directly or indirectly a universe of influences (Bruder, 2010; Swick & Williams, 2006). Culture is one of the most important systems within which child development occurs (Lee & Johnson, 2007).

Greenfield, Keller, Fuligni, and Maynard (2003) define culture as a socially interactive process of construction that incorporates as the main components shared activity, such as cultural practices, and shared meaning, such as cultural interpretations. They view these components as essentially cumulative, occurring between, as well as within generations. Moreover, the shared activities and the meanings are not only cumulative, but they also transform across individual life cycles and historical times between generations (Greenfield et al., 2003). Culture is an inherent part of the education, and as children are socialized, due to the variations across stakeholders involved in the process, the family and societal values may be reinforced or challenged (Souto-Manning, 2009).

The ecological view supports the family-centered approach in early childhood education, as it provides an inclusive understating of all systems in which families and

children within them develop, as well as their functional dynamics (Swick & Williams, 2006). Therefore, the early childhood service delivery reflecting a family-centered framework, specifically for families with young children with special needs, addresses the needs of the families to create the necessary support for them to build capacity and support the individualized needs of their children. The emphasis on the importance of family-centered practices for child development that take into account an ecological perspective builds on the finding that supporting families to address their needs and decreasing the amount of stressors in families' lives will reflect on their abilities to help children develop and learn (Swick & Williams, 2006). Acknowledging and valuing the resources and expertise families have, and providing access to additional supports builds on the parents' roles and ensures benefits for children's development and family well-being.

Family-Centered Practice

The family-centered approach originates from the family empowerment and help-giving practice and research (Bruder, 2010; Dempsey & Keen, 2008, Dunst et al., 2007). The overall support for this philosophy relies on the literature indicating that practices based on these frameworks can improve family and child outcomes (Dunst et al., 2007). Also, the family-centered approach aligns with the family systems theory that recognizes the importance of child's appurtenance to a context of multiple, interconnected systems (Dempsey & Keen, 2008). The family systems paradigm forms the basis for the family-centered philosophy, and its framework has been developed for more than three decades

incorporating elements from several theoretical perspectives: family systems, family strengths, social supports and help giving practices (Trivette et al., 2010).

In 1988, Dunst, Trivette, and Deal published "Enabling and Empowering Families: Principles and Guidelines for Practice," which compiled key concepts of prior main research and practice, such as social systems, empowerment, family strengths, social support and help giving practices (Dunst & Trivette, 2009). The purpose of this publication was to offer professionals with a set of conceptual and operational principles to guide their work, enabling and empowering families of young children with special educational needs. They recommended that professionals recognize the importance and influence of the systems from which children and families take part, the need to include families' needs in the focus of interventions, to identify and build on family strengths, and use help-giving practices. Some of the principles of help-giving and capacity building practices recommended in their research findings included the need for positive and proactive help-giving to create a sense of caring and support, sensitivity and respect for the help receiver as the main decision maker, the need for commitment to build on the confidence and competencies of the help receiver, as well as the need for promotion of his/her active participation (Dunst & Trivette, 2009; Dunst et al., 2007).

The shift from a teacher or child-centered approach towards a family-centered one marks, essentially, the recognition of family strengths and needs, as well as the value placed on family empowerment for the benefit of the child and family outcomes. This shift towards family-centered approach is today clearly emphasized in Part C of the IDEA (2004), as well as in the recommendations of major professional organizations and

research communities (Bruder, 2010; Dunst, 2002; Harry, 2008; Sandall, Hemmeter, Smith, & McLean, 2005). Particularly important for programs' policies and procedures in designing their partnerships with families, the law emphasizes that goals and services for the families need to reflect the family needs, resources and cultural values (Harry, 2008). In Early Intervention, family-centered practices are reflected through strategies that reflect respect and dignity for the family and ensure meaningful participation in planning services for their children (Bruder, 2010; Dunst et al., 2007). Moreover, early intervention requires professionals to assess not only the child, but the family's needs as well (Brotherson et al., 2010). Service coordinators, in particular, are a critical component of a family-centered approach for families with young children with special educational needs. They are an integral part for the infant and toddler programs, though for the preschool children, they work within a centered-based approach within a rather child-focus (Kaczmarek, Goldstein, Florey, Carter & Cannon 2004).

Components of Family-Centered Practice

Although the extensive research on family-centered practices offers with a variety of definitions, most of them capture as essential characteristics: respectful and dignifying relationships between professionals and families, meaningful information sharing and family informed choice for establishing collaborative partnerships, and strengths based and individualized service planning (Dunst, 2002; Dunst et al., 2007).

Dunst, Trivette, and Deal's (Dunst et al., 2007) family systems model of intervention has as key elements *capacity-building help-giving practices*, *families' concerns and priorities*, as well as their *strengths*, and the importance of *social supports*

and resources (Trivette et al., 2010). Two dimensions of the help-giving practices are influencing the children and family outcomes: (a) relational practices, and (b) participatory practices (Dunst et al., 2007). Relational help-giving practices refer mainly to the professional practice skills, such as communication, warmth and empathy of professionals, whereas participatory help-giving practices refer mainly to individualized strategies that allow family choice and engagement (Dunst et al., 2007). When professionals implement strategies that incorporate particularly participatory practices, they help families build capacity and become their own change agents (Dunst, Boyd, Trivette, & Hamby, 2002).

Recent reviews of how family-centered approach is currently conceptualized indicates that focus on family as a unit, family choice, emphasis on strengths of the family, relationships between professionals and families and individualized practices and services seem to be common elements across various definitions (Epley, Summers, & Turnbull, 2010).

Focusing on family as a unit. The first principle guiding family-centered practice acknowledges the expertise and central roles families have in their children's life (Bruder, 2010; Gallagher et al., 2004). From an ecological perspective, influences exerted on the interconnected systems in which a child grows and develops will affect his/her development. Therefore, factors that influence the family, the immediate layer of environments for the child, will affect his/her development as well.

Attending to the family's needs and priorities seems to be a natural direction to take to support children within a family-centered approach. Programs striving to use

family-centered practices in serving young children and their families focus on the needs of the family as a whole (Hebbeler et al., 2007; Pang, 2010). Teachers and school professionals assist families in identifying their concerns, their needs and the goals they want to achieve. Indeed, research findings from the literature indicate that parents view effective family-centered services those that are organized around the needs of the families (Hiebert-Murphy, Trute, & Wright, 2011). Families of young children with disabilities receive services for their children through early intervention programs. Early intervention is guided by the family-centered philosophy as the fundamental idea of this service model, and it is designed to deliver services in natural environments to ensure family and child inclusion in daily activities, routines, and community (Bruder & Dunst, 2005). Although more satisfied with the services they receive for children than with the services focused on the families, studies indicate that EI programs lead to positive family outcomes, and that parents are generally happy with the support they receive (Hebbeler et al., 2007).

According to the literature, effective family-professional partnerships address the basic needs of the families for emotional support, information, economic security and safety (Turnbull et al., 2010). When any of these basic needs is not fulfilled, families could experience a sense of unbalance and stress. Considered more as an intervening variable than a family outcome, the levels of stress experienced by parents who receive services for their children seem often to vary depending on the degree to which professionals effectively implement family-centered practices (Dempsey & Keen, 2008). The fundamental emotional needs of the families seem to revolve around the need of

hope for their child and their family, the sense of urgency to provide interventions, feeling challenged by multiple issues and feeling overloaded (Brotherson et al., 2010; Turnbull et al., 2010). Brotherson et al. (2010) suggest that there is a direct relationship between the degree to which emotional needs of families and professionals are met in a partnership and their satisfaction with it. Moreover, families seem to be more likely than professionals to notice and experience the difficulties in implementing family-centered services (King et al., 2003). Therefore, addressing the needs of the family should be a priority for teachers and specialists working with young children with disabilities.

Strengths-based approach. Programs working with young children with disabilities and their families, such as early intervention programs, include in their goals to support and build on the strengths of the caregivers, such as parents or professionals, providing them with confidence and competencies to help young children's development (Dunst & Trivette, 2008).

Although the research findings are not consistent and do not necessarily indicate a direct connection between help giving practices in the family-centered approach and the families' perceptions of parental competence, some studies indicate that support for families may increase their sense of self-efficacy in care giving (Dempsey & Keen, 2008). As a result, families who have an increased sense of self-efficacy may report better outcomes for their children (Dunst et al., 2007). Literature on the topic also suggests that the satisfaction and the sense of empowerment of the families is directly influenced by the way in which professionals support families' meaningful engagement in the service delivery for their children with disabilities. Dunst and Dempsey (2007)

suggest in the findings of their study that a significant part of the variance in parents' perceptions of their own abilities to find support and resources may be explained by the variations in the professional-family partnering strategies professionals adopt. Assisting families to identify their strengths and ways to incorporate them in practice is one of the central components of family-centered practice. Moreover, professional organizations leading the field of early childhood special education and early intervention, such as the Division of Early Childhood of the Council of Exceptional Children, recommend professionals to create for families participatory experiences in which child and family strengths are used to promote families' sense of competence and confidence and to use practices that further build on the resources, knowledge and the expertise the families have (Sandall et al., 2005).

Empowering families. The purpose of collaboration between professionals and agencies serving young children and their families within a family-centered approach is fundamentally to ensure that families are served under a coherent plan that incorporates their needs and empowers them with a sense of competence and consistency in their lives and children's development (Bruder, 2010). As families are defining their own needs and choices, one of the most valuable aspects of collaborative partnerships with families is, indeed, the empowerment that allows parents to build their capacity as life-long advocates for their children with special needs, which should guide the interventions and service delivery planning (Minke & Anderson, 2005).

Dempsey and Dunst (2004) described empowerment as a process through which families have access to the knowledge, resources and the competencies that provide them

with a sense of control on their lives and helps them improve their life quality. Essentially, empowerment is viewed as a multidimensional construct capable of change that includes elements of self-efficacy, collaboration, participation-based approach, access to resources and being proactively engaged (Dempsey & Dunst, 2004). The degree to which families feel comfortable, they are able to participate or they experience a sense of autonomy reflects the degree to which they feel empowered in the relationship with the professionals and their own family needs (Dempsey & Dunst, 2004). However, although the level of comfort experienced by the families in the relationship with the professionals may be relatively consistent, it is the level of parent engagement that is the constant in the services with high indicators of family centeredness (Dempsey & Keen, 2008; Dunst et al., 2002).

Research findings suggest a strong connection between the help giving practices within the family-centered approach and the families' sense of empowerment (Dempsey & Dunst, 2004; Dempsey & Keen, 2008). Family-centered help-giving practices are considered to be related to the perceptions of self-efficacy, as well as parent and family functioning, particularly when the outcomes are proximal to the help-giving practices' focus (Dunst et al., 2007). In their meta-analysis, Trivette et al. (2010) investigated the parents' beliefs on the support they have received from help-giving professionals, as well as parents' beliefs in their abilities to control outcomes. Findings confirm that help-giving practices relate to the parents' perceptions of their self-efficacy, and family strengths tend to be associated with family well-being (Trivette et al., 2010). The four components are associated with the parents' perceptions of parenting competence and their confidence in

their parenting skills and outcomes. Literature suggests that providing families with multiple options and supporting them in learning self-help skills and advocacy helps families feel empowered (Kaczmarek, Goldstein, Florey, Carter & Cannon 2004). In addition, acknowledging families as the main decision makers and sharing information to allow opportunities for informed decision making helps families to further support their children.

Collaborative practices. Collaborative practices are core components in family-centered approach (Dempsey & Keen, 2008; Epley et al., 2010; Espe-Sherwindt, 2008; Keen, 2007). Establishing respectful and dignifying relationship with families, developing effective communication between professionals and families, and establishing an optimal level of trust are some of the main characteristics of collaborative practices for working with families who have young children with disabilities (Dunst, 2002; Dunst et al., 2007; Turnbull et al., 2010). Moreover, sharing complete and accurate information with families and building on relationships that are sensitive to the cultural and linguistic background of the families are well established recommended practices for early educators working with young children with disabilities and their families (Murray et al., 2007; Sandall et al., 2005). As a result, families' perceptions on the degree of the family-centeredness of services, their satisfaction with the services, and the level of their emotional well-being as an outcome reflect the ways professionals collaborate with parents (Dempsey & Keen, 2008; King et al., 2009). Literature findings suggest that collaboration between professionals and families influences parents' sense of self-efficacy (Dempsey & Keen, 2008). Moreover, implementing collaborative practices by

creating meaningful opportunities for family engagement seems to create the avenue for families' capacity building (Dempsey & Dunst, 2004).

Individualized practices. Professionals implementing family-centered practices are sensitive to specific needs of the families. They connect families to resources that are relevant for the families' needs and facilitate parent access sources of support that match the families' priorities and cultural values (Kaczmarek, Goldstein, Florey, Carter & Cannon 2004; Sandall et al., 2005). Programs and early educators can support families' individualized needs by employing participatory practices reflecting flexibility and sensitivity to family's life and circumstances (Dunst et al., 2007). More specifically, family-centered early educators motivated to meet the needs of each family will learn about the particular vision parents or caregivers have for their child and their family, their hopes and dreams, the characteristic and ways of functioning of the families, as well as their strengths and needs (Hiebert-Murphy et al., 2011; Murray et al., 2007; Turnbull et al., 2010).

Ecological approach. Communities and cultural groups to which families can relate play a critical role in their lives. They can not only provide families social support and access to resources, but they can create for families opportunities to attend to their needs of belonging with individuals and policies that share their values. Recommended practices for early educators working with young children with disabilities and their families are encouraged to identify and use resources in the families' communities, including formal and informal sources (Bailey et al., 2006; Hebbeler et al., 2007; Olmsted et al., 2010; Raspa et al., 2010; Sandall et al., 2005). Consistent with the

ecological perspective, professionals who acknowledge the influence and value of community in families' life can create for families opportunities to access programs and services in their communities (Swick, 2003; Swick & Williams, 2006). For families from culturally and linguistically diverse background these practices are highly needed, as parents or caregivers will search for and use their cultural and social capital to address their needs.

Diverse families. The number of diverse families with young children with disabilities served under the early intervention services is continually increasing (Bruder, 2010). The concern for serving this particular group of families is reflected in the federal and state regulations, as well as in the focus of personnel preparation and professional development programs for early childhood teachers and early interventionists (Murray et al., 2007). The concern is well justified, as research findings seem to indicate that race and ethnicity related factors seem to be associated with part of the variation in outcomes for families and children (Olmsted et al., 2010). Several research studies indicated that families from diverse backgrounds seem to report lower satisfaction with the early intervention services they received (Bailey et al., 2006; Dempsey & Keen, 2008). However, the help-giving practices seem to be a strong predictor for the empowerment diverse families may experience while working with professionals.

As approximately 80% of the families of Latino heritage indicate Spanish as the primary language at home, the emphasis on cultural competence becomes a critical component of the services for families. Indeed, research indicates that English language

proficiency influences the needs and level of support families perceive they are receiving (Olmsted et al., 2010).

Recent research investigating parents' perceptions on family and child outcomes and their perceptions of programs features, indicated that families who are proficient in mainly Spanish reported significantly lower rating in understanding their child's development, knowledge on the services for children with special needs and their families, their perceptions on their abilities to help the child learn and develop, as well as knowledge on how to access help and resources (Hebbeler et al., 2007; Olmsted et al., 2010). Moreover, in a recent research study conducted by Olmsted et al. (2010), families of Latino heritage who completed surveys in Spanish reported lower scores on their perceptions on how helpful programs were in communicating their needs, know their rights and support their child's learning and development. The same research indicates there is a connection between the families' perceptions of their knowledge on children's needs and strengths, their children's rights and the services available, and their perceptions on their abilities to help the children learn and develop. Also, the availability of services and families' access of community resources, as well as family income levels seem to influence families' perceptions on family-centeredness of the services they received (Olmsted et al., 2010). These research findings indicate that the needs of non-English speaking families may be different from the needs of English speaking families due to services' functional challenges, but also due to differences in demographics, values and beliefs across cultures. Therefore, it is recommended that implementing

culturally sensitive family-centered practices should be a priority for programs working with families from diverse backgrounds.

Though literature findings describing the needs and challenges of families from culturally and linguistically diverse backgrounds offer with strong support for culturally sensitive practices, the need for exploration of the specific experiences diverse families have with school professionals is still a concern.

Family-Centered Practice Implementation

Outcomes of Family-Centered Practices Implementation

Although widely embraced in early childhood education, the support of evidence for a direct connection between family-centered approach and specific positive outcomes for families is still explored to build on the evidence-based practices base (Dempsey, Keen, Pennell, O'Reilly, & Neilands, 2009). Family outcomes are the direct consequence of the service delivery, and therefore, its quality has a direct influence on families' lives (Bailey et al., 2006). Research on evidence-based practices implemented throughout the family-centered approach indicates that their efficacy is directly related to a series of outcomes for the families and the child: the degree to which families gain a sense of control and decision making power, the degree to which they come to understand the strengths and needs of their children and family as a unit, their rights and their abilities to advocate for their children, families' abilities to help their children develop and learn, as well as families' access to support services and resources in the communities (Bailey et al., 2006; Olmsted et al., 2010).

Parent reports. Most of the research exploring implementation and outcomes of family-centered practices is based on parents' reports. Although with significant differences across reports on various types of services, as a general trend, findings indicate that oftentimes families are more satisfied with the services they receive for children than with services they receive for the family, and that oftentimes they perceive professionals as unable or unwilling to meet the needs of their children and family (Epley et al., 2010; Murray & Mandell, 2004; Raspa et al., 2010). Though programs may perceive that their family-centered philosophy is reflected through their service delivery, parents may not necessarily have the same perspective. Service delivery is indeed one of the key variables that compounds the information related to the effectiveness of family-centered practices (Raspa et al., 2010). Therefore, parent reports are critical to understand the effectiveness of the services delivered to young children and their families (Dempsey & Keen, 2008).

Satisfaction with received services. Families' satisfaction with support services seems to be a rather complex concept that requires a multidimensional assessment. Generally, it is agreed upon that satisfaction with services refers to the degree to which families perceive that their needs and their children's needs have been addressed and that the value in having an accurate understanding of this aspect allows professionals to provide families with increased decision making control, evaluate and improve services, encourage parent engagement and exhibit service effectiveness (Rodger et al., 2008). Families' level of satisfaction seems to be strongly connected to the organizations' degree of family centeredness culture, the behaviors of service providers, as well as the manner

in which they communicate and share information on the available services (Dempsey & Keen, 2008; Law et al., 2003, 2005; Rodger et al., 2008).

Child outcomes. Research findings suggest that family-centered practices are widely used with families of young children and that parents of children at this age group and who have special educational needs are generally more satisfied with special education services, in comparison to parents with school age children with disabilities (Dunst, 2002). Federal and state regulations require professionals working with families of young children with disabilities to ensure the delivery of educational and special services in natural environments, such as home or family relevant contexts, and to embed them within the family routines (Dunst, 2002). Consequently, it is critical that the planning and the delivery of services reflect the nature of the unique development of young children, and the integrated developmental and behavioral areas through a transdisciplinary structure and collaborative approach (Bruder, 2010; Bruder & Dunst, 2005).

For young children of Latino heritage, the initial contact with the new culture in the early childhood settings is critical, as it may be creating the avenues for success or failure in their educational journey. Children of Latino heritage are the fastest growing minority in the U.S. (Olivos, 2009; Souto-Manning, 2009). At the same time, they seem to be less likely to be enrolled in early childhood education and care programs when compared to any other racial or ethnical group (NCES, 2006; Souto-Manning, 2009). However, the number of children of Latino heritage enrolled in early childhood programs has been recently growing, especially in Head Start programs. For instance, in 2004,

Head Start programs enrolled 28% more children of Latino heritage compared to childcare programs, Part B-Section 619 preschool programs and Part C infant-toddler programs for children with disabilities or at-risk conditions (Buysse, Castro, West, & Skinner, 2004).

Family-centered approaches' influence on child development and outcomes for children is mediated by their effect on parents' efficacy skills (Dempsey & Keen, 2008; Trivette et al., 2010). However, in what ways and to what degree parent emotional being, age of the child, disability or behavior difficulties influence each other is still an area that needs to be explored more thoroughly. Perhaps the most consistent, yet to be expected, relationship research documents is the influence of caregivers' emotional well-being on the child behavioral indicators (Dempsey & Keen, 2008). Moreover, this relationship may be determined by the way professional help-givers and families collaborate. In their review of the research on family-centered help giving practices, Dunst et al. (2007) found that professionals' perceptions on how they interact with families and children, may influence the judgments on their own behavior. Therefore, it is critical that teacher education programs strive to prepare competent, self-reflective teachers (Withrow, 2008).

Mediating factors in family-centered practices outcomes. Challenges in the field for coordinating and streaming the components and agents providing family-centered practices as reported by both professionals and families (Brotherson et al., 2010). Among the main difficulties in implementing family-centered practices identified by professionals willing to incorporate them in their practice are workload difficulties, differences in belief systems, language barriers, lack of preparation in family-centered

practices and lack of a supporting organization culture and clearly established policies on the procedures of delivering family-centered services (Hansuvadha, 2006; Murray & Mandell, 2006). As Murray and Mandell (2006) note, the most concerning aspect of this situation is that is not only a lack of knowledge and embracing of family-centered approach, but also an impediment for those professionals trained and willing to practice this philosophy.

Family-centered practice is still developing and one of the main needs in the area is building on the basis of evidence-based practices through further research on the processes and outcomes involved in this approach (Dempsey & Keen, 2008). In their review on the topic, Dempsey and Keen (2008) found significant differences between the rating of parents and those of professionals on family centeredness throughout service delivery processes. Moreover, differences between parents rating are reported just as often, which suggests that the heterogeneity of families and their needs require multiple sources of exploration.

Factors Influencing Family-Centered Practice Implementation

One challenge in providing family-centered services is professionals' needs in understanding and reflecting families' views and values, different from their own, in their practices and the services they deliver (Minke & Scott, 1995; Murray & Mandell, 2004). Because of their lack of prior experiences and training in implementing family-centered practices, teacher candidates use their own values and beliefs as a frame of reference working with families of young children. Research findings also suggest that professionals may be challenged in actually understanding family-centered philosophy

and how it should translate into practice (Murray & Mandell, 2004). In addition, there seems to be a disconnection between the beliefs professionals have on family-centered practices and the way they are actually implemented, as well as a gap between what professionals know they need to do and what they put in practice (Brorson, 2005; Bruder, 2010). These findings are rather discouraging, as research in the field suggests that there may be a direct and potentially causal relationship between the relational variables of family-centered practice and the level of stress families experience (Dempsey et al., 2009). Moreover, early research exploring family support literature suggested that as far as families' perceptions of the support they receive, it may be essential how the help-giving practices are implemented (Dempsey & Dunst, 2004).

Oftentimes, professionals are challenged in their relational practices by tendencies to prevent family's own choice of timing and tendencies to control, to use professional jargon, or to miss the point of family-centered practice in empowering families, and not creating co-dependencies (Espe-Sherwindt, 2008). These findings are not to overshadow the importance of participatory practices in family-centered approach, as they are considered the main function for variation of the outcomes, but only to emphasize the value and need for professional preparation in creating the relational basis for working with families (Dunst et al., 2002).

In their research on the influence of a family-centered practices model on graduates' practice as beginning professionals, Murray and Mandell (2004) found that incorporating a family-centered practices model within their candidates' preparation helped future teachers change their beliefs and attitudes about working with a variety of

families of young children with disabilities, as over 70% of the teacher candidates changed their beliefs about working with diverse families. Also, providing candidates with multiple opportunities to work with families and linking these experiences with seminars helped preservice teachers to better understand the family-centered practices and to build on their confidence and competence in utilizing them. Teachers constantly revise their perceptions on roles and past experiences as repetitive experiences with families occur, and therefore the importance of reflection skills on communication and field experiences should be a priority in personnel preparation (Connelly, 2007).

The role of professionals' perceptions, beliefs and value systems. Early childhood professionals working with families with young children with special needs deliver services for children and families in their home environments. They work directly with the parents or the caregivers, establishing close reports and gaining insights to critical needs of families, and providing them with strategies aimed to enhance their confidence and competencies for teaching their child (Campbell & Sawyer, 2007; Salisbury, Woods, & Copeland, 2009; Woods, Kashinath, & Goldstein, 2004). However, the ways in which professionals implement recommended practices, such as family-centered ones, depend greatly on their personal characteristics, the work settings or culture of their organization, or their beliefs and value systems (Campbell & Sawyer, 2009). Although exploring a direct connection between professionals' beliefs and practice implementation may be a difficult task, it should be viewed as a priority. Findings on professionals' beliefs indicate that when they are in alignment with the practices they implement, the probability for these practices to be implemented with

fidelity is significantly higher comparing to the instances when practices are incompatible with professionals' views and beliefs, even when they are recommended, evidence-based practices (Campbell & Sawyer, 2009). Moreover, research suggests that when providers' values and beliefs conflicted with recommended practices, such as family-centered approach or delivery of services in natural environments, they still characterized their practice as family-centered (Campbell & Halbert, 2002; Campbell & Sawyer, 2009; Salisbury et al., 2009). However, professionals implementing family-centered practices recognize parent engagement as a strength in their collaboration with families. Unlike professionals who tend to implement traditional, child-centered practices and plan their work for only working directly with the child, professionals who implement family-centered practices plan their work based on teaching the family to work with the child, and therefore employing participatory practices (Fleming, Sawyer, & Campbell, 2011). Moreover, professionals who implement family-centered practices tend to see their role as focused on family life and activities, but also acknowledge the importance of family participation and use of recommended practices. They understand their role as facilitators and helping the family ensure that the child participates in all family routines.

In their study focusing on understanding the relationship between family-centered personnel preparation and on the job practice implementation, Murray and Mandell (2006) found that professionals who embrace family-centered philosophy described its practices as directly related to attitudes and skills. More specifically, they believed that families have the best knowledge of their children's needs and that when working with families, a strengths-based approach should be employed. They viewed

their role as primarily focused on using their professional skills to promote partnerships with families, such as providing with information to help families make informed decisions.

Factors influencing professionals' views on family-centered practices. Recent research findings indicated that when asked what contributes to the changes in how they see their roles in working with families, early childhood professionals considered as critical factors the culture of the professional organization as a learning community, the administrative support for providing opportunities for reflective practice and problem solving, and meaningful feedback (Salisbury et al., 2009). Also, when professionals are given training and practice opportunities for family-centered practices, as well as individualized and team support is provided, changes in their perceptions on family-centered approach and the role of families occur, and they become more confident on their practice. These findings are very important, as the literature on the systems change suggests that for durable, system level change to occur, changes at the individual level in attitudes and practices need to take place (Salisbury et al., 2009).

In their research on practices supporting parent engagement, Summers et al. (2005) asked early interventionists to describe their roles and define family-focused approach. According to their findings, early interventionists embracing a participation-focused approach viewed parent involvement and providing families with the tools to help their children as the priority of their professional role (Summers et al., 2005).

Administrative structures: Influence of their understanding of family-centered practices. Brotherson et al. (2010) defined the administrative structures as the

leadership and vision within an agency, its organizational climate and resources. They shape the culture within each organization and the policies and procedures to be implemented. In a recent study on administrators' understanding and use of family-centered practices, Murray and Mandell (2009) found that there are clear differences in the perceptions the administrators participating in their study had on their roles, and services delivery according to their understanding on family-centered services. Administrators with a comprehensive understanding of family-centered philosophy were more inclined to create opportunities for families to participate in organizations' functioning, and to provide with meaningful training opportunities. They also tended to acknowledge the importance of family support for all families, and not only families from socio-economic diverse backgrounds. However, regardless of their level of understanding of family-centered practices, they all viewed early experiences during their jobs as a critical factor in determining their views on partnerships with families.

Recent research confirms that administrative practices such as policies towards professional competence influences parent-professional collaboration (Brotherson et al., 2010). Recent research findings suggest that administrators who have a strong belief system and a deep understating of family-centered practices tend to recognize the key role they play in helping families (Mandell & Murray, 2009). They seem to be more inclined to support staff and family members to master the skills to sustain collaborative partnerships and sharing a vision for children. In their study on the implementation of family-centered practices, Murray and Mandell (2006) found that early childhood special education professionals meet significant barriers in implementing family-centered

practices, such as lack of support from administrative structures and colleagues, and that they have to find creative ways to use such practices in environments with administrative structures that are conflicting with their values and practices. The findings of their study also indicated that although professionals were implementing family-centered practices when working with families and children, they would not advocate for changes at the system level, but rather avoid issues related to the topic and minimize the family-centered approach they were using in their interactions with colleagues or administration representatives known for their conflicting views (Murray & Mandell, 2004). Early educators participating in the same study indicated administrators' understanding of policy for family-centered practices as primarily focused on adhering to the policy regulations, such as IEP and IFSP regulations, and on avoiding litigious situations, and not on the underlying values of professional-family partnerships of these processes. Unfortunately, administrators are expected to develop guiding program policies on family participation regardless of previous training on family-centered practice (Murray & Mandell, 2006).

Challenges in Family-Centered Practice Implementation

Family-centered practices are flexible and individualized ways of addressing family needs, requiring effective communication skills from professionals, and collaborating with families. Bruder and Dunst (2005) summarized family-centered approach as based on practices that treat families with dignity, respect, sensitivity to the cultural diversity of the family, information sharing with families so they can make informed choices, providing families with information and access to a variety of

resources, as well as empowering them through help-giving practices. Essentially, family-focused approach is considered to support family participation in all aspects of service for their children, in a way in which families are equal partners, with shared power, rights and responsibilities (Dunst, 2002).

Teacher preparation programs are focusing their efforts to align with education law requirements and literature recommendations to support their candidates to become family-centered practitioners (Bruder & Dunst, 2005; Murray & Mandell, 2005). However, research documents significant challenges at the implementation level of the model. In a recent study including 19 universities that infuse family-centered practices in their teacher preparation programs, Sewell (2007) found that although teacher candidates would generally receive information on child development, partnering with families, cultural sensitive practices and effective communication skills, they do not always receive much information on strategies for providing families with information on parent rights, service options and family engagement in designing service plans. As research findings also suggest that education professionals who implement family-centered services help families make decisions by providing them with information and resources, emotional support and access to culturally sensitive services based on their individualized needs, it is critical that teacher education programs adjust this need to help professionals be effective in their practice (Kaczmarek et al., 2004).

Lack of collaboration and team approach at system and individual level. The advantages of the transdisciplinary collaboration are enhancing of service coordination, the reduction of fragmentation between the services delivered to the child and the family,

as well as decreasing of conflicting or confusing communication between professionals and families (King et al., 2009). However, research studies suggest that professionals' challenges with the collaboration skills, teaming and help-giving practices, necessary to sustain high quality partnerships with families, prevent them from implementing practices sensitive to the needs of the families (Murray & Mandell, 2004). In addition, lack of coordination at various administrative levels prevents families from receiving services focused on their needs. For instance, though screening and referral provide some of the main opportunities for transdisciplinary collaboration, there is not yet a national agreement on eligibility criteria and involved processes (Bruder, 2010). Findings on personnel preparation programs in various early intervention related disciplines suggest most of the programs place low or no emphasis on service coordination training (Bruder & Dunst, 2005).

CHAPTER III

METHODS

Early childhood teachers and specialists working with families of young children with and without disabilities are encouraged to address the needs of children and families in a family-centered approach (Bruder, 2010; Sandall et al., 2005). However, teachers and specialists are challenged in this responsibility at multiple levels: preparation, implementation, accessibility to resources, and delivery systems (Brorson, 2005; Murray & Mandell, 2006). Family reports confirm challenges in having their needs being met (Dempsey & Keen, 2008; Murray & Mandell, 2004). Moreover, families from culturally and linguistically diverse backgrounds report lower rates of satisfaction with services they receive in comparison with families from majority groups (Hardin, Mereoiu, Hung, & Roach-Scott, 2009; Harry, 2008; Olmsted et al., 2010). Challenges in serving families from diverse backgrounds is a critical aspect to be addressed, as demographics clearly indicate growing numbers of children from culturally and linguistically diverse families enrolled in American schools (U.S. Census Bureau, 2008).

The purpose of this research study was to explore the implementation of family-centered practices in preschool programs as reported by early childhood teachers working with young children with disabilities of Latino heritage. The study also investigated teachers' views on sources of effective support for early childhood teachers working with families of Latino heritage, challenges and needs, and strategies to address them. Teacher

educators and administrators need a clear understanding of the main factors that influence the degree to which they serve families within a family-centered approach.

Research Design

A mixed methods design, including a teacher survey and interviews, was used to explore the proposed research questions. The purpose of the mixed methods design in this research was to use quantitative and qualitative methods to explore teachers' viewpoints regarding family-centered practice, especially as it relates to implementation, potential influences of cultural background and professional preparation. The mixed methods were also employed to investigate supports, challenges, and needs from teachers' perspectives in regards to family-centered practices.

In social sciences, a mixed methods approach is considered a legitimate stand-alone research design (Creswell, 2003; Hanson, Creswell, Plano Clark, Petska, & Creswell, 2005), particularly for the types of dynamics and contextual research attached to the field of studies related to families (Clark et al., 2008). The type of design used in this study was fully mixed methods, using qualitative and quantitative research at the following levels: (a) the research objectives; (b) the type of data and procedures; and (c) the type of analyses (Leech & Onwuegbuzie, 2009). Using Leech and Onwuegbuzie's typology (2009), this study is described within the following criteria: (a) fully mixed methods (level of mixing); (b) sequential mixing (time orientation); and (c) dominant status of the quantitative over the qualitative part (emphasis of approaches). In addition, this study used a sequential explanatory strategy, meaning that the quantitative data collection was followed by collection and analysis of the qualitative data. Data were

collected in two phases: (a) a teacher survey in the first phase; and (b) semi-structured interviews conducted with a subsample of the survey participants in the second phase (Creswell, 2003).

Phase I: Quantitative Methods

Quantitative data were collected using a teacher survey comprised of 23 questions. The research questions for Phase I were:

1. To what extent is family-centered practice reported to be employed by early childhood teachers in the six investigated areas of (a) family-focused practices, (b) strengths-based practices, (c) family empowerment practices; (d) collaborative practices, (e) individualized practices, and (e) ecological practices?
2. Do factors such as educational level, professional development, previous experience of working with families from Latino heritage, or professional experience influence the extent to which teachers implement family-centered practices?

Phase II: Qualitative Methods

Qualitative data were collected with semi-structured interviews and one survey open-ended question. The qualitative data provided greater depth in understanding participants' perspectives of their experiences with family-centered practice implementation and a better understanding of the quantitative data collected through the surveys (Creswell, 2003; Hanson et al., 2005). The qualitative data allowed participants to determine their own frame of reference for the investigated areas, while the survey

ratings were used for empirical generalizability (Di Pofi, 2001; Vitale, Armenakis, & Field, 2008).

The research questions for the second phase of the study were:

1. What are teachers' perceptions of the ways their cultural and professional background influences the extent to which they implement family-centered practices?
2. What are teachers' perceptions of the main needs, challenges, and support sources in implementing FCPs when working with families of Latino heritage and their children?

Research Sites

The research sites for this project were three counties in North Carolina. These counties were selected because of a representative amount for the state proportion of their population of people of Latino heritage. All three sites were predominantly rural.

Site 1 has a total population of 162,878, according to U.S. Census estimate (2010), including 6.4 % children under five years old (U.S. Census Bureau, 2010). People of Latino heritage represented approximately 6.39% of the population (U.S. Census Bureau, 2010). Approximately 2,023 children ages three to five were estimated to be enrolled in preschool programs in Site 1 in 2007-2009, according to the American Community Survey (U.S. Census Bureau, 2010).

Site 2 was estimated to have a total population of 99,643 according to U.S. Census estimate (2010), including 6% children under the age of five. The population of Latino heritage represented 5.17 % of the county's population. The number of 1,337

children ages three to five were estimated to be enrolled in preschool programs in 2007-2009 (U.S. Census Bureau, 2010). The number of people of Latino heritage living in the second site has increased from 2000 to 2008 by almost 52% (U.S. Census Bureau, 2009).

Site 3 had an estimated total population of 38,713 according to U.S. Census estimate (2010), including 9.4% people of Latino heritage, an increase of almost 37.4% from 2000 to 2008 (U.S. Census, 2009). From the county's population, 6.5 % was included children under the age of five in 2009 (U.S. Census, 2010). Approximately 400 children ages three to five years old were enrolled in preschool programs in the 2007-2009 period (U.S. Census, 2010).

Participants

Participants in this study were early childhood teachers working with children age three to five, including children who have been diagnosed with a disability. A cross-section of types of programs was recruited to ensure that the group of participants was representative for the variety in early childhood teachers and families of children enrolled in the recruited programs. A total of 52 surveys have been collected. Eight surveys have been removed from the analysis as invalid or incomplete. The participants in this study represent the following types of programs: Head Start centers, private childcare centers, and public school pre-kindergarten programs.

More specifically, participants in this study ($N = 44$) represented a total of 17 pre-kindergarten classrooms in public elementary schools, 14 Head Start programs, and five private childcare programs. The distribution of programs across the three sites is presented in Table 1.

Table 1

Distribution of Program Types by Research Sites (N = 39)

	Site 1	Site 2	Site 3
Type of program	*n* (%)	*n* (%)	*n* (%)
Public pre-kindergarten	5 (50.00)	9 (47.36)	3 (30.00)
Head Start	2 (20.00)	9 (47.36)	3 (30.00)
Private Childcare	3 (30.00)	1 (5.26)	1 (10.00)
Total	10 (100.00)	19 (100.00)	10 (100.00)

From all participants (*N* = 44), 36 participants reported teaching in inclusive classrooms, four participants reported they were not teaching in an inclusive setting, and three did not report this information. The average class size was over 15 (*M* = 16.77, *SD* = 3.48). The distribution of participants across the research sites is presented in Table 2.

All participants (*N* = 44) in this study were female. All were born in United States. Except for one participant, whose native language was Spanish, all participants reported English as their first language. Two English-speaking participants reported they were fluent in Spanish also. One participant reported she was fluent in American Sign Language. The summary of the demographic characteristics of the participants are described in Table 3. Participants in the interviews were public pre-kindergarten teachers (*n* = 3), Head Start teachers (*n* = 5) and private childcare programs teachers (*n* = 2). Their ages ranged between 18 years old and over 46 years old, and were from diverse

race/ethnicity. The demographic characteristics of the participants in the interviews are presented in Table 4.

Table 2

Distribution of Participants by Research Sites (N = 44)

	Site 1	Site 2	Site 3
Type of participant	*n* (%)	*n* (%)	*n* (%)
Public pre-kindergarten	4 (28.57)	10 (47.62)	3 (33.33)
Head Start	4 (28.57)	10 (47.62)	5 (55.56)
Private Childcare	6 (42.86)	1 (4.76)	1 (11.11)
Total	14 (100.00)	21 (100.00)	9 (100.00)

Table 3

Demographic Characteristics of the Participants (N = 44)

Demographic Characteristic	*n* (%)
Race/Ethnicity	
African American	12 (27.27)
Hispanic Origin	2 (4.55)
Caucasian	30 (68.18)
Age range	
18-25 y/o	1 (2.27)
26-35 y/o	17 (38.64)
36-45 y/o	16 (36.36)
46+ y/o	10 (22.73)

Table 4

Demographic Characteristics of the Participants in the Interviews (N = 10)

Demographic Characteristic	*n*
Research Site	
Site 1	3
Site 2	3
Site 3	4
Program Type	
Public Pre-kindergarten	3
Head Start	5
Private Childcare	2
Age Range	
18-25	1
26-35	3
36-45	4
46+	2
Race/Ethnicity	
African American	2
Hispanic Origin	1
Caucasian	7

Experience Working with Families

Thirty-nine participants reported they had experience working with families of Latino heritage who have children with disabilities. Two participants reported they did not have experience with this population and three participants did not report this information. From all the participants (n = 39) who reported having experience working

with children with disabilities of Latino heritage and their families, four participants did not report the extent of the experience they had. Table 5 describes the variations in amount of experience reported by the 35 participants reporting this information.

Table 5

Frequency Distribution of Number of Years' Experience (N = 35)

Number of Years' Experience Teaching	*n*
1-5	14
6-12	15
13-18	5
19-24	0
25-30	1

Currently Serving Children with Disabilities of Latino Heritage

Twenty-eight participants reported they were currently serving young children with disabilities from Latino heritage, while 15 participants reported they were not currently serving any young children with disabilities from Latino heritage (see Table 6).

Measures

Teacher Survey

The teacher survey was used to better understand the implementation of family-centered practice with families from Latino heritage in the following six areas: (a) family focused practices; (b) strengths-based practices; (c) family empowerment practices; (d)

collaborative practices; (e) individualized practices; and (f) practices within an ecological approach (See Appendix A). The teacher survey was based on an extensive review of the literature focused on the conceptual basis and research findings related to family-centered practice (see Appendix C). The survey was piloted with a sample of early childhood teachers (n = 7) to establish face validity and revised according to the participants' feedback on the structure, clarity and appropriateness of items for the investigated topic.

Table 6

Distribution of Participants Based on Number of Children of Latino Heritage with Disabilities Served (N = 44)

Number of children	*n*
1	5
2	7
3	1
4	1
6	3
9	1

The teacher survey included a demographic section, a series of 23 items rating family-centered practice implementation, and an open-ended question (see Appendix A). The demographic form included collected information on: gender, age range, country of birth, race/ethnicity, first language, proficiencies in other languages, educational level, type of teacher licensure, years in the current position and years of teaching experience,

professional development opportunities, extent of experience and current status of working with families of Latino heritage currently serving and previous experience in this regard, type of program, type of program, classroom size and number of children of Latino heritage in classroom.

The content section of the survey contained a total of 24 items, 23 of which were distributed across the six areas as follows: (a) for family-focused practices three items; (b) for strengths-based practices four items; (c) for family empowerment practices five items; (d) for collaborative practices five items; (e) for individualized practices three items; and (f) for practices within an ecological approach three items. For the area of family-focused practices, teachers were asked to rate how often they used practices to assist families in identifying concerns and goals for the family and the child, as well as practices sensitive to the cultural background of families. For the area of strength-based practices, teachers were asked how often they implemented practices that helped families identify their strengths, use the families' strengths in planning services to address the children's needs, reflect their beliefs and values during collaborative practices and that built on the competence of the families. For the area of practices that empower families, teachers were asked how often they implemented practices that helped families be advocates for their children, to be the decision makers for the education of their children, to access and use information and resources. For the area of collaborative practices, teachers were asked to rate how often they implemented practices that sustained respectful relationships with families, were based on culturally sensitive ways of communication, reflected a purposeful effort to make sure families could understand and

make use the information they received, and reflected trust in the families as partners. For the area of individualized practices, the teachers were asked how often they implemented practices that addressed the unique needs of the families, relied on the vision of the family for the child and the characteristics of the families, and reflected the families' characteristics, values and beliefs in their practice. Finally, for the areas of practices within an ecological approach, teachers were asked to rate how often they implement practices that reflected the families' communities and were sensitive of families' needs to belong to them and use available resources. The participants reported the extent to which they implemented family-centered practices using a Likert scale (1 = never, 2 = rarely, 3 = sometimes, 4 = often, 5 = always, and N/A = not applicable).

The survey also included one open-ended question. The open-ended question asked participants to comment on what could help them better address the needs of families of Latino heritage.

Teacher Interviews

Semi-structured interviews were conducted with a subsample of ten teachers who participated in the survey. The purpose of the interviews was two-fold. The first objective of the interviews was to obtain clarifications on the survey ratings for each of the six areas of family-centered practice. For this purpose, participants were asked to comment on their answer choices on the survey of aspects of family-centered practice related to items that may have raised their interest. Second, the interview was used to explore if and how their cultural and professional background influenced the ways and frequency teachers implemented family-centered practice, and their views about the challenges, the

most effective supports, and current needs for making best use of family-centered practice (see Appendix B).

Measures Reliability

Survey. An analysis of the reliability of the instrument was conducted for the overall instrument and the subscales. Given that the survey measures multiple dimensions of the FCP as the core concept, coefficients for the distinct areas are particularly relevant. As shown in Table 7, the Cronbach's alpha coefficient ranges from .68 to .92, and .92 for the total scale indicating high internal consistency for the subscales and total survey.

Table 7

Cronbach's Alpha Coefficients for the Subscales and Total Survey (N = 44)

Subscale	Cronbach's Alpha Coefficient
Family-focused	.88
Strengths-based	.92
Empowering families	.71
Collaboration with families	.68
Individualized approach	.71
Ecological approach	.88
Total survey	.92

Interviews. Trustworthiness of the study was addressed in the following areas: (a) for subjectivity related concerns, two assistant researchers were invited to assist with the analysis of the qualitative data (Grace et al., 2008); and (b) for adequacy amount and

variety of data and data sources the study used a number of 10 participants in the interviews, which represents 22.7% of the entire sample.

Procedures

This study used a nonrandom approach to ensure that the sample of participants in the study were able to provide rich information on the topic. Head Start county coordinators, department of exceptional children of public school systems, and More at Four county coordinators in the three sites were contacted by phone to request permission and support in recruiting participants. Once permission was granted, public elementary schools with pre-kindergarten classes, Head Start centers and private childcare centers were contacted and asked for permission to invite teachers to participate in the study.

Phase I

During the first phase of the study, a survey was administered to teachers who agreed to participate in the study for each of the research sites. The recruitment criteria were for teachers to have experience or be currently working with preschool children of Latino heritage, including children with disabilities. The survey took approximately 20 minutes for participants to complete. Data was collected over a period of three months.

Phase II

Individual interviews were conducted with a subset of survey participants who were randomly selected to participate in an interview as a follow-up for the survey. The participants who agreed to participate in the interviews were compensated for their participation with a $25 gift card. Interviews were audio taped and conducted at the

location of choice for the participants, mostly in the classroom settings as their schedule allowed.

Analysis

All data were entered into electronic spreadsheets. The quantitative data was entered into a de-identified database created with SPSS, and a Microsoft Excel spreadsheet. The qualitative data was transcribed from audio format to written. Prior to starting the analysis, preparation of the collected data was conducted to ensure descriptive validity by documenting missing data, incomplete data, or transcribing errors (Maxwell, 1992). Electronic entries of the quantitative data were proofread for the item data and the open-ended question.

Quantitative data was used for an accurate measure of the extent of implementation of family-centered practices, to conduct mean comparison between groups of participants, to analyze the strength of association between variables of interest and to test proposed hypothesis (González Castro, Kellison, Boyd, & Kopak, 2010). As one of the major limitations of quantitative approaches is decontextualization and responses reflecting social desirability, qualitative data was used for confirmatory purposes (González et al., 2010).

Quantitative Data

Although the data collected with this survey may be considered of ordinal type, for the purpose of extracting information, data was treated as interval. A coding index was developed and used for converting the demographic data into numerical information. The demographic information was explored with descriptive analysis (percentages,

means, and standard deviations) and variables in this section were used as criteria for mean group comparisons in variances, correlations between specific demographic characteristics and ratings on implementation items.

To explore the first research question, descriptive analyses (frequencies, means and standard deviations) were reported for all participants on each area of family-centered practices. To explore the second research question, comparisons of the means and correlation analysis were conducted to explore potential connections between participants' reports on the implementation of FCPs and variables such as educational level, professional development, or previous experience of working with families from Latino heritage, currently serving children young children with disabilities of Latino heritage. To answer the second research question related to the professional development opportunities and extent of relationship with participants' responses, participants were divided in two groups in which differentiating criteria was reported or not access to professional development opportunities. Also, mean comparisons were conducted to explore differences reported by teachers with various types of educational level, reporting as holding a teacher licensure, or having previous experience of working with young children with disabilities of Latino heritage and their families. Spearman correlations were used to explore the relationships between participants' reports on family-centered practices implementation and number of years teaching, number of years holding the current position, or the number of years working with children of Latino heritage and their families.

Qualitative Data

Interview content and the survey open-ended question were analyzed recursively to develop codes associated with reoccurring themes. Data were organized in separate areas corresponding to the six family-centered practice areas, cultural and professional factors, sources of support, needs and challenges, with the purpose of identifying themes and to help explain the ratings in the survey for implementation of family-centered practices. The analysis process was developed in a multi-step manner (Miles & Huberman, 1994). All coding analyses followed a systematic iterative process to identify main themes and patterns of importance (Crabtree & Miller, 1999). Major themes were identified as reoccurring meaning patterns or areas of interest. Codes within the identified themes and related to the investigated areas or the specific focus of questions were developed. However, for the purpose of fully exploring the collected data, data was analyzed inductively as well, when units of meaning were identified to develop into themes. For instance, units of meaning that did not seem to fit with previously identified areas were further explored in the content of the data with the purpose of identifying patters. For the purpose of reliability of the data analysis, two independent researchers were asked to analyze, develop codes and identify major themes of three interviews and all data collected with the open ended question. Initial agreement was of 81% and met 100% agreement after discussing the differences. Frequencies counts were conducted for data consisting of short answers (single words or lists) for the open-ended question. Significant differences were discussed and reconciled multiple times for the interviews until complete agreement was met.

CHAPTER IV

RESULTS

The purpose of this study was to examine the extent to which early childhood teachers reported to implement family-centered practices in their work with families of Latino heritage and their young children with disabilities. Qualitative and quantitative data were collected to answer the following research questions:

1. To what extent was family-centered practice reported to be employed by early childhood teachers in the six investigated areas of (a) family-focused practices, (b) strengths-based practices, (c) family empowerment practices; (d) collaborative practices, (e) individualized practices, and (e) ecological practices?
2. Do factors such as educational level, professional development, previous experience of working with families from Latino heritage, or professional experience influence the extent to which teachers implement FCPs?
3. What are teachers' perceptions on the ways their cultural and professional background influences the extent to which they implement family-centered practices?
4. What are teachers' perceptions on the main needs, challenges, and support sources in implementing FCPs when working with families of Latino heritage and their children?

Quantitative Results

1. To what extent was family-centered practice reported to be employed by early childhood teachers in the six investigated (family-focused, individualized, strengths-based, family empowerment, collaborative, and ecological)? Six areas of practice were explored to understand the implementation of family-centered practice in this study with six subscales: (a) practices acknowledging family as a unit subscale; (b) practices utilizing and supporting strengths of the families subscale; (c) practices empowering families subscale; (d) practices reflecting collaborative approaches subscale; (e) practices that are individualized to the unique needs of the families subscale; and (f) practices acknowledging the importance community and the cultural group of the families subscale.

Total Survey Results

To have an overall image on the extent to which participants reported they implemented family-centered practices in the six areas, Table 8 shows the means and standard deviations of participants' responses on the six correspondent subscales. The means of the six subscales ranged between 3.99 and 4.70, and the standard deviations ranged between .34 and .95. For the subscales on practices reflecting strengths of the families, one participant responded with NA (Not Applicable) in four items, and for the subscale focusing on practices that empower families, one participant answered with NA in two items. Because NA as an answer choice in this case would be appropriate for participants who might have not experienced situations in which they had to employ some practices, and it would differ from Not Available as a lack of resources to use the

practices, these responses were considered missing values when calculating the means for the subscales.

Table 8

Means and Standard Deviations for the Six Subscales (N = 44)

Subscale	*M*	*SD*
1. Family as a Unit	4.34	0.73
2. Strengths of Families	3.99	0.95
3. Empowering Families	4.38	0.58
4. Collaborative Approaches	4.65	0.34
5. Individual Needs of the Families	4.46	0.53
6. Ecological practices	4.70	0.43

The responses of participants on the six subscales were explored by the type of site and program. For the first subscale, which focused on the family as a unit, the means of participants' responses across sites ranged between 4.16 (*SD* = .86) for Site 1 and 4.44 (*SD* = .64) for Site 3, indicating that participants reported to either often or always use practices that reflect the family as a unit. Responses across the type of program ranged between 3.66 (*SD* = 1.06) for teachers working in private childcare programs and 4.56 (*SD* = .53) for Head Start participants. The values indicated participants' report of use of practices correspondent to this scale of often and always, with the exception of the distribution of responses of teachers working in private childcare programs.

For the second subscale, participants responded in average to either sometimes or often use practices that reflect strengths of the families in the first research site (*n* = 14, *M* = 3.5, *SD* = 1.4), and in average sometimes for private child care programs participants (*n* = 8, *M* = 3.09, *SD* = 1.59). On the subscale for practices that empower families, the distribution of means across research sites and type of program varied in average between practices being reported as implemented often or always.

For the third subscale on practices empowering families, responses ranged between 4.32 (*SD* = .71) for Site 1 and 4.44 (*SD* = .52) for Site 3 meaning they almost always used practices that empower families. Responses across types of programs varied between 3.92 (*SD* = .77) for private childcare participants and 4.49 (*SD* = .45) for Head Start participants. The results indicate participants often or always used practice to empower families.

For the fourth subscale on collaborative practices, responses ranged between 4.60 (*SD* = .36) for Site 3 and 4.68 (*SD* = .36) for Site 2, meaning participants reported to almost always use practices that empower families. Responses across types of programs varied between 4.50 (*SD* = .46) for private childcare participants and 4.69 (*SD* = .45) for Head Start participants and public pre-kindergarten teachers.

For the fifth subscale on individualized practices, responses ranged between 4.42 (*SD* = .64) for Site 1 and 4.65 (*SD* = .28) for Site 3 meaning they almost always used practices that empower families. Responses across types of programs varied between 4.20 (*SD* = .64) for private childcare participants and 4.59 (*SD* = .43) for Head Start participants.

For the sixth subscale on ecological practices, means ranged between 4.69 (*SD* = .53) for Site 1 and 4.85 (*SD* = .36) for Site 3 meaning participants reported to almost always use practices that empower families. Responses across types of programs varied between 4.60 (*SD* = .50) for private childcare participants and 4.87 (*SD* = .27) for Head Start. See Table 9 for means and standard deviations across research site and type of program.

Subscale 1: Practices acknowledging family as a unit. To examine the overall extent of implementation of practices that acknowledge family as a unit, descriptive analysis has been conducted for all participants. Participants' responses to the items for the first area of the survey indicate that 84.1% reported they assist families of Latino heritage who have young children with disabilities in identifying concerns for their child and their family to a high extent, by marking either often (40.9%) or always (43.2%) as answer choices. Only one participant reported to rarely using practices to assist families with this purpose. Moreover, more than half of the participants reported they always assist families in identifying goals for their child and family, while 31.8% reported they often employ such practices, and only 2.3% reported to rarely help families in this regard. Similarly, more than half (54.5%) of the participants reported they always assist in developing and planning services that reflect the cultural heritage of the families, while 13.6% participants reported they sometimes only use practices reflecting this practice, and one participant reported "never" as an answer choice.

Table 9

Means and Standard Deviations across Research Site and Type of Program

Subscale		Research Site			Type of Program		
		Site 1 *n*=14 (31.81%)	Site 2 *n*=21 (47.72%)	Site 3 *n*=9 (20.45%)	Public Pre-kindergarten *n*=17 (38.63%)	Head Start *n*=19 (43.18%)	Private Childcare *n*=8 (18.18%)
1:Family as a Unit	*M*	4.16	4.41	4.44	4.41	4.56	3.66
	SD	0.86	0.64	0.74	0.58	0.53	1.06
2: Strengths of the families	*M*	3.50	4.09	4.36	3.91	4.43	3.09
	SD	1.40	0.62	0.33	0.65	0.49	1.59
3: Empowering families	*M*	4.31	4.41	4.40	4.49	4.47	3.92
	SD	0.71	0.52	0.54	0.45	0.53	0.77
4: Collaborative approaches	*M*	4.65	4.68	4.60	4.69	4.69	4.50
	SD	0.33	0.36	0.36	0.26	0.35	0.46
5: Individual needs of the families	*M*	4.42	4.39	4.66	4.43	4.59	4.20
	SD	0.64	0.53	0.28	0.56	0.43	0.64
6: Community and the cultural group of the families	*M*	4.69	4.69	4.85	4.6	4.87	4.62
	SD	0.53	0.42	0.33	0.50	0.27	0.54

Subscale 2: Practices utilizing and supporting strengths of the families. To explore the extent to which participants reported to implement practices that are based on and use the strengths of the families, means, standard deviations and percentage distributions have been calculated for all participants (*N* = 44). More than half of the participants reported to often or always assist with identifying and using the strengths of the families in their practice. Similarly, 43.2% of participants reported they often reflect in their practice the values and beliefs of families to establish collaborative partnerships, and 38.6%) reported they always implement practices reflecting this objective. More than half participants reported they use the strengths of the families in planning special services, and almost 30% reported they always use such practices. Finally, 40.9 % of participants reported they always create goals that build on the competence of the families.

Subscale 3: Practices empowering families. Participants responses at the items focused on practices that empower families indicate that more than half of the participants indicated that they always implement practices focusing supporting families to develop and use advocacy skills. The same percentage reported they support families' decisions even when they do not agree with them, and the majority (91%) reported they use practices that help families develop the skills to address their children and family's needs. More than half of the participants reported they that assist families to access information necessary to make informed decisions.

Subscale 4: Practices reflecting collaborative approaches. Almost all participants (97.7%) reported they always strive to establish respectful relationships with

the families, while 75% indicated they considered they always use culturally sensitive communication strategies. Moreover, more than half (63.3%) participants reported they always make sure the families understand and are supported to use the information they receive, and 54.5% report that they always use culturally sensitive exchanges of information on consistent basis. More than half of the participants indicated they always trust families to work together in planning and delivering specialized services.

Subscale 5: Practices that are individualized to the unique needs of the families. Almost 32% participants reported they often take into account the vision of future families hold for their children, and 61% indicated they always implement practices that reflect this goal. Most of the participant indicated either they often (40.9%) or always (47.7%) assisted in reflecting family characteristics in the practices they implemented, while more than half (56.8%) participants indicated they assisted families in identifying ways to address their unique needs.

Subscale 6: Practices acknowledging the importance of community and the cultural group of the families (ecological practices). When asked to report the extent to which they implemented practices that reflected the importance of community and cultural groups of families, 84.% (n = 37) participants reported they use practices that reflect the importance of community in families' lives, while 75% reported they implement practices that reflect importance of families' access to resources available in the community, while 65.9% responded they always make sure they reflect the characteristics of the cultural groups or community in their practice.

2. Do factors such as educational level, professional development, previous experience of working with families from Latino heritage, or professional experience influence the extent to which teachers implement family-centered practices?

Educational Level

Participants reported their educational levels in the following categories: bachelor degree, associate degree, master degree, doctoral degree and other. Over sixty percent of all participants in this study had a bachelor degree, with the rest of participants reporting to have an associate degree (15.9%) or a master degree (18.2%). Two of the participants reported the "other" category as corresponding to their education level, with one of them commenting she was working on her associate degree, while the second reported she had some college education. To examine relationships of the participants' responses across to their educational level, the means of the participants' responses across the six subscales have been investigated. The results of the means are presented separately for the six conceptual areas. See Table 10 for means and standard deviations across educational levels for the six subscales.

Subscale 1: Practices focusing on family as a unit. Table 10 describes the means distribution across categories of educational level for the scale on implementation of practices that acknowledge family as a unit. The responses of participants with a Bachelor degree (M = 4.44; SD = .63), a Master's degree (M = 4.58; SD = .38) or an Associate Degree (M = 4.04) at the first subscale did not vary significantly, with the participants reporting that they often-always implemented practices that reflected family

as a unit. However, the two participants with educational level other reported they sometimes only use practices described in the first subscale.

Table 10

Means and Standard Deviations across Educational Levels for the Six Subscales

Subscale		Bachelor Degree *n*=27	Associate Degree *n*=7	Master degree *n*=8	Other *n*=2	Total *N*=44
1: Family as a unit	*M*	4.44	4.04	4.58	3.00	4.34
	SD	.63	.89	.38	1.41	.73
2: Strengths of the families	*M*	3.96	4.25	4.09	3.04	3.99
	SD	1.08	0.50	.49	1.82	.95
3: Empowering families	*M*	4.33	4.37	4.60	4.20	4.38
	SD	.69	.37	.32	.28	.58
4: Collaborative approaches	*M*	4.63	4.65	4.70	4.80	4.65
	SD	.35	.41	.30	.28	.34
5: Individual needs of the families	*M*	4.37	4.52	4.70	4.50	4.46
	SD	.60	.32	.33	.70	.53
6: Ecological	*M*	4.70	4.80	4.70	4.83	4.72
	SD	.49	.37	.37	.23	.43

Subscale 2: Practices utilizing and supporting strengths of the families. Table 10 describes the means distribution across categories of educational level for the scale on implementation of practices that reflect strengths of the families. Participants with college education degree predominantly reported to often use practices described in the second subscale (n = 27, M = 3.96, SD = 1.08). The responses of participants with master's degrees and associate degrees did not vary significantly from these findings. However,

the two participants with educational level in the other category reported in average that only sometimes they use practices described in the second subscale.

Subscale 3: Practices empowering families. To have an overall image of the participants' responses on the implementation of practices that empower families, means across educational level on the subscale have been summarized in Table 10. The responses of participants on the subscale for practices that empower families averaged around often to always reporting to use the described practices for all educational levels.

Subscale 4: Practices reflecting collaborative approaches. To have an overall image of the participants' responses on the implementation of practices that support collaboration with families, means across educational level on the subscale have been summarized in Table 10. The responses of participants on the subscale for practices that reflect collaborative relationships with families averaged around often to always reports of using the described practices for all educational levels.

Subscale 5: Practices that are individualized to the unique needs of the families. To have an overall image of the participants' responses on the implementation of practices that are individualized to the unique needs of the families, means across educational level on the subscale have been summarized in Table 10. The responses of participants on the subscale for practices that reflect individual needs of the families averaged around often to always reports of using the described practices for all educational levels.

Subscale 6: Practices acknowledging the importance community and the cultural group of the families. To have an overall image of the participants' responses

on the implementation of practices that are acknowledging the importance community and the cultural group of the families, means across educational level on the subscale have been summarized in Table 10. The responses of participants on the subscale for practices that reflect importance of communities and cultural groups of the families averaged around often to always using the described practices for all educational levels.

The results on the distribution of means across educational levels indicate that most of the participants implemented often or always the practices described in the six subscales and that educational level did not create significant variables in teachers' responses.

Licensure Type

Participants of this study were asked to report the type of license they had. Forty-five percent of the participants reported to have a Birth-Kindergarten licensure, 6.8% had a Birth-Kindergarten and Elementary Education licensure, 6.8% were licensed in Special Education, 4.5% had a Birth-Kindergarten and Special Education licensure, and one participant reported to be licensed both in Deaf and Hard of Hearing. The rest of 34.1 % participants did not report their credentials. See Table 11 for means and standard deviations across licensure types.

Participants in this study were split into two groups: (a) participants who reported to have a licensure (n = 29), and (b) participants who did not report to have a licensure (n = 15). To explore if the two groups varied significantly, an independent t-test has been calculated for the six subscales.

Table 11

Means and Standard Deviations across Licensure Types (N = 29)

Licensure		Subscale 1 Family as a unit	Subscale 2 Strengths of the families	Subscale 3 Empowering families	Subscale 4 Collaborative approaches	Subscale 5 Individual needs of the families	Subscale 6 Community and the cultural group of the families
Birth through Kindergarten (*n* = 20)	*M*	4.53	4.15	4.49	4.77	4.55	4.80
	SD	0.57	0.75	0.57	0.25	0.55	0.45
Deaf Education (*n* = 1)	*M*	5.00	3.50	4.60	4.60	4.66	4.33
	SD	.	.	.	.	.	.
Special Education (*n* = 3)	*M*	4.11	3.75	4.40	4.53	4.44	4.33
	SD	0.50	0.66	0.53	0.41	0.38	0.33
BK, Elem Ed (*n* = 3)	*M*	4.33	4.16	4.53	4.66	4.11	4.33
	SD	0.57	0.76	0.30	0.30	0.83	0.66
BK, Spec Ed (*n* = 2)	*M*	3.66	3.75	3.70	3.90	4.00	5.00
	SD	0.94	0.35	0.71	0.14	0.47	0.00
Total (*n* = 29)	*M*	4.42	4.06	4.43	4.67	4.46	4.70
	SD	0.61	0.71	0.56	0.34	0.56	0.47

Participants in this study were split into two groups: (a) participants who reported to have a licensure (n = 29), and (b) participants who did not report to have a licensure (n = 15). To explore if the two groups varied significantly, an independent t-test has been calculated for the six subscales. Levene's tests indicated that the variances in the two groups were similar across the two groups for the six subscales. However, results indicated no significant differences between the means of the two groups at all six subscales. These results should however be cautiously interpreted due to the size of the participants sample of this study.

Years in Current Position

To explore if there was a relationship between the number of years teachers have had the current teaching position and the extent they reported to implement family-centered practices according to their reports, Spearman correlations has been calculated. Results indicated a relationship between the number of years teachers had the current position and their responses at the scale focused on practices that acknowledge the family as a unit ($r = .38$, $p < .05$). More specifically, the findings suggested a significant relationship between the number of years in the position and the participants' responses on implementing practices that support families identify their concerns for children and their family ($r = .31$, $p < .05$) and the extent to which they assisted to reflect the cultural background of families in specialized education services ($r = .40$, $p < .05$).

Years Teaching

Spearman correlation calculations did not suggest a significant relationship between the number of years of teaching and the extent to which participants reported to implement family-centered practices on the six subscales.

Professional Development

Twenty-four participants from the entire sample reported they had professional development opportunities. To examine if there are any significant differences between participants who reported to have had professional development opportunities and those who did not, the independent t-test has been conducted. The condition of homogeneity of variances has been met only for the scale on practices which empower families ($p < .05$), practices that reflect collaboration with families ($p < .05$), and practices that reflect the individualized needs of families ($p < .05$). However, the *t*-test results indicated no significant relationship between the groups on the three subscales ($p < .05$).

Experience Working with Families

Spearman correlation analysis indicate that for the participants who reported to have experience working with families of Latino heritage with young children with disabilities, there is a significant relationship between the number of years they had experience and their responses at the scales on practices that acknowledge family as a unit ($r = .48$, $p < .05$) and the overall subscale focusing on practices that reflect strengths of the families ($r = .33$, $p < .05$).

When Spearman correlation analyses for individual items were conducted, significant relationships were indicated between the number of years of experience

working with families of Latino heritage and participants' responses at the item 1 (r = .41, $p < .05$), item 2 (r = .36, $p < .05$), item 3 (r = .49, $p < .05$) and item 21 (r = .35, $p < .05$). The results of the significant correlations analyses on individual items are summarized in Table 12.

Table 12

Correlation between Number of Years of Experience Working with Families of Latino Heritage and FCPs Individual Items

Family-Centered Item Practice Item	*N*	*r*	*sig* (2-tailed)
1. Identifying concerns for child and family	34	.417*	.014
2. Setting goals and outcomes for their child and family	35	.360*	.034
3. Planning and delivering specialized services that reflect the cultural values of the family.	35	.491**	.003
21. Families' sense of belonging to their communities.	35	.354*	.037

** Correlation is significant at the 0.01 level (2-tailed).
* Correlation is significant at the 0.05 level (2-tailed).

Currently Serving Children with Disabilities of Latino Heritage

Levene's test indicated that the homogeneity of variances condition was met for all subscales, except subscale focusing on practices reflecting importance of community and cultural group of families. However, independent *t*-test findings suggested significant

differences only for the participants' responses on the subscale on practices reflecting individual needs of the families ($t = 2.02$, $p < .05$). Spearman correlations indicates that the number of children and families currently serving only makes a difference for item 19 describing practices that are sensitive to the family characteristics ($r = .51$, $p < .05$).

Qualitative Results

Semi-structured interviews were conducted with a subset of 10 survey participants to explore the third research question concerning the teachers' perceptions about how their cultural and professional background influences the extent and ways in which they use family-centered practices. The interviews also explored the forth research question concerning teachers' views on what they considered to be the most significant sources of support, challenges, and needs in implementing family-centered practices to address the needs of families of Latino heritage and their young children with disabilities.

Themes

As shown in Table 13, five themes emerged from the data concerning factors that may influence ways participants use family-centered practices and their perceptions on sources of support, needs, and challenges. The first theme identified from the participants' responses was that teacher training, practical experiences, and access to professional development have a major influence on how they work with families of Latino heritage. The second theme was that participants refer to their own cultural lenses when conceptualizing and implementing family-centered practices. The third theme identified was that support to serve families of Latino heritage and their young children is key for successful practice. The forth theme from the interviews was that the need for

linguistic support is critical for teachers working with families of Latino heritage and their young children. Finally, the fifth theme related to teachers acknowledging the diversity within the group of families of Latino heritage and their children as a factor they need to take into account in their practice (see Table 13).

Table 13

Themes Identified on Cultural and Professional Factors, Supports, Needs, and Challenges

	Themes
Theme 1:	Professional preparation and support have a major influence on family-centered practice implementation
Theme 2:	Teachers refer to their own culture and views on building relationships when conceptualizing and implementing family-centered practices
Theme 3:	Support to serve families of Latino heritage and their young children is key for successful practice
Theme 4:	The need for linguistic support is critical for teachers working with families of Latino heritage and their young children
Theme 5:	Teachers acknowledge the diversity within families of Latino heritage as an aspect they need to consider in their practice

Theme 1: Professional preparation and support has a major influence on FCPs implementation. Participants explained how their teacher training prepared them

to address the needs of families of Latino heritage through knowledge gained from coursework. They also described the importance of meaningful student teaching opportunities offered during their teacher training, and how the experiences of working with culturally and linguistically diverse families helps them be effective in addressing families' needs.

Coursework preparation. Teachers in this study shared that they considered their teacher training as a highly influential factor for their professional practice and their success in the efforts to address the needs of families of Latino heritage. Participants shared that classes focused on teaching children with disabilities were very helpful. As one Head Start teacher shared during the interview, "When I was in school for my bachelor degree, I did take quite a few classes on how to teach children with disabilities and best practice for them and . . . I felt like that was very helpful for me . . ." Participants in this study explained that the courses they took during teacher training helped them to be prepared in using various strategies, as well as ways to identify and provide families with access to resources. One Head Start teacher from Site 3 commented on this particular aspect:

> the different strategies, the way to reach out, like by constant communication or the resources . . . looking for the resources that are help . . . and this mainly about children with disabilities, so I got the agencies that are out there to help these children and these families . . .

Training on identifying and using the available resources, as well as on strategies to help families of Latino heritage to communicate with teachers and feel comfortable about it,

was identified as a need for the field and confirmed by the participants' answers on the survey open-ended question. As one public school pre-kindergarten teacher wrote:

> I believe sometimes that families from Latino heritage are not always as communicative and open as non Latino families. I feel that perhaps they are intimidated by the whole process. I feel like the families just agree with everything I say. I wish I had more strategies to help the families really open up and be more comfortable doing so.

Especially, having "classes that address needs and how we can meet those needs" would be beneficial, according to a private childcare center teacher. Participants also mentioned that they would benefit from training in workshop format, and that they would need support to be allowed to have more home visits in order to learn about the families.

Moreover, teachers considered that knowledge gained through classes on child development and family studies gave them a more complete idea about the needs of the children and their families. In regards to this aspect, one teacher working in a private childcare who had been trained initially in child development and family relations with an add-on certificate to teach children birth through grade six commented:

> I think . . . professionally, being, you know, not just taking early childhood education, but just studying the whole child, from birth all the way up, and family dynamics . . . and I don't think you always get that education in the human studies part, in the education part . . . I think that background does help you come bring to this a whole another area of knowledge in ways of . . . well, even interests . . . that you're interested in as far as disabilities . . . I mean, you studied normal development, you can recognize some abnormal development, whereas in the education part you just study how to teach, is not as much recognizing what's going on with the human at that stage and age . . .

Also, teachers who had classes that addressed the needs of children with disabilities from diverse backgrounds felt they were particularly helpful. As one teacher from a private childcare mentioned:

> I had classes like mild moderate disabilities and stuff like that . . . that was helpful . . . because in that class they consider like . . . they talked about the Spanish Speaking children . . . in there . . . just because they are at the disadvantage in the class because they weren't understanding.

Practicum experiences. Participants also explained how being exposed to various settings during teacher preparation practicum experiences helped them to have a better understanding of the diversity of children and families in pre-kindergarten programs. One of the public pre-kindergarten teachers mentioned having this exposure during the teacher training was a significant influence on her professional preparation and the ways she works with families today. She comments: "I feel like throughout all those places, even though I've worked with the same age children, every child is different, and I've got a lot of different experiences with different cultures, and as far as like different economic levels." Another teacher working in a public prekindergarten program in the third site explained:

> I think the different courses that I have taken, and I have a bachelors in child and family development . . . so . . . I got to visit typical classrooms, and those with special needs, so my eyes were open . . . towards different . . . different needs . . . of . . . of children.

One public prekindergarten teacher commented on how her teacher training helped her shape her teaching philosophy that guides her practice. She specified:

> I think . . . just as far as my teaching philosophy it was shaped by, you know, my internships. My special education classes . . . my . . . a . . . just everything I learned . . . I mean . . . my philosophy and what I was taught just kind of clicked . . . and I think that's . . . that's what made me into the teacher.

The same teacher commented that teachers may not feel comfortable to share their lack of knowledge to address the needs of families of Latino heritage because they want to have the knowledge they are expected to demonstrate in their practice. The teacher commented on how practicum placements in diverse settings are needed:

> . . . and I think as a teacher you wanna be able to know everything, and you wanna be right . . . so it's . . . if you don't know . . . you're scared to speak up . . . then I think that a lot of times that's why teachers . . . you know . . . they're not . . . it's cause they're not comfortable and . . . it's because they just don't know . . . and they're scared to ask . . . so I think that's . . . as a profession . . . I think the more information we have . . . you know . . . in college . . . or . . . you know . . . if we could have like an internship in a facility that has a lot of these families of different cultures . . . to have the exposure.

Experience working with families from diverse backgrounds. Participants also shared through their interviews that professional experience plays an important role in their current practice. As one Head Start teacher commented: "you learn what you learn in school, but I mean . . . it's applying it every day, in daily life that's made a difference . . ." Participants' responses on the survey open-ended question confirmed this finding, as teachers reported that in addition to teacher training, it would help them to have more exposure to Latino culture by being provided professional development opportunities where they could work with families and children of Latino heritage. As a Head Start teacher mentioned, "Additional training for teachers who are interested in the Hispanic/Latino culture, language and traditions" would help teachers be better prepared

to work with families of Latino heritage. Also, “Having more exposure to their culture, beliefs and family values that include parent/child relationships, husband/wife relationships, work ethics” would be very helpful according to another Head Start teacher from Site 2.

Theme 2: Teachers refer to their own culture and views on building relationships when conceptualizing and implementing family-centered practice. During the interviews, teachers were asked to describe how their own cultural background was reflected in their current practice. Results indicate that participants referred to their own cultural lenses when conceptualizing and implementing family-centered practices. They either referred to their own cultural background, their passion for working with children and families, or to how their spiritual beliefs influenced the ways they address the needs of families.

Teachers’ cultural background. When discussing how their cultural background is reflected in their practice, some teachers referred to their ethnicity. One Head Start teacher who is of Latino heritage explained that sharing the cultural background helps her relate to the families: “As far as education, I’ve been trained to be able to relate to all the parents, but with Latino in particular, since I am part Latino, I can relate to some of their . . . their cultural [background].” Another teacher working in a Head Start program commented, “Speaking for me, I try not to look at color . . . I don’t look at race . . . I just see the children . . . children . . . so . . . And, you know, then, being that I’m an African American, I am one of the teachers I make my parents feel so welcome, you know . . .”

The teacher further describes how her own family culture shaped the lenses she uses in practice today:

> We didn't see color . . . that's just the way we was raised . . . you like a person, you like a person for them, not the color of their skin . . . nor their culture, cause they eat pork chop and you eat fish . . . doesn't make them . . . make you better than them, or you . . . or them better than you. And that's just the way I see it . . . I mean . . . you know, I see people as people . . . not . . . what they have . . . cause what you have doesn't make you . . . you know . . . so . . . maybe that's why I get along with people and parents the way I do . . . because I don't . . . I'm not judgmental.

Another public prekindergarten teacher referred to her families' roots as a support in helping her to relate to the struggles of newly immigrant families who are trying to adjust to their new culture:

> . . . just seeing these struggles that my grandparents went through . . . to learn the language, to learn the culture . . . I think a lot of times that plays into it. I really want to help these families because they just don't know what's available . . . and I think . . . you know . . . getting them the information in their language . . . or . . . you know . . . being able to put them in touch with someone that can explain to them.

Another Head Start teacher referred to the culture of her family and her personal experiences to explain how her cultural background influences her practice. She explained that she viewed the values of her family as similar to the ones of many of the families of Latino heritage:

> And their family culture is a lot like my family culture, as far as they're a close knit families, and the families all staying together, you know . . . you know, close knit families have that . . . you know . . . the Latino population is very . . . Whole lot like the country . . . I'm gonna say that country life . . . it's a whole lot like this . . . my culture follows a whole lot along in line with their culture . . .

The same teacher further refers to her personal experience with families of Latino heritage outside her teaching profession: “I was raised on a tobacco farm . . . So what they did, I’ve already done . . . I’ve worked in the crops, I’ve been in the fields, I’ve worked with Hispanic workers in the fields . . .”

A prekindergarten teacher described the influence on her practice of a family member as a role model, as well as the influence of her family’s culture:

> My mom was a teacher, so I grew up hearing experiences with her and the classroom setting. And, you know, she loved her job … and I think being brought up in a fair home, and not being biased, you know. . . . towards a particular race …of others . . . just trying to be fair . . .. I think . . . that’s the way that I was brought up.

Other teachers referred to other aspects of their background. One Head Start teacher described her own cultural background of being a child with disabilities as a major influence on the ways she works with children of Latino heritage and their families:

> When you look back at the experience that I had in school, because I was labeled . . . back then . . . They didn’t use the term mentally retarded or stuff like that, they used LD at the time and everybody they knew what that was, though . . . it was frowned upon, so after I realized that I was capable of learning . . . My sixth grade teacher realized that . . . okay . . . there’s nothing wrong with her . . . She is able to learn, it’s just another way that I gotta get it across . . . That made my heart go out for children . . . all together . . . because I wanted to give them a different experience than I had . . . I used my hurts and pains to be the building blocks for the children that I serve now . . .

Another teacher working in a private childcare explained how her spiritual beliefs reflect on her professional philosophy:

> I'm a Christian and I think that plays a lot into who I am [] . . . I just recognize that we are here all . . . people . . . you know . . . we're all a lot . . . we are all different in the way we look, but we're the same in how we're made and designed, and how we feel . . . and . . . I think every . . . I guess different culture, or different . . . or race, or ethnicity has things to offer, and I like to learn as much as I like to teach.

Participants also talked about how their passion for working with children and their families reflects on their practice. One Head Start teacher commented on what drives her work with children and families "it is definitely a genuine love for my families and my children because they deserve the best that we can be for them." Although referring to her professional background, the same teacher further explained that her passion for serving children and their families actually comes from her worldview:

> . . . because I have a respect and a love for . . . you have to have a genuine respect and love humanity in order to do . . . anybody can do a good job . . . because books can teach you how to do that, but to do an effective job, you have to have a genuine love for compassion, and for humanity, regardless of what is a disability or not a disability . . . whereas is a certain color or not a certain color, is not about any of that.

The same teacher concluded ". . . this is my drive, it is my passion, it is my quest."

Family-school relationships a major component of family-centered practices. Teachers participating in this study referred to their personal style as a resource in working with families of Latino heritage and their young children with or without disabilities. They referred to their ways of communicating with the families such as being encouraging, positive, strengths-based oriented, adaptable to various working styles, or problem-solving oriented, as helping them to be effective in addressing the needs of the

young children with or without disabilities of Latino heritage and their families. One teacher working in a private childcare commented:

> I think I'm an encourager by nature, I think I'm probably positive, and I just think if you really do have gifts, and you have strengths, I think one of mine is just being able to work with a lot of different people . . .

One public prekindergarten teacher discussed how she prefers to focus on the strengths of the child and to encourage families to do the same "I am always making sure they are supporting their children by, you know . . . always being positive about their child's . . . you know, in the classroom . . . their strengths in the classroom, just always being positive about their child."

A Head Start teacher talked about her ability to work with many people and to relate to their communication needs:

> . . . you get to see I am a people person, I could talk to you on the phone, and I can understand you, but if I can sit before you . . . body language is a lot, and you can tell the difference, but on the phone you can't . . . and so if I'm seeing them fidgety or something, I'm like . . . okay, they don't really understand . . .

Teachers in this study explained that relationships with families are very important because depending on how parents feel about the program will influence how children experience the program. As one private childcare teacher explains: ". . . if their parents come in and they don't feel welcome, then the child is not going to feel welcome either." Most of the participants agreed that it was important to establish trustful relationships with families so that they could feel comfortable and secure with the programs. According to participants in this study, families feel comfortable with teachers

after they have experienced working with them and already established a certain level of trust. When parents trust teachers they may be more opened to collaborate with teachers and specialists. One private childcare teacher explains while referring to one of the families of Latino heritage who had a child with disabilities:

> . . . that father refused of all others but me and my assistant, because he was just used to us, felt comfortable with us, and that's where I think the classroom teacher plays a huge part in getting families of Latino background or other cultures . . . they develop a trust there.

The importance of developing a personal relationship with families was emphasized as well by a public prekindergarten teacher working in Site 2. She reflected on how when families feel more comfortable to share their concerns and asks for professional input when they have a rapport with the teachers:

> If you get to know them on a one on one, personal level, a lot of times they will feel more comfortable and they will come to you with questions . . . or if . . . you know . . . going back to the . . . you know the children with special needs . . . if they see something they will be more comfortable to come to you and say to you "do you have the same concern . . . are you seeing this at school" . . . and you're . . . you as a teacher you're more comfortable as well . . . saying . . . you know . . . I am seeing this at school.

Another participant working as a Head Start teacher emphasized the importance of communication in developing trust between families and teachers, ". . . this is the main thing, keep the communication open with our parents, and when the communication is open with our parents, and they feel that trust . . . that's vital, that trust then . . . they will respect our opinions . . ." The teachers acknowledged in their responses at the survey open-ended question that they have good communication with families, and that they

reflect in their practice they value them. As one Head Start teacher wrote, ". . . Involve parents in classroom activities, make them understand they are important." During the interviews teachers further emphasized how in developing collaborative relationships with families and trust between teachers and parents, they must value the families and their expertise. As a private childcare teacher summarizes: "I think if the parents really realize you are interested and you value them as having a lot to offer us, then they are willing to share sometimes a lot, and that just kind of grows into that trust and . . . friendship."

Another reason for which teachers in this study emphasized the importance of building relationships with families is the families' needs for emotional support. Almost all participants in this study shared that the language barriers and the unknown of the new culture and educational system often makes families from Latino heritage who have children with disabilities feel concerned or even scared. One Head Start teacher commented that, ". . . I think some of them are scared . . . I really do . . . cause I can see when they bring their children in . . . because I think it's the language barrier . . . I really do." Another teacher shared that in her opinion ". . . the parents are afraid that they [children] have a disability that people are not going to . . . they are too much trouble . . . they don't want them."

Theme 3: Support to serve families of Latino heritage and their young children is key for successful practice. Teachers reported the need for support to serve families of Latino heritage and their families as a key aspect for their success in working effectively with families. Participants discussed the importance of being supported by

program administrators, specialists or their peers, as well as resources in the community. They also emphasized how family engagement helps them to help teachers back.

Support within the program. Teachers described the support they received from their administrators as a major resource for their successful practice. Some participants described this support at relational levels, as program directors or school principals expressed support through their attitudes and the culture they promoted in their programs. A teacher in a public prekindergarten explained how family-centered practice is an expectation for the teachers and school professionals:

> There is a formal . . . yes . . . handbook . . . and I think . . . You know, when you are hired into the program, of the county, you understand that, and it's part of . . . it's just part of what we do . . . It's part of our curriculum, and there's . . . there's just no other option.

According to this participant, working for a program that "believes in the family-centered practice approach" and that supports it through its actions is a resource for teachers. She concluded: "that comes from our administration, because they believe in it."

Teachers who reported administration support also referred to the support in the form of providing access to resources. For example, one public prekindergarten teacher described how the school principals were prompt in ensuring she had the materials she needed for her practice:

> They were always making sure that I had what I needed in the classroom, or those children, as far as like making sure that I had lots of books that were culturally diverse, making sure that I had things to put up in the Spanish language . . . I tried to label things Spanish and English, making sure that I just . . . I basically had that

> support on a . . . just doing different things culturally diverse, it always had to go through the principal or the director. They were very supportive about doing that . . . and helping our classroom grow.

A public prekindergarten teacher shared how school principals assisted teachers in their collaboration with families by providing necessary resources such as transportation for families or language support for meetings:

> If I call in and say, you know this parent needs to come to this meeting, you know, and they need transportation, administration will step and say: "okay, we'll figure out a way" . . . so . . . or . . . "we'll find somebody to come and translate at that time" . . . that the parent can come . . . so . . . I mean . . . you got the support.

Another source of support within the program reported by a public prekindergarten teacher was that of co-workers and mentors. This participant described how she has received help to develop as a professional to address the needs of the children:

> I've always felt that my other co-workers that I had were very supportive. My mentors that I had, you know . . . since I was a beginning teacher they kind of helped me grow, they were very supportive . . . as far as helping me know new ideas of how to further enhance children's abilities . . . you know, giving me new ideas of different ways to engage those children.

Community agents provide resource for teachers. Teachers described connecting families to agents in the community as a critical resource in addressing the needs of families of Latino heritage and their children with disabilities. The participants working in private childcare programs, as well as Head Start reported collaborating with the county Smart Start office. The Smart Start assisted teachers mainly with getting access to

language support or resources for the families. One private childcare teacher indicated that when the program needs assistance from an interpreter, “I’d have to call her and have her ask the interpreter when she can come and it’s just very hard because there is only one interpreter for the whole county.” Another teacher stated her program would contact Smart Start also to ask for support with translations. Smart Start also assists programs with connecting families to resources, such as addressing basic needs for food or support with paying bills. As one Head Start teacher pointed out “We’re like partners with them. Say, for instance, like . . . they have programs for families that need childcare.” Also, teachers can ask for assistance from Smart Start for children who have or may be diagnosed with a disability. A Head Start teacher explained “We work through Smart Start . . . they send us a lot of referrals.”

Other sources of support mentioned by teachers are the public schools, local libraries, parent centers, the YMCA, Medicaid, churches, chambers of commerce, and divisions of parks and recreations. One private childcare teacher pointed out that the collaboration with public schools focuses on transitioning children of Latino heritage to teachers that are known to enjoy working with this group of students and their families:

> . . . finding teachers who love to work with Latino families . . . we . . . have teachers that speak Spanish . . . we will try to place them in there so that they can feel comfortable so they can transition when they transition over there to have someone that can understand them, cause that’s a . . . this is a little school, that’s big place and trying to help the families feel as comfortable, as well as the children in . . . you know. . . someone . . . you know . . . still knows my language and they still you know . . . a . . . value me . . . and value us as a family.

Benefits of family engagement in programs. Participants also discussed the importance of family engagement in the programs and their children's education. The main areas in which teachers discussed parent engagement as critical were parents sharing their input on the child and family's needs, the program and the classroom activities, volunteering, and reflecting cultural diversity.

Most teachers acknowledged the importance of parents' input on the needs of the child as they see it at home and areas they consider programs should further address. As one Head Start teacher commented:

> At every parent meeting, just like the one was happening outside now, parents have a chance to put their input and their feedback as to what is going on with their children and their lives and what's being taught in classroom, and I think it's important for families to be able to see, you know, what is going on in their child's education.

Another public prekindergarten teacher explained how learning from the parents about the child's needs at home helps them make decisions on how to further support the child: ". . . we have just kind of talked about . . . you know . . . what she was seeing at home . . . what we were seeing at school, some things . . . you know . . . that she could kind of try at home." Another private childcare teacher explained how asking for parents' input on the child's abilities as parents see them at home, she would use their responses as a starting goal. In the next quotation she refers to the father of a child of Latino heritage with disabilities talking to the teachers about his daughter:

> He just needed to be taught, some things about what is considered . . . a . . . good and normal development for a child and just kind of show him, you know, here is where most children are at this age and go down some goals and objectives, and

> then, you know, how do you think your child is . . . you know . . . compared to what we were seeing here.

In the survey's open-ended question, participants' felt that it would help them if families would provide with their input on their needs. As one private childcare teacher wrote to "Hear from a group of families, what they need" would help better address the needs of the families.

Teachers also emphasized the importance of parent volunteering. They perceived it as an opportunity for families to contribute to their child's education and also a valuable help for teachers. One Head Start teacher commented:

> There's you know, there's things that we need done . . . we need cut out, or we paperwork put together, booklets put together, they are more than happy to do it at home, and we do that quite frequently. We have parents who have siblings who are younger and they take things home with them, and they are fine with that, and we are fine with that, and we definitely appreciate it and then they feel like they are contributing . . .

Parent volunteerism was also emphasized as a way to reflect the diversity in the classroom and to expose children to it:

> I have them, you know, come in and read books to the children in their languages . . . I've actually had some parents coming and do some cooking activities and cook things that are from their culture, just to expose all the children and to show all the other children you know . . . that not everybody is the same.

Another aspect that many of the teachers in this study discussed was how important it was they would see that the parents are following their recommendation to implement at home strategies or carry on activities implemented in the classroom. As one

private childcare teacher pointed out, “I ask the parent . . . whatever the child comes home and tells you that we’re doing, please do it with them, cause that’s what we’re doing . . . and they want, they wanna do this.”

Theme 4: The need for linguistic support is critical for teachers working with families of Latino heritage and their young children. All teachers discussed the need of language support as a central issue in their practice. They explained how limited access to interpreters prevents them from effectively communicating with and eventually addressing the needs of families of Latino heritage and their children. They also commented on how insufficient bilingual staff of programs poses significant challenges for teachers, especially when they are working to address the needs of families of Latino heritage who have young children with disabilities and who are not proficient in English. Finally, teachers shared during their interviews that limited language support in their written communication is impeding them to be effective in their collaboration with families.

Limited access to interpreters. Teachers commented on how having interpreters during the meetings was critical in their work with families of Latino heritage. One teacher working in a public pre-kindergarten commented that she needed the assistance of an interpreter to be able to conduct the initial home visits, learn about the children and their families, and share with them the expectations and functioning of the program:

> Usually . . . I actually do home visits for all of my children and usually when I go out to the homes of the children that come from the Latino background, I usually have to take a translator with me, cause there’s not usually anybody in the home that speaks English, so I actually go out with all my paperwork and a translator and we have the meeting that way.

Another teacher working in a private childcare explained how the program received language support from the local Smart Start and how it helps them to incorporate Spanish language in the classroom:

> . . . and of course, Smart Start and our Hispanic teachers there that are interpreters, they are wonderful about translating books for us, if we want to, and helping me learn to read it . . . in their home language so that I can read it one way in English and one way in Spanish. We learn a lot of . . . as much as I am able to do . . .

At the same time, participants emphasized how limited access to language support, such as interpreters, negatively affects their practice when they are working with families of Latino heritage and their young children with or without disabilities. One public prekindergarten teacher pointed out:

> A lot of the big issue that we have with even presenting strategies, is for the entire county that I work . . . in there are two, sometimes three translators, so . . . that's . . . that's difficult to schedule times to actually meet with the family, you know . . . Last year I had a child that was of Latino background and we have kind of identified that we kind of need to do some evaluation to kind of see where she would fall, mom came in for a conference with a translator and we have just kind of talked about.

For programs functioning as private childcares, this need is even more acute, as one teacher explained:

> Translators! I am in a private childcare center but our More at Four classrooms is there. We have lots of trouble getting services for English speaking kids and it is almost impossible to get help for Spanish speaking children. There are not enough translators and the only one we have access to, doesn't drive so it's hard to get help for conferences with parents.

Another Head Start teacher confirmed that either sometimes parents bring in the translators, or teachers would have to contact language support, which sometimes delays the process: “I mean parents will find one, or we find the resource, the translator, but sometimes can be . . . can slow down the process.” Limited access to interpreters is just as challenging for private childcare teachers, especially for home visits:

> We had to call and set up the meeting, which was a problem . . . we finally got the interpreter to call and set up the meeting for us, but then when we got there . . . interpreter . . . there’s probably 16 preschools in [name of the county] and she couldn’t come . . .

Another teacher from a private childcare commented on the same aspect explaining that even when translated forms are available, not being able to actually to explain to parents what they are, and what is their purpose, makes it very difficult on both sides.

> Each classroom probably has seven or eight Hispanic students in it, and so our need for a personnel staff would be wonderful, but that just hasn’t happen yet. That’s one of the biggest challenges, especially at the first of the year, when you’re trying to fill out forms and fill out . . . let them know about the policies. We have all that translated for them, but still we are not able to really explain things to them because of the language barrier, and that’s probably . . . that’s our biggest problem.

Teachers’ responses at the survey open-ended question confirmed this aspect. One teacher working in a private childcare program wrote “It is extremely difficult to fully meet the needs of the child and the family if I am unable to even communicate with them.”

Moreover, working with an interpreter with training in special education to facilitate communication between programs and families is highly needed. One public pre-kindergarten teacher wrote “More staff to serve as interpreters (background in content area would be great).” The same teacher continues to explain, “We often have to rely on siblings to translate and that is difficult.”

Teachers struggling with language barriers stressed out that it would in fact help them to have an interpreter assigned to their classroom at all times. One Head Start teacher commented that “it would really be helpful if we had a translator in each of our classrooms, you see what I’m saying? That would be very beneficial.” A private childcare teacher confirmed, “I feel that the main barrier I face when working with families from Latino heritage is not having an interpreter available at all times. I am unable to communicate in an appropriate manner that will be fully understood by the family.”

Teachers also reported that it would be helpful if there would be available English classes for parents. One pre-kindergarten teacher wrote in her response to the survey open-ended question that the program would need “Funds for more parent workshops that would be given in primary languages. We often have to rely on siblings to translate and that is difficult.”

Bilingual staff is highly needed. Most of the teachers participating in this study commented on the need to have bilingual teachers and specialists in their programs. They reported that it would help them better serve the families of Latino heritage who have limited English language proficiency if they had access to service providers specialized in

working with this group of families, and that could support appropriate testing for children whose first language is Spanish.

One Head Start teacher commented on this aspect referring to the bilingual family manager in their program, "She is bilingual, and that . . . and that to me . . . because I have seen programs in the past . . . that used a translator, and you know . . . to me, that is not effective." Reflecting on the needs of young children with disabilities from Latino heritage, she further commented how communication might be distorted, even when using interpreters, as some aspects may be "lost in translation." She continued to explain how mediated communication works in the program where she works:

> They have the number to where they can call our program, the translator will speak to them, and then . . . and then you have somebody translated back to us . . .

Another Head Start teacher further explained the need for bilingual professionals:

> To have more teachers that speak their language. Basically that is what I would say . . . somebody that's on call when they're there . . . then, we don't have to wait for somebody to come forty minutes away to interpret something for them . . . somebody that's here and available for them. If they want to discuss something. And, the same as we want to discuss things, we want to be understood . . . they do too . . . and that's one thing I would make sure that was in the center. Somebody that can speak their language . . . that's there twenty four-seven.

The need for bilingual teachers and specialists was confirmed in the participants' responses at the survey open-ended question. Either teachers or school professionals with Latino heritage, or simply proficient in Spanish, teachers reported they would represent a major asset for the programs. One Head Start teacher suggested that "Hiring more teachers of Latino heritage" would help her better support the needs of the families. In

addition, a Head Start teacher wrote referring sources of support that would help her to effectively address the needs of families of Latino heritage and their young children with disabilities" More therapists, consultants, teachers, etc., that speak Spanish, so they can directly communicate with parents and children; better testing for Spanish speaking children."

As a response to the need of language support, teachers in this study also commented that they would greatly benefit from training to improve their Spanish language proficiency. One of the teachers working in a public pre-kindergarten program, and who took some Spanish language classes, commented on this aspect:

> That would help out, you know a whole lot, because I am not proficient in Spanish, you know, I look through the book, and you know try to learn it, but you know, I wished I was very proficient to where I could just, you know, if the child was talking to me I could just talk back instead of having to be really slow about it . . . and say "okay, slow down."

Responses to the survey's open-ended question confirmed the need of professional training to help teachers develop proficiency in Spanish language. Participants acknowledged the need to be proficient in Spanish in order to be able to work effectively with the families. One teacher from working in a public pre-kindergarten wrote that she would need to "Learn more conversation Spanish, so I could have better spontaneous conversations with the family and not rely on an interpreter to get my point across every time." One public pre-kindergarten teacher concluded, "Language barriers are always a concern, so we could offer interpreters and English classes for the parents, as well as Spanish classes for school staff."

Limited written language support as a challenge for teachers. One of the major needs reported by teachers in the interviews as yet to be addressed was that for written language support. Most of the teachers referred to the fact that they not only need to have formal documents and forms translated in Spanish, but it would greatly help them to have activities and communication with families translated in the families' first language. One Head Start teacher described how simply having the parent handbook translated in Spanish helped the program and the parents:

> This is the first year we had the parent handbook translated into Spanish for us and that has just been a blessing because you know we've always been . . . our very first parent meeting would usually last two hours and then we literally read the entire manual to them so that they knew, they would understand the rules and regulations about it and that was pretty time consuming, because we did not have it in Spanish, and now we do, so that's been one of the biggest helps.

Another teacher working in a private center talked about how beneficial it was that the program had access to class materials in Spanish. Families who have children with disabilities were offered books in their native language to learn about and reflect how the information they were given related to their child and their family:

> . . . like we had some little books, simple books, about . . . you know . . . just stories with children with autism and they've been translated into Spanish, and we can send those materials home with them to read to see if they recognize any ways that their child is similar or that in the story . . . or could handle some things in their home like the child, like the people in the story handle the child.

However, teachers also commented extensively on the effect of limited written language support on their practice. One of the teachers working in a public

prekindergarten describes how limited access to written language support prevents her from ensuring clear, effective communication with the families:

> I try to send a newsletters home every Friday, and for my Latino families and for my other families I try to translate it into their language. I know sometimes that's really hard because the translators aren't not always . . . and I tell them, you know, on my home visits, if it comes to you and it looks really funny, you know, call me and I will try to explain it to you.

The same teacher explained that it would make her work more efficient during her visits with families if she would have necessary forms available in Spanish. She commented that "they could read them and fill them out, without me having to say this is what this means . . . this is what this means." One of the private childcare teachers confirmed how this aspect delays the teachers' attempts to serve families of Latino heritage effectively:

> And then sometimes that's delayed, because if it's a lengthy pamphlet or lengthy information . . . then we have to get it translated if we don't have someone to help us . . . we do have resources we can call, but they're not always immediately available to us.

The participants in the study confirmed the needs in this area through their responses at the survey open-ended question. As a teacher working in a public pre-kindergarten wrote, "Having someone to translate newsletters would be very helpful!" or, as a teacher from working as well in a public pre-kindergarten noted: "More interpreters/way to send translated forms and information." Another teacher confirmed this need by writing in her response to the survey open-ended question that "Often, families from Latino heritage cannot even read monthly newsletters and progress reports that I send home."

Theme 5: Teachers acknowledge the diversity within families of Latino heritage as an aspect they need to consider in their practice. The fifth theme emerging from the interviews was that the teachers acknowledge the diversity among families of Latino heritage and their children as an aspect they need to take into consideration as they are serving them. Teachers described a series of factors that influence family participation and their efforts to address the needs of the families of Latino heritage in this regards.

Cultural factors create variability in family engagement. Teachers acknowledged that they needed to take into consideration and adjust to the resources of the families, such as time, knowledge of the educational system and the new culture. They also discussed how they needed to be sensitive to families who have limited economic possibilities and search for ways to assist them. One private program teacher discussed how often times parents of children of Latino heritage have different schedules and priorities, and how teachers address this aspect: "we work with the parents separately . . . we find out that is much easier. Mom is available, dad works." While other teachers agreed that they would usually meet one of the parents for conferences or meetings, some teachers shared that both parents come to meet and discuss with teachers.

Sometimes one of the challenges for parents and teachers might encounter is working together when parents may not have a sufficient literacy level to read the materials teachers send home. One Head Start teacher shared that "every year usually average two or three Latino parents who don't read or write and that's a particular . . .

you know . . . it's hardship." However, she continued by reflecting on ways to support parent engagement in children's education in this situation:

> . . . any kind of materials we give them you have to, you know, read it, or have someone read it to them, because they can't read, they can't write and.. There's ways to get around that too . . . I mean . . . even if they can't read or write, they'll know . . . there might be like full dots in the book . . .

Teachers also discussed how often times parents of children of Latino heritage are not able to attend meetings because they do not have transportation available. One Head Start teacher working in Site 3 commented on this aspect "Because sometimes that's an issue. Parents don't have transportation to be able to come to the meetings. Often . . . a lot of Latino families don't have driver license . . . it's not uncommon."

Another aspect mentioned by almost all teachers was that families of Latino heritage who have recently immigrated to United States need support from the teachers, as they are unfamiliar with the educational system and do not know their rights. As one Head Start teacher points out:

> . . . especially the families that have not been in our country for that long, they don't understand their rights . . . they don't understand that . . . they don't understand the way we carry out the education system as far as you know, sometimes . . . well, I can go to an IEP meeting and may be overwhelmed because, you know, you have school representatives, you've got Head Start representatives.

The same aspect is discussed by a private program teacher that commented that "We try to make ourselves available and have our team ready and talk to them about it,

and sometimes it's not easy . . . they're . . . they don't understand our labels, or what they mean . . . will mean for them in the future."

Teachers strive to reflect the cultural diversity of families of Latino heritage and their children in their practice. Teachers in the study, however, also commented on how they address these variations in the culture and resources of families of Latino heritage. Most of the teachers considered that it was critical that they connect families to resources, such as services for their children or family, or support to address basic needs. One Head Start teacher commented on this aspect:

> Well, for example, like if children, if they need clothes, like with the economy, I mean, economy is downsizing, people losing jobs . . . we can make referrals for them to get them to the right channels, to get the tool that they need for the families to be helpful, like even like the medical, the dental part, sometimes . . . they just, you know, they may not have the access to it . . . and then they don't know.

Other teachers discussed how important it was that they address the families' need for help with transportation to school meetings when they do not have it. This aspect was emphasized in the participants' responses at the survey open-ended question as well. One public pre-kindergarten teacher commented how when parents cannot come to school, she would need to go to their home: "It may be the transportation . . . They may not have transportation, you know, because they haven't been able to get a driver's license . . . or . . . so you've . . . you know . . . you've really gotta make an effort to get out to the home."

Sometimes parents cannot adjust the schools' meetings schedule because they have to attend to other needs of their family. One Head Start teacher described how she

adjusted the needs of one of the parents in her classroom who could not attend an open house event because she had to care for a child with significant disabilities:

> It was really difficult for her to come at open house . . . and I mean it's just . . . because she has other children, so . . . as mom being the caregiver because dad worked at night, it was really difficult for her to have all these children and then one of them had such a profound disability, to be able to attend things, so yes, I was always trying to make sure that even though she could not come, we had someone, who, as a secretary at the parent meetings . . . who takes down the minutes and we always send copies of that home so she knew what was being discussed and she was kept up on everything that was going on.

Another Head Start teacher commented on how the program tried to adjust to the schedule availabilities of the families:

> We try to look at parents' work schedules. If the mom is staying at home, and she's at home during the day, are there things during the day . . . to help, you know, with her child's education and stuff . . . or dad is at home . . .

As families might struggle at home with things different from academic concerns for their children, teachers viewed as very important to learn about the families' lives outside the classroom to have a better understanding on the factors that may influence family engagement. As one private childcare teacher explains:

> You have to find out about the . . . the family . . . so you can best meet the needs of the child, because if there's no consistency at home, if there's no . . . a . . . if there's a lack of supervision, if dad has lost his job . . . then that affects their behavior . . . Because their whole world has changed, so you have to be involved in order to understand the reasons the kids . . . you know, may be acting out, if there's a new child at home . . . or someone lost their child . . . or there's been a move made . . . or they're new to the county.

Teachers also recognized that it would be beneficial if they would support families to understand their rights. “Help them understand their rights as a parent and the community resources available.” was the recommendation of one Head Start teacher at the survey open-ended question. Another Head Start teacher discussed the teachers’ responsibility in this regard:

> I think it is more our place to expand more on some of these things. I think that may be way to, you know, making sure that the parents understand “this is for your child, we do this to benefit” and “We’ll be working as a group and you are just as much part of this as either one of us is.”

Finally, teachers also discussed how they recognized that families may have preferences on how culture is reflected in the classroom. They mentioned that some parents would prefer their children learn English and that they want teachers to focus support in that direction: “some may say they don’t want to use any Spanish, they just want to learn English.” In the same time, other parents would like to make sure teachers reflect children’s cultural background in their teaching. As one private program teacher pointed out: “. . . and they want their culture to still be enhanced in school, regardless of the English, of the barrier of speech . . . they want to see that their culture is incorporated and that’s what we try to do . . . even with the foods.”

Summary

This chapter presented the results of the analysis on the quantitative and qualitative data. Participants’ responses on the implementation of family-centered indicate that teachers implement family-centered practices to a large extent. However, the interviews results suggest that there are significant challenges for effective family-

centered implementation and needs to be addressed to effectively serve families of Latino heritage and their children. The need for language support is predominant for early educators in this sample and its effects reflected at multiple levels in their practice.

CHAPTER V

DISCUSSION

Although extensive research on family-centered practices offers a variety of definitions, most of them include as essential characteristics: (a) focusing on the family as a unit, (b) respectful and dignifying relationships between professionals and families, (c) meaningful information sharing between professionals and families, (d) family choice, (e) emphasizing family strengths; and (f) individualizing service planning and delivery (Dunst, 2002; Dunst et al., 2007). In their review of the conceptualizations of the family-centered practice between 1996 and 2007, Epley et al. (2010) found that these elements continue to be the main components of the way this approach is defined. However, there seems to be a tendency for less of an emphasis on family as a unit and a stronger focus on relationships between professionals and families, strengths of the families and family choice (Epley et al., 2011).

Federal legislation and accountability standards emphasis on increasing the quality of experiences for young children and their families in educational programs has resulted in vast research on how to define quality, especially when translated into children and family outcomes. However, research on outcomes for families and their children as a result of family-centered practice implementation is still a growing area of knowledge.

This study proposed to explore the implementation of family-centered practice by early education teachers working with preschool children. The study focused on the five areas commonly associated with family-centered practice. However, due to the theoretical framework under which this study was developed, an additional area, related to the broader layer of cultural groups and communities in which families function, in particular services for families of Latino heritage, was explored.

This chapter will provide a discussion of the results of this study, which explored teachers' reports of family-centered practice implementation across six areas. Also, the influence of professional training and cultural factors as described by teachers will be shared. Further, participants' views on the main sources of support, challenges, and needs at the implementation level will be discussed in relation to the current research findings in the field. Finally, limitations of the study and implications for further research will be presented.

Family-Centered Practice Implementation

Implementation across the Six Family-Centered Practice Areas

The first question addressed in this study examined the extent to which family-centered practice was employed by early childhood teachers. Therefore, this study first explored teachers' views on the extent to which they reported to implement family-centered practices in six areas of this approach: (a) focus on family as a unit, (b) family strengths, (c) family empowerment, (d) collaboration between families and teachers, (e) individualized practices, and (f) reflection of family's communities and cultural groups.

Overall, the findings of the survey indicated that teachers participating in this study employed family-centered practices to a very high extent in all six areas. The survey included examples to ensure teachers understood what each item meant, and to decrease the possibility that teachers completed the surveys under a significantly different understanding of family-centered practices. However, two of the ten interview participants asked for clarification on the concept of family-centered practice, therefore interpretations of the findings and their generalizability need to be made with caution. Moreover, these results could also be influenced by the high social desirability bias effects of survey instruments concerning support for children (Kopcha & Sullivan, 2007; Dykema & Schaeffer, 2000). Participants in study were asked to describe the extent to which they implemented practices focused on supporting children and their families, groups reflecting core values of the society, accountability structures and fellow professionals. It is possible teachers reported they implemented practices that are family-centered more often than they actually did, as it is possible the wanted to present themselves in accordance with expectations placed on their professional roles.

The results of this study did not indicate significant variations in the overall ratings of the six subscales across the three research sites. The size of the sample for this study and the difference in the number of participants for each of the sites did not allow employing more complex comparison analysis, such as ANOVA. However, the distribution of the means across the three sites suggested that participants in Site 1 tended to rate the extent to which they employed family-centered practices slightly lower comparing to participants from Site 2 and Site 3. While it may be possible that indeed

participants from Site 1 used family-centered practices to a lesser extent, their responses may also indicate a smaller effect of social desirability bias for this subsample. Also, the participants working in private childcare programs rated the extent to which they implemented the family-centered practices slightly lower than those from public pre-kindergarten and Head Start programs. These findings were consistent with the teachers' comments on the survey open-ended question and interviews, in that limited access to language supports or professional development opportunities prevented the teachers from private childcare classrooms to address the needs of families of Latino heritage and the young children with disabilities in their programs. This finding suggests that educational systems administrations need to invest more in learning about ways to meet the needs of the teachers and specialists, especially those from the private childcare sector, with appropriate resources and supports to serve children and families. Also, it is essential that all early educators have access to high quality professional development opportunities to ensure support for positive family outcomes. Literature suggests that families report generally high satisfaction levels with the outcomes for their family as a result of the family-centered approach in early intervention services (Hebbeler et al., 2007). However, findings concerning family outcomes for families with young children receiving early intervention services indicate that families are more satisfied with the services they receive for their children, than with services for their family as a whole (Epley et al., 2010; Hebbeler et al., 2007; Summers et al., 2007). It is critical that teacher educators and programs learn about what is effective and what needs to be improved in delivering

services within a family-centered approach, and more research needs to be conducted to examine implementation and its results for family and child outcomes.

Literature also suggests that families indicate that the support they receive to gain the necessary skills or information that would help them meet their child's needs warrants improvement (Summer et al., 2007). More specifically, families from diverse backgrounds seem to indicate lower levels of positive outcomes for their family when compared with families from the majority group (Hebbeler et al., 2007). In other words, programs need to place more emphasis on assisting diverse families in identifying their challenges, and to support teachers in incorporating in their practice the resources and the expertise families bring to the programs.

The results of the current study suggest that teachers reported to use less often practices that are focused on family strengths and practices that empower the families. This finding may reflect the pervasive effect of the need for language support. Using the strengths-based approach implies that the teachers would learn about the strengths of families and their children so they could incorporate them in practice. One might also assume that teachers would initiate and engage in a dialog with families. However, if teachers cannot communicate effectively with parents or caregivers, they will have significant difficulties when trying to learn about family resources, such as the skills, knowledge, beliefs and values, time and materials available to families. Therefore, it is undoubtedly critical that teacher education programs and local systems provide teachers with language support, a fundamental need in their practice. The findings of this study document the need for language support through access to interpreters, help with

documents translation and teacher preparation in Spanish proficiency as a priority. In addition, one unexpected finding of this study was that the educational level and licensure type participants reported to have did not create significant variations in teachers' responses across the six subscales, including the subscale focusing on strengths of the families. It would have been expected that in accordance with the participants' responses at the interviews and the literature of the field emphasizing importance of teacher preparation, participants with higher level of educational preparation and licensed to address a wide variety of children's and families' needs would have reported to employ family-centered practices more often. It is possible that the lack of variations in participants' responses indicate a need for additional preparation to support teachers. In particular, for teachers to genuinely acknowledge and value the expertise and the roles of parents and caregivers, as well as the strengths of the children as a core component of good practice (Dunst et al., 2007).

Moreover, to empower families, teachers and school professionals would require access to the knowledge, resources, and the competencies that provide families with a sense of control to help them improve the quality of their life (Dempsey & Dunst, 2004). To assist families in developing skills to advocate and support development for their children would imply not only to expose the families to information about resources, but also to assist families in learning how they can use them, and help them build on self-help skills, such as advocacy for appropriate services. For families who have recently received a disability or developmental delay diagnosis for their children, conducting a prompt and sensitive assessment of their needs, resources and priorities is essential (Hiebert-Murphy,

Trute, & Wright, 2008). It is critical that teachers assist families in learning about resources while explaining how this information can help with the education of their children and the services they receive, as well as the options for parents to take action. Therefore, teacher education programs need to place a stronger emphasis on preparing early educators in practices that empower families. Furthermore, effective practice does not stop at acknowledging diversity within the families, but it takes an active role by employing both relational and participatory components of family-centered practice to ensure family empowerment and successful outcomes (Olmsted et al., 2010; Dempsey & Dunst, 2004). Thus, searching for ways to develop culturally sensitive, respectful communication with diverse families, and creating opportunities for them to participate in their children's education every step of the way should be a priority for early childhood teachers and specialists.

At the same time, although not consistent in all literature findings, Spanish-speaking families with limited English proficiency seem to report lower outcomes for their families compared to those who speak English, even when comparing with families of Latino heritage who are fluent in English (Olmsted et al., 2010). Considering this, the results of the current study suggest it is very important that teacher educators, programs, and families have a common understanding of family-centered practice and its expected outcomes. Moreover, the additional layer of complexity consisting of language support for families with limited English proficiency aligns with the overall call for more research to gain in-depth understanding of appropriate practice for individual needs and life circumstances of families (Hebbeler et al., 2007).

The area of practices that focus on the family as a unit was operationalized as assisting families to identify needs for the family and the child, helping them to identify goals and outcomes for the family and the child, and assisting in planning and delivery of specialized services that reflect the culture of the family. The findings on this subscale indicated that more than 85% of the teachers either reported to often or always assist families in these aspects. Given that there is a general understanding in the field that addressing the children's needs cannot be achieved without recognizing the central role of the family, and that meeting the needs of the family is one of the key indicators of family-centeredness of programs, these results are highly encouraging for families with young children with disabilities (Hiebert-Murphy et al., 2011; Raspa et al., 2010). The question on the effectiveness of implementation, on the other hand, is beyond the purpose of this study. However, it is worth pondering on the likelihood of their accuracy as they relate to literature findings. Recent studies indicate that families receive less satisfying services that address their needs as a family and that there is a shift in the conceptualization of family-centered practice (Epley et al., 2010; Summers et al., 2007). It is possible that participants in this study reported responses that were desirable for what they believed were the expectations from them as professionals. Moreover, literature indicates there seems to be a disconnection between the beliefs professionals report to have on family-centered practices and the way they actually implement them (Bruder, 2010; Brorson, 2005). Another possibility is that teachers evaluated the extent to which they implemented practices focusing on the family as a unit using their own frames of reference for what these practices should be. The results in this study would be congruent

with literature findings indicating that there are discrepancies in the understanding teachers and families have about what is effective family-centered practice (Dempsey & Keen, 2008).

When asked to what extent they assist in planning and delivering specialized education and care services that reflect the cultural values of the families, fewer participants in this study indicated they use such practices consistently. However, it is critical to incorporate the beliefs and values of families from culturally and linguistically diverse backgrounds in the services they receive to ensure positive family and child outcomes. As studies have indicated variations in outcomes for families by their cultural background, teacher educators should continue to strive in preparing teachers to build on their skills of delivering services sensitive to the family needs (Raspa et al., 2010; Olmsted et al., 2010; Hobbeler et al., 2007).

The overall results of the survey indicate that teachers reported using family-centered practices described in the six subscales often or always. Given the lack of significant variations in the overall data, these findings may suggest two things. It is possible that teachers used family-centered practices consistently and that they were prepared to address the needs of families of Latino heritage in their programs. During the interviews teachers shared that the training they have received and support from administration and community agents helped them significantly in their work with families. However, they also shared a significant number of needs and challenges that affected their overall practice. Therefore, another possibility is that teachers rated the

extent to which they use family-centered practices higher as a result of the general expectation that they are family-centered in their practice.

Factors Influencing Family-Centered Implementation

The second question investigated in this study was whether factors such as educational level, access to professional development opportunities, previous experience of working with families from Latino heritage, or the extent of professional experience, influences the extent to which teachers implement family-centered practices.

The reports of participants in this study did not vary significantly across educational levels, as they reported to have often, or always, used family-centered practices in the six investigated areas. These results are surprising to some degree, as it would be expected that the extent of professional preparation would make a difference in their practice. Consistent with the interviews analysis findings in which participants emphasized the importance of teacher preparation they have benefited during their training, these results may indicate that for some of the teachers in this study their basic training was effective in preparing them to use family-centered practice, and therefore additional preparation towards educational degrees did not create any differences. However, for the teachers who commented on the critical needs for professional preparation in working with families with young children of Latino heritage with disabilities, these findings are inconsistent. Another possibility is that these results may in fact indicate teachers' intent to report desirable reports on their practice. In this situation, it cannot be determined to what degree education creates a difference in teachers' effectiveness to use family-centered practices.

Findings of this study also indicated no significant differences between participants who reported the type of licensure they had and those who did not report this information. However, these results may have been influenced by a non-response effect, as one participant reported the program's license in the space where the survey asked the type of professional licensure she had as a teacher. It is not possible to determine if the participants who did not report this information may have understood it as the type of their program's license. If this was the case, this could explain the lack of variability in the responses of the two groups.

Interestingly, the number of years in teaching experience did not create any variations across the participants' responses in the six subscales, but the number of years in the current position influenced the responses on the subscale that focused on the family as a unit. More specifically, the results of this study suggest that the more experience teachers had in a program, the more inclined they were to assist families in identifying their concerns for their child and family as a whole. Helping the families to identify the concerns they have for their child is critical for families with young children with disabilities (Crais, Roy, & Free, 2006). While it was expected that the overall experience teachers had in the field would influence their practice based on the practical knowledge they gained from the field, the results of this research study indicate that the more knowledgeable teachers become with their program and the more experience they gain, the more they seem to reflect in their practice the importance of culturally sensitive specialized services. These results suggest that for teachers in this sample the knowledge they had about the culture of their program, and the ways to navigate it to use its

resources, was more helpful than the overall experience of teaching during their career. Thus, it is possible that the contextual knowledge was instrumental for teachers in this sample. Interpretations and generalizations based on these findings need to be considered with caution due to the small sample size and the survey related bias effects.

As some of the teachers emphasized in their interviews, administration support was critical in their striving to address the needs of families of Latino heritage and their young children with disabilities. Participants also emphasized how beneficial it was to have the support of their peers in learning effective strategies for working with families. Therefore, for these teachers, the experience they had in the programs made a difference in their practice. These results are congruent with other findings that administrative support is critical for teachers and education professionals who want to use family-centered practices (Wright, Hiebert-Murphy, & Trute, 2010; Salisbury et al., 2009; Mandell & Murray, 2009). Administrators serving young children with disabilities and their families need to instill a culture of promoting families as a core value, and provide teachers with the necessary supports to effectively use family-centered practices.

Survey results also explored if access to professional development created variations in teachers reports of implementing family-centered practices across the six investigated areas. As the results indicate, access to professional development opportunities did not create significant differences in teachers' responses. These results are inconsistent with the interviews responses and the survey open-ended question, in which teachers emphasized the importance of teacher preparation and the strong need for

additional training in working with young children and families of Latino heritage in their programs.

The results of this study also suggest that having more experience in working with families of Latino heritage and their young children with disabilities helps teachers focus more on the family as a unit and to assist families in identifying and using their strengths. These results could be valuable for the field of teacher education, as it may mean that providing preservice teachers with sufficient opportunities to work with families with diverse needs will better prepare them when embarking on their professional journey.

In addition to the previous findings, the results suggest that the amount of practical experience teachers had working with families of Latino heritage and their children helped them assist families in identifying concerns for their child and their family. Having experience in working with families and their children also seemed to help teachers to engage more often in assisting families in setting up goals, identifying desired outcomes, and reflecting their culture in the services provided. The results of this study also suggested that practical experience is beneficial for teachers and school professionals in gaining an understanding of the value that families' communities and cultural groups carry for their well-being and family outcomes.

These results suggest that for teachers in this sample, the knowledge they gained about families of Latino heritage and the experience in serving them helped them to be better prepared to use appropriate strategies when addressing the needs of families in their programs. These results may suggest that gaining knowledge about the families and their culture helps teachers have a better understanding of the value of incorporating

family culture in their practice for better outcomes. These findings could be valuable in creating meaningful professional development opportunities so teachers gain experience in working with families of culturally and linguistically diverse background and develop or build the skills needed to effectively serve all families.

It is possible that the variation in teachers' responses based on the past and current experience of working with families Latino heritage and their children with disabilities, reflects their preoccupation with serving the families they currently had enrolled in their programs and recent focus on addressing their unique needs. Regardless, these findings may indicate that offering teachers professional development opportunities with access to practical experiences to exercise and improve their skills would help them be more prepared to meet the needs of their children and families.

Influence of Professional and Cultural Factors

The third question explored in this study focused on the influence of cultural and professional factors on family-centered practice implementation. Participants explained the influence of professional and cultural factors on the degree and the ways they used family-centered practices. As the literature indicates, teachers tend to support families in decisions that are consistent with their own view on education, and it is critical to explore teachers' views in regards to family-centered practice (Mandell & Murray, 2009; Minke & Scott, 1995). The current shift in teacher preparation incorporating special education and specific emphasis on cultural competence for early childhood teachers was a response to the push for inclusion and the need to reflect the increasing diversity within young children and their families (Lim, Maxwell, Able-Boone, & Zimmer, 2009; Lim &

Able-Boone, 2005). Consistent with the findings in the field that teacher preparation and professional training are priorities to be constantly addressed, teachers participating in this study confirmed that the course work they had during their teacher preparation was essential for their current practice. As findings in this study suggest, coursework focused on training teachers to work with children with a wide variety of needs and backgrounds is helping early educators to be prepared to meet the needs of children and families attending their programs. Moreover, courses focused on child development and family studies, special education, as well as strategies to find resources for children and families in the community and connecting them to sources of support within the educational system seemed to be particularly helpful. These findings may suggest that teachers recognize that families' needs are sometimes beyond the traditional limitations of the classroom, and that at least theoretically they understand the importance of searching for ways to address them to assist families in finding the appropriate supports for their children. The emphasis on professional training and support to work closely with the families of Latino heritage suggests that effective teacher preparation and professional development for working with young children and families from culturally and linguistically diverse backgrounds are highly needed and should be a priority for teacher educators. As an example, the results of this study revealed that most of the teachers identified home visits, volunteerism and parent-teacher meetings as the main opportunities for families to engage in their children's education, which indicates that it is critical that teachers receive support in learning how to create additional opportunities to include them in their programs and help them support children. Children, teachers and

families benefit from parents' engagement in programs, as they enhance the exposure to all children to cultural diversity and guides teachers' knowledge and practices to address the needs of children.

The findings in this study also align with the emphasis on meaningful practice opportunities in teacher preparation (Lim & Able-Boone, 2005). Placement during teaching practicum or internships in settings that reflect the current level of early childhood education and care programs' diversity, as well as professional development opportunities to work with families of Latino heritage, helps early educators to be prepared for their own job placements. Likewise, it is important to incorporate a philosophy of diversity as a central component of their teaching. Therefore, it is critical that teacher education programs provide preservice teachers with learning opportunities meaningful for their future work sites.

In addition to professional factors, this study yields findings on how the cultural background of teachers is reflected in their practice. Teachers' own cultural background is reflected in their practice, and they use their own cultural lenses to interpret their experiences in their work with families of Latino heritage and the young children enrolled in programs. Most of the teachers in the study referred to similarities between their own cultural background and those of the families. As research findings indicate teachers are prone to be more effective in their support for families when they share the same values and beliefs (Mandell & Murray, 2004). It is also critical to increase the diversity of staff in programs to enhance the ethnic balance and therefore increase the prospects of a more effective service delivery. At the same time, these findings confirm

the needs for carefully guided teacher training in learning about and embracing a wide variety of needs. Although reporting one's experience in the attempt to understand the needs of children and families can be a useful strategy, it would be highly recommended to prepare teachers to work and support families with different values and beliefs from their own. Indeed, other teachers in this study referred to their beginnings in learning and experiencing cultural diversity, or to their own values reflecting openness towards diversity as a learning opportunity. Nurturing openness and appreciation for cultural diversity and supporting worldviews reflecting love for humanity could help teachers become responsive to the needs of the families. Therefore, helping teachers to identify or to create in their own worldview a space where they can appreciate the diversity within families and children would better prepare them to understand and honor the needs of families of Latino heritage and their young children.

The findings of this study also emphasized the central role of relationships between teachers and families in addressing the needs of children. These findings are consistent with current research indicating a shift from conceptualization of family-centered practices focusing on family as a unit towards a focus on family-professional relationships (Epley et al., 2010). As this study suggests, teachers acknowledge that effective communication plays a central role in creating partnerships with families. Being friendly, positive, flexible, and encouraging with families in developing a vision for their children are highly recommended for teachers and school professionals who work to develop collaborative partnerships with families of children with disabilities (Hiebert-Murphy et al., 2011; Turnbull et al., 2010). In addition, as this study confirms, trust is one

of the essentials in establishing collaborative relationships with families, as well as the priority that needs to be placed in encouraging and sustaining engagement of families of Latino heritage in their children's education (Salas, Lopez, Chinn, & Menchaca-Lopez, 2005). Therefore, teacher preparation programs and professional development opportunities should further emphasize training for teachers to be able to use the skills to develop and maintain trustful relationships with families in their programs.

Support, Needs, and Challenges

The fourth question addressed in this study examined the main sources of support, needs and challenges in implementing family-centered practices for families of Latino heritage and their young children with disabilities. Findings confirm the importance of administration support for teachers when they are striving to implement family-centered practices (Mandell & Murray, 2009; Salisbury et al., 2009). It is essential that programs not only promote a family-centered culture to send a clear message to teachers and families that they are to be valued, but also to provide with the concrete supports to allow teaches to materialize the orientation of programs into positive family outcomes.

Incorporating the community resources in practice allows teachers to create the avenues to assist families address needs beyond classroom or program resources. The results of this study align with findings that families need more assistance in accessing community resources (Raspa et al., 2010; Olmsted et al., 2010). Connecting families to resources compatible with their own culture and values ensures that families find answers and solutions to their needs from sources that can match their values. Moreover, collaboration with local programs creates opportunities for service delivery and allows

families and teachers to build on support networks (Correa, Bonilla, & Reyes-MacPherson, 2011). Literature indicates that when service coordination reflects family-centeredness, families report needing fewer psychosocial support resources (Trute, Hiebert-Murphy, & Wright, 2008).

As this study confirms, teachers and the linguistically diverse families in their programs have a high need for language support (Hardin et al., 2010). Parents and teacher reports document the need for staff to interpret or to translate documents, and for more bilingual specialists and teachers. The findings of this study indicated that limited resources at the rural sites, often poses a challenge for programs, especially those related to language support (Jephson, Russell, & Youngblood, 2001). However, the findings of this study not only indicate a need for bilingual specialists to work with young children of Latino heritage with disabilities, but also for language training opportunities for teachers as a response to the lack of language support in the rural counties where they were practicing. Therefore, it is recommended that teacher education programs continue to place a high emphasis in preparing bilingual professionals to work with families of Latino heritage and their children.

Diversity of Families of Latino Heritage and Their Young Children with Disabilities

Families and their young children attending preschool programs have unique resources and needs that programs need to consider. The results of this study indicate that teachers acknowledge the variety within families of Latino heritage and their young children with disabilities. Factors such as length of time the families have spent in United States, their familiarity with the educational system, their time and economical resources,

were all factors that emerged from the results of this study as reminders of the need for individualized approaches, identified as critical by the literature of the field as well (Turnbull et al., 2010; Salas et al., 2005). Teachers stressed the emphasis they place on involving families and their efforts to reflect the culture of children in the classroom and to address their needs. However, the findings in this study reflect discrepancies between the ways teachers rated the extent to which they used family centered practices and the experiences they shared during the interviews. For instance, it is expected that the lack of resources in language support, which is critical for basic communication, would have a pervasive effect on practice. While some of the teachers acknowledged this aspect consistently through stated needs for more interpreters, translated documents, language training and lower reports at implementation level, others were inconsistent in this regard by reporting extensive use of family-centered practices despite stated significant language barriers. It is possible that the topic of family-centered practices implemented for families of Latino heritage and their children to have determined a bias in participants' survey responses, as it is highly socially desirable and professionally required to meet the need of all families and to honor cultural diversity.

Conclusions

Addressing the needs of young children with disabilities and their families within a family-centered approach has been extensively documented as recommended practice. Parent reports indicate that when teachers employ practices that are focusing on the needs of the family, strategies that incorporate the resources and expertise families have, and

when relationships between teachers and families are collaborative, outcomes for the families tend to be positive and satisfying for caregivers.

This study explored teachers' reports on family-centered practice implementation for families of Latino heritage who have young children with disabilities. The results of this study suggested that although teachers reported to employ family-centered practices extensively, multiple challenges impeded them from effectively incorporating them in their work. While for some teachers the lack of access to resources, such as Spanish language support, posed significant challenges in the ways they addressed the needs of the families and their children, other participants reported that they highly benefited from support from their programs' administration. Moreover, participants in this study reported to acknowledge the cultural diversity within families of Latino heritage as a strength they most often reflected in their practice. They also described how teacher training, professional development opportunities and their own cultural lenses influenced the ways they implemented family-centered practices. Consistent with the literature on the topic, the results of this study indicate the need for teacher preparation on culturally sensitive practices to help address the needs of families of young children with disabilities. Moreover, findings of this study suggest that offering access to resources and support for early educators, as well as placing high emphasis on achieving a shared understanding between families and professionals on effective family-centered practice is critical to ensure positive experiences for families and their children.

Directions of Future Research

This study has focused on exploring implementation of family-centered practices for families of Latino heritage who have young children with disabilities in rural areas. Although research on family-centered practice implementation has been previously conducted, most of the findings are based on parent reports and less on teacher or administrators reports. However, to have a more accurate understanding of the needs for teacher preparation and program supports, future research needs to be conducted using observations on the implementation of family-centered practices. Also, while this study explored implementation of family-centered practices in rural sites with their unique resources and challenges, one possible avenue for future research is to investigate implementation in urban areas, with the intention to understand practice effectiveness for various type of programs.

In addition, while there is a general understanding in the field of early childhood special education on what family-centered practice is, variations in professionals', programs' and families' view should be further explored. Another area for future research is to continue explore the set of practices that define each of the areas of family-centered practices and to document their effectiveness for building an evidence-based practices knowledge database to guide teacher educators and practitioners working with families from culturally and linguistically diverse backrounds. Finally, while the experiences of culturally diverse families within early childhood special education and early intervention services have been explored, more focused research on how programs address the needs

of culturally and linguistically diverse children and their families would help teacher educators and programs understand how to effectively address their unique needs.

Limitations of the Study

As is typical with studies of this type, there are several limitations. This study has used a survey tool asking participants to report the extent to which they implemented family-centered practices. As with most of the self-rating tools, the survey used in this study may have created a self-presentation bias, as often time participants who self-report on surveys, including those focused on child supports, want to avoid responses counter to the expectations or values of others in the field (Kopcha & Sullivan, 2007; Dykema & Schaeffer, 2000). In addition, while some of the findings were confirmed by the qualitative data collected with the interviews, no observations have been conducted to triangulate the results on family-centered practice implementation. Future research focused on implementation of family-centered practices would benefit from employing methods of triangulation based on direct observation and parents reports.

This study used a purposive sampling procedure to ensure richness of data. However, this procedure limited the generalizability of the findings to its research sites. The ability to generalize the findings of this study was also limited by the small sample size. To generate findings representative for a wider segment of educational settings and increase their utility, further research should employ random sampling with a larger number of participants from various preschool program types. Finally, although at a representative percentage for North Carolina, this research study has been conducted in three rural sites with a relatively small rate of population of Latino heritage compared to

national percentage. To have a better understanding of the unique challenges encountered by teachers and families in rural areas, research examining family-centered practice implementation should be conducted at a larger extent and in rural areas with various degrees of representativeness for population of Latino heritage.

REFERENCES

Bailey, D. B., Bruder, M. B., Hebbeler, K., Carta, J., Defosset, M., Greenwood, C., Kahn, L., Mallik, S., Markowitz, J., Spiker, D., Walker, D., & Barton, L. (2006). Recommended outcomes for families of young children with disabilities. *Journal of Early Intervention, 28,* 227–251.

Brorson, K. (2005). The culture of a home visit in early intervention. *Journal of Early Childhood Research, 3,* 51–76.

Brotherson, M. J., Summers, J. A., Naig, L. A., Kyzar, K., Friend, A., Epley, P., . . . Turnbull, A. P. (2010). Partnership patterns: Addressing emotional needs in early intervention. *Topics in Early Childhood Special Education, 30*(1), 32-45.

Bruder, M. B. (2010). Early childhood intervention: A promise to children and families for their future. *Exceptional children, 76*(3), 339–355.

Bruder, M. B., & Dunst, C. (2005). Personnel preparation in recommended early intervention practices: Degree of emphasis across disciplines. *Topics in Early Childhood Special Education, 25*(1), 25–33.

Buysse, V., Castro, D. C., West, T., & Skinner, M. L. (2004). *Addressing the needs of Latino children: A national survey of state administrators of early childhood programs. Executive summary.* Chapel Hill: The University of North Carolina, FPG Child Development Institute.

Buysse, V., Castro, D., West, T., & Skinner, M. L. (2005). Addressing the needs of Latino children: A national survey of state administrators of early childhood programs. *Early Childhood Research Quarterly, 20,* 146–163.

Campbell, P. H., & Halbert, J. (2002). Between research and practice: Provider perspectives about early intervention. *Topics in Early Childhood Special Education, 22*, 213–226.

Campbell, P. H., & Sawyer, L. B. (2007). Supporting learning opportunities in natural settings through participation-based services. *Journal of Early Intervention, 29*, 287–305.

Campbell, P. H., & Sawyer, L. B. (2009). Changing early intervention providers' home visiting skills through participation in professional development. *Topics in Early Childhood Special Education, 28*, 219–234.

Correa, V., Bonilla, Z., & Reyes-MacPherson, M. (2011). Support Networks of Single Puerto Rican Mothers of Children with Disabilities. *Journal of Child & Family Studies, 20*(1), 66-77.

Crabtree, B. F., & Miller, W. L. (1999). Using codes and code manuals: A template organizing style of organization. In B. F. Crabtree & W. L. Miller (Eds.), *Doing qualitative research* (2nd ed., pp. 163–178). Thousand Oaks, CA: Sage.

Crais, E. R., Roy, V., & Free, K. (2006). Parents' and professionals' perceptions of the implementation of family-centered practices in child assessments. *American Journal of Speech-Language Pathology, 15*(4), 365-377.

Creswell, J. W. (2003). *Research design: Quantitative, qualitative, and mixed methods approaches* (2nd ed.). Thousand Oaks, CA: Sage.

Dempsey, I., & Dunst, C. J. (2004). Helpgiving styles and parent empowerment in families with a young child with a disability. *Journal of Intellectual & Developmental Disability, 29,* 40-51.

Dempsey, I., & Keen, D. (2008). A review of processes and outcomes in family-centered services for children with a disability. *Topics in Early Childhood Special Education, 28*(1), 42–52.

Dempsey, I., Keen, D., Pennell, D., O'Reilly, J., & Neilands, J. (2009). Parent stress, parenting competence and family-centered support to young children with an intellectual or developmental disability. *Research in Developmental Disabilities, 30,* 558-566.

Di Pofi, J. A. (2001). Organizational diagnostics: Integrating qualitative and quantitative methodology. *Journal of Organizational Change Management, 15,* 156–172. doi: 10.1177/0271121407313525

Dunst, C. J. (2002). Family-centered practices: Birth through high school. *Journal of Special Education, 36,* 139–147.

Dunst, C. J., Boyd, K., Trivette, C. M., & Hamby, D. (2002). Family-oriented program models and professional helpgiving practices. *Family Relations, 51,* 221–229.

Dunst, C. J., & Dempsey, I. (2007). Family-professional partnerships and parenting competence, confidence, and enjoyment. *International Journal of Disability, Development & Education, 54*(3), 305-318.

Dunst, C. J., & Trivette, C. M. (2008). Using research evidence to inform and evaluate early childhood intervention practices. *Topics in Early Childhood Special Education, 20,* 1–13.

Dunst, C. J., & Trivette, C. M. (2009). Capacity-building family-systems intervention practices. *Journal of Family Social Work, 12,* 119–143.

Dunst, C. J., Trivette, C. M., & Deal, A. G. (1988). *Enabling and empowering families: Principles and guidelines for practice.* Cambridge, MA: Brookline Books.

Dunst, C. J., Trivette, C. M., & Hamby, D. (2007). Meta-analysis of family-centered helpgiving practices research. *Mental Retardation & Developmental Disabilities Research Reviews, 13*(4), 370–378.

Dykema, J., & Schaeffer, N. (2000). Events, instruments, and reporting errors. *American Sociological Review, 65, 619-629.*

Epley, P., Summers, J., & Turnbull, A. (2010). Characteristics and trends in family-centered conceptualizations. *Journal of Family Social Work*, *13*(3), 269-285.

Espe-Sherwindt, M. (2008). Family-centred practice: collaboration, competency and evidence. *Support for Learning, 23*(3), 136-143.

Fleming, J. L., Sawyer, L., & Campbell, P. H. (2011). Early intervention providers' perspectives about implementing participation-based practices. *Topics in Early Childhood Special Education, 30*(4), 233-244.

Friend, M., & Cook, L. (2010). *Interactions: Collaboration skills for school professionals* (6th ed.). Columbus, OH: Merrill.

Friend, A. C., Summers, J. A., & Turnbull, A. P. (in press). Impacts of family support in early childhood intervention research. *Education and Training in Developmental Disabilities, 44*(4), 453–470.

Gallagher, P. A., Rhodes, C. A., & Darling, S. M. (2004). Parents as professionals in early intervention: A parent educator model. *Topics in Early Childhood Special Education, 24,* 5–13.

González Castro, F., Kellison, J. G., Boyd1, S. J., & Kopak, A. (2010). A methodology for conducting integrative mixed methods research and data analyses. *Journal of Mixed Methods Research, 4,* 342–360.

Grace, R., Llewellyn, G., Wedgwood, N., Fenech, M., & McConnell, D. (2008). Far from ideal: Everyday experiences of mothers and early childhood professionals negotiating an inclusive early childhood experience in the Australian context. *Topics in Early Childhood Special Education, 28*(1), 18–30.

Greenfield, P. M., Keller, H., Fuligni, A., & Maynard, A. (2003). Cultural pathways through universal development. *Annual Review of Psychology, 54,* 461–490.

Guiberson, M. (2009). Hispanic representation in special education: Patterns and implications. *Preventing School Failure, 53*(3), 167–176.

Hanson, W. E., Creswell, J. W., Petska, K. S., Plano Clark, V. L., & Creswell, J. D. (2005). Mixed methods research designs in counseling psychology. *Journal of Counseling Psychology, 52*(2), 224–235.

Hansuvadha, N. (2006). *Best practice is challenging practice: Beginning teachers' attitudes in early childhood special education.* Ph.D. dissertation, University of Washington, Seattle, Washington.

Hardin, B. J., Lower, J. K., Smallwood Robinson, G., Chakravarthi, S., Li, L., & Jordan, C. (2010). Teachers, families, and communities supporting English language learners in inclusive pre-kindergartens: An evaluation of a professional development model. *Journal of early childhood teacher education, 31,* 20–36.

Hardin, B. J., Mereoiu, M., Hung, H. S., & Roach-Scott, M. (2009). Investigating parent and professional perspectives concerning special education services for preschool Latino children. *Early Childhood Education Journal, 37,* 93–102.

Harry, B. (1992). *Cultural diversity, families, and the special education system: Communication and empowerment.* New York: Teachers College Press.

Harry, B. (2008). Collaboration with culturally and linguistically diverse families: Ideal versus reality. *Exceptional Children, 74*(3), 372–388.

Harry, B., Allen, N., & McLaughlin, M. (1995). Communication vs. compliance: A three year study of the evolution of African American parents' participation in special education. *Exceptional Children, 61,* 364–377.

Hebbeler, K., Spiker, D., Bailey, D., Scarborough, A., Mallik, S., Simeonsson, R., . . . Nelson, L. (2007). *Early intervention for infants and toddlers with disabilities and their families: Participants, services, and outcomes* (SRI Project 11247). Retrieved May 1, 2011, from http://www.sri.com/neils/pdfs/NEILS_Report_02_07_Final2.pdf

Hiebert-Murphy, D., Trute, B., & Wright, A. (2008). Patterns of entry to community-based services for families with children with developmental disabilities: Implications for social work practice. *Child & Family Social Work, 13*(4), 423-432.

Hiebert-Murphy, D., Trute, B., & Wright, A. (2011). Parents' definition of effective child disability support services: Implications for implementing family-centered practice. *Journal of Family Social Work, 14*(2), 144-158.

Individuals with Disabilities Education Improvement Act. 20 U.S.C. § 1400 *et seq.*

Jephson, M. B., Russell, K. P., & Youngblood, L. A. (2001). Families and early intervention professionals in rural areas: Unique challenges. *Rural Special Education Quarterly, 20*(3), 20-24.

Kaczmarek, L., Goldstein, H., Florey, J., Carter, A., & Cannon, S. (2004). Supporting families: A preschool model. *Topics in Early Childhood Special Education, 24*(4), 213–226.

Keen, D. (2007). Parents, families, and partnerships: Issues and considerations. *International Journal of Disability, Development & Education, 54*(3), 339-349.

Keller-Allen, C. (2006). *English language learners with disabilities: Identification and other state policies and issues.* Retrieved May 10, 2011, from http://www.ecs.org/html/offsite.asp?document=http%3A%2F%2Fprojectforum.org%2Fdocs%2FEnglishLanguageLearnerswithDisabilities-IdentificationandOtherStatePoliciesandIssues.pdf+.

King, G., Kertoy, M., King, S., Law, M., Rosenbaum, P., & Hurley, P. (2003). A Measure of parents' and service providers' beliefs about participation in family-centered services. *Children's Health Care, 32*(3), 191.

King, G., Strachan, D., Tucker, M., Duwyn, B., Desserud, S., & Shillington, M. (2009). The application of a transdisciplinary model for early intervention services. *Infants and Young Children, 22*(3), 211-223.

Kopcha, T., & Sullivan, H. (2007). Self-presentation bias in surveys of teachers' educational technology practices. *Educational Technology Research & Development, 55*(6), 627-646.

Law, M., Hanna, S., King, G., Hurley, P., King, S., Kertoy, M., & Rosebaum, P. (2003). Factors affecting family-centered service delivery for children with disabilities. *Child Care Health Development, 29,* 357–366.

Law, M., Teplicky, R, King, S., King, G., Kertoy, M., Moning, T., Rosenbaum, P., & Burke-Gaffney, J. (2005). Family-centered service: moving ideas into practice. *Child Care Health Development, 31,* 633–642.

Lee, K., & Johnson, A. (2007). Child Development in Cultural Contexts: Implications of Cultural Psychology for Early Childhood Teacher Education. *Early Childhood Education Journal, 35*(3), 233–243.

Leech, N. L., & Onwuegbuzie, A. J. (2009). A typology of mixed methods research designs. *Qualitative Quantitative, 43,* 265–275.

Lim, C. I., & Able-Boone, H. (2005). Diversity competencies within early childhood teacher preparation: Innovative practices and future directions. *Journal of Early Childhood Teacher Education, 26,* 225–238.

Lim, C. I., Maxwell, K. L., Able-Boone, H., & Zimmer, C. R. (2009). Cultural and linguistic diversity in early childhood teacher preparation: The impact of contextual characteristics on coursework and practica. *Early Childhood Research Quarterly, 24*(1), 64-76.

Mandell, C. J., & Murray, M. (2009). Administrators' understanding and use of family-centered practices. *Journal of Early Intervention*, *32*(1), 17–37.

Maxwell, J. A. (1992). Understanding and validity in qualitative research. *Harvard Educational Review, 62*(3), 279–300.

Miles, M., & Huberman, A. M. (1994). *Qualitative data analysis* (2nd ed.). Thousand Oaks, CA: Sage.

Minke, K., & Scott, M. (1995). Parent-professional relationships in early intervention: A qualitative study. *Topics in Early Childhood Special Education, 15*, 335-352.

Murray, M. M., Christensen, K. A., Umbarger, G. T., Rade, K. C, Aldridge, K., & Niemeyer, J. A. (2007). Supporting family choice. *Early Childhood Education Journal, 35,* 111–117.

Murray M. M., & Mandell, C. J. (2004). Evaluation of a family-centered early childhood special education preservice model by program graduates. *Topics in Early Childhood Special Education, 24*(4), 238–249.

Murray, M., & Mandell, C. J. (2006). On-the-job practices of early childhood special education providers trained in family-centered practices. *Journal of Early Intervention, 28,* 125–139.

National Center for Education Statistics. (2006). *Initial Results from the 2005 NHES Early Childhood Program Participation Survey*. Washington, DC: Author. Retrieved October 1, 2010 from: http://www.nces.ed.gov/pubs2006/earlychild/tables/table_1.asp?referrer=report

No Child Left Behind Act of 2001. (2002). 20 U.S.C. § 6301 *et seq.*

Olivos, E. M. (2009). Collaboration with Latino families: A critical perspective of home-school interactions. *Intervention in School & Clinic, 45*(2), 109-115.

Olmsted, M., Bailey, D., Raspa, M., Nelson, R., Robinson, N., Simpson, M., & Guillen, C. (2010). Outcomes reported by Spanish-speaking families in early intervention. *Topics in Early Childhood Special Education: Families, Family Support, and Early Intervention, 30*(1), 46–55.

Pang, Y. (2010). Facilitating family involvement in early intervention to preschool transition. *The School Community Journal, 20,* 183-198.

Pretti-Frontzcak, K., Giallourakis, A., Janas, D., & Hayes, A. (2002). Using a family-centered preservice curriculum to prepare early intervention and early childhood special education personnel. *Teacher Education and Special Education, 25,* 291–297.

Raspa, M., Bailey, J. B., Olmsted, M. G., Nelson, R., Robinson, N., Simpson, M., . . . Houts, R. (2010). Measuring family outcomes early intervention: Findings from a large-scale assessment. *Exceptional Children, 76*(4), 496-510.

Rodger, S., Keen, D., Braithwaite, M., & Cook, S. (2008). Mothers' satisfaction with a home based early intervention programs for children with ASD. *Journal of Applied Research in Intellectual Disabilities, 21*(2), 174–182.

Salas, L., Lopez, E. J., Chinn, K., & Menchaca-Lopez, E. (2005). Can special education teachers create parent partnership with Mexican American families? !si se pueda! (Reaching out to families: Parental participation). *Multicultural Education, 13*(2), 52.

Salisbury, C. L., Woods, J., & Copeland, C. (2009). Provider perspectives on adopting and using collaborative consultation in natural environments. *Topics in Early Childhood Special Education, 22,* 1–16.

Sandall, S., Hemmeter, M. L., Smith B. J., & McLean, M. E. (Eds.). (2005). *DEC recommended practices: A comprehensive guide for practical application in early intervention/early childhood special education.* Missoula, MT: Division for Early Childhood.

Sewell, T. (2007). Family-centered practice in early intervention and early childhood special education personnel preparation. Ph.D. dissertation, Tennessee Technological University, Cookeville, Tennessee.

Souto-Manning, M. (2009). Educating Latino children: International perspectives and values in early education. *Childhood Education, 85*(3), 182–186.

Summers, J. A., Marquis, J., Mannan, H., Turnbull, A. P., Fleming, K., Poston, D. J., . . . Kupzyk, K. (2007). Relationship of perceived adequacy of services, family professional partnerships, and family quality of life in early childhood service programs. *International Journal of Developmental, Disability, and Education, 54*(3), 319–338.

Summers, J. A., Poston, D. J., Turnbull, A. P., Marquis, J., Hoffman, L., Mannan, H., & Wang, M. (2005). Conceptualizing and measuring family quality of life. *Journal of International Disability Research, 49,* 777–783.

Swick, K. J. (2003). Working with families: Communication concepts for strengthening family-school-community partnerships. *Early Childhood Education Journal, 30*(4), 275–280.

Swick, K. J., & Williams, R. D. (2006). An analysis of Bronfenbrenner's bio-ecological perspective for early childhood educators: Implications for working with families experiencing stress. *Early Childhood Education Journal, 33,* 371–378.

Trivette, C., Dunst, C., & Hamby, D. (2010). Influences of family-systems intervention practices on parent-child interactions and child development. *Topics in Early Childhood Special Education: Families, Family Support, and Early Intervention, 30*(1), 3–19.

Trute, B. B., Hiebert-Murphy, D. D., & Wright, A. A. (2008). Family-centred service coordination in childhood health and disability services: the search for meaningful service outcome measures. *Child: Care, Health & Development, 34(3),* 367-372.

Turnbull, A. P., Summers, J., Lee, S., & Kyzar, K. (2007). Conceptualization and measurement of family outcomes associated with families of individuals with intellectual disabilities. *Mental Retardation & Developmental Disabilities Research Reviews, 13(4),* 346-356.

Turnbull, A., Turnbull, R., Erwin, E. J., Soodak, L. C., & Shogren, K. A. (2010). *Families, professionals, and exceptionality: Positive outcomes through partnerships and trust* (6th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.

U.S. Census Bureau. (2008). *U.S. Census Bureau1970, 1980, 1990, and 2000 Decennial Censuses; Population Projections, July 1, 2010 to July 1, 2050.* Washington, DC: Author.

U.S. Census Bureau, 2005-2009 American Community Survey, http://factfinder.census.gov/servlet/ADPTable?_bm=y&-geo_id=05000US37057&-qr_name=ACS_2009_5YR_G00_DP5YR2&-ds_name=ACS_2009_5YR_G00_&-_lang=en&-_sse=on

U.S. Census Bureau, Population Estimates, July 1, 2000 to July 1, 2006. Internet Release Date: February 08, 2008. http://www.census.gov/population/www/socdemo/hispanic/hispanic_pop_presentation.html

U.S. Census Bureau: State and County QuickFacts. Data derived from Population Estimates, Census of Population and Housing, Small Area Income and Poverty Estimates, State and County Housing Unit Estimates, County Business Patterns, Nonemployer Statistics, Economic Census, Survey of Business Owners, Building

Permits, Consolidated Federal Funds Report. http://quickfacts.census.gov/qfd/states/37/37057.html

U.S. Department of Education, Office of Special Education Programs, Data Analysis System (DANS), OMB #1820-0043: "Children with Disabilities Receiving Special Education Under Part B of the Individuals with Disabilities Education Act," 2008. Data updated as of August 3, 2009.

Vitale, D. C., Armenakis, A. A., & Field, H. S. (2008). Integrating qualitative and quantitative methods for organizational diagnosis: Possible priming effects? *Journal of Mixed Methods Research, 2,* 87–105.

Wang, M., & Brown, R. (2009). Family quality of life: A framework for policy and social service provisions to support families of children with disabilities. *Journal of Family Social Work, 12,* 144–67.

Withrow, R. (2008). Early intervention with Latino families: Implications for practice. *Journal of Multicultural Counseling and Development, 36*(4), 245–256.

Woods, J., Kashinath, S., & Goldstein, H. (2004). Effects of embedding caregiver-implemented teaching strategies in daily routines on children's communication outcomes. *Journal of Early Intervention, 26,* 175-193.

Wright, A., Hiebert-Murphy, D., & Trute, B. (2010). Professionals' perspectives on organizational factors that support or hinder the successful implementation of family-centered practice. *Journal of Family Social Work, 13*(2), 114-130.

APPENDIX A

FAMILY-CENTERED PRACTICES PROFESSIONALS SURVEY

Purpose

The purpose of this survey is to have a better understanding about the ways teachers and families of young children with special needs of Latino heritage work together. Only project staff will have access to the information we collect on this survey, and all gathered data will be treated as confidential.

Instructions

Please read these instructions carefully before completing the survey. If you have questions, please contact Mariana Mereoiu at [*email address*].

- Please record your answers in ink.
- Please write neatly so we can accurately record your responses.
- Please respond completely to each item.
- If an item does not apply to you, please write NA (for "Not Applicable") in the space provided. Please do not leave any blank spaces. We need to be able to enter a response for each item.
- If you have an answer for the item that does not fit one of the categories, please enter the appropriate information in the "other" category.

Thank you for participating in this research study! Your participation in greatly appreciated!

**10 participants in this research project will be randomly chosen (based on the ID numbers assigned) for a 40-45 minutes anonymous interview focused on clarifications on the survey questions or additional comments. Participants who agree to participate in the interview will receive a book on recommended practices for working with diverse families, and 2 of these 10 participants will be randomly assigned to receive a $25VISA card.*

This page will be removed and an identification number will be used to keep your answers confidential.

Name _____
Program _____
County_____
Date _____

© 2011 Mariana Mereoiu

For research analysis purpose only:
Project ID# _____

Demographics:

1. Gender: □ Female
□ Male

2. Age range: □ 18-25 yrs □ 26-35 yrs □ 36-45 yrs □ 46+ yrs

3. Country of birth: _____

4. Race/ethnicity: □ African American □ American Indian or Alaskan Native □ Asian □ Middle-eastern
□ Hispanic Origin, please specify □ Native Hawaiian or Pacific Islander □ White □ Other, please specify

5. First language:_____ **6. If proficient in other languages, please specify**_____

7. Education level: □ Bachelor Degree □ Associate Degree □ Master Degree □ Doctoral Degree □ Other, please specify_____

8. Licensure type:_____ **9. Years in current position:**_____ **10: Years teaching:**_____

11. Professional development for working with culturally diverse children and families. Please specify type of setting, method of delivery, length or frequency and focus area:

_____

_____

12. Experience working with children with disabilities of Latino heritage and their families: □ Yes □ No. If yes, approximately how many years?_____

13. Currently serving children with disabilities of Latino heritage and their families: □ Yes □ No. If yes, approximately how many families?_____

14. Type of program: □ Public School Prekindergarten □ Private Childcare □ Head Start □ Other, please specify_____

15. Number of children in your classroom_____ **16. Number of children of Latino heritage in your classroom:** _____

17. Inclusive classroom: □ Yes □ No

© 2011 Mariana Mereoiu

For research analysis purpose only:
Project ID# _____

Please read and mark the following statements:
(*the term *families of Latino heritage* refers here to Spanish speaking families from Latin American countries, first or successive generations)

I. Focusing on the family as a unit

When I work with families of Latino heritage who have children with disabilities…	Never	Rarely	Sometimes	Often	Always	NA
1. …I assist them in identifying their concerns for their child and family (e.g., through conversations, interviews, etc.).	1	2	3	4	5	NA
2. …I assist them in setting goals and outcomes for their child and family (e.g., learning about the hopes and dreams of the family for the child, etc.).	1	2	3	4	5	NA
3. … I assist in planning and delivering specialized services that reflect the cultural values of the family (e.g., using the family's knowledge and skills resources for the IEP goals, activities, etc.).	1	2	3	4	5	NA

II. Focusing on the family's strengths:

When I work with families of Latino heritage who have children with disabilities…	Never	Rarely	Sometimes	Often	Always	NA
4. … I assist them in identifying and using their family strengths (e.g. learning about family members' skills, matching strengths with a particular activity for the child, etc.).	1	2	3	4	5	NA
5. …I rely on the values and beliefs of families of Latino heritage to establish collaborative partnerships between professionals and families.	1	2	3	4	5	NA
6. …I use the families' strengths when I assist with design and delivery of specialized services for the child.	1	2	3	4	5	NA
7. …I create goals that build on the competence of the family.	1	2	3	4	5	NA

© 2011 Mariana Mereoiu

For research analysis purpose only:
Project ID# _____

III. Empowering families…

When I work with families of Latino heritage who have children with disabilities…		Never	Rarely	Sometimes	Often	Always	NA
8.	… I assist them in developing and using advocacy skills (e.g., providing them with information on their rights, on the specialized education services and processes involved, etc.).	1	2	3	4	5	NA
9.	…I support their decisions even when having different perspectives on what better serves the child and the family.	1	2	3	4	5	NA
10.	… I assist them in identifying resources and services that could address their needs (e.g., provide information on parent support groups and other community resources, explain special education services, etc.).	1	2	3	4	5	NA
11.	… I help family members develop skills that enable them to address their family and children's needs (e.g., strategies that enable parents to support their children's literacy, communication with professionals, etc.)	1	2	3	4	5	NA
12	…I assist them in receiving all information necessary to make informed decisions.	1	2	3	4	5	NA

IV. Collaboration with families …

When I work with families of Latino heritage who have children with disabilities…		Never	Rarely	Sometimes	Often	Always	NA
13.	…I strive to establish respectful relationships.	1	2	3	4	5	NA
14.	…I use culturally appropriate strategies to communicate with each family (e.g. learning about family's language preference, arrange for interpreters, etc.).	1	2	3	4	5	NA
15.	…I trust them to work together for planning and implementing services for their young children.	1	2	3	4	5	NA
16.	…I make sure they fully understand and use the information they receive (e.g., use an interpreter, provide written information in Spanish).	1	2	3	4	5	NA
17.	…I routinely use collaborative, culturally sensitive exchanges of information (e.g., use communication means preferred by the family, provide information in preferred language, etc.).	1	2	3	4	5	NA

© 2011 Mariana Mereoiu

For research analysis purpose only:
Project ID# ____

V. Individualized practices…

When I work with families of Latino heritage who have children with disabilities…		Never	Rarely	Sometimes	Often	Always	NA
18.	… I take into account the family's vision for their child's future (e.g., learning about the family's hopes for the future when planning and assisting in specialized services delivery).	1	2	3	4	5	NA
19.	…I assist in reflecting families' characteristics and ways of functioning in the ways I am teaching (e.g., incorporate families' beliefs and values in my activities, adjust my instructional goals to families' perspectives of child's development).	1	2	3	4	5	NA
20.	… I assist in identifying the ways to address families' unique needs (e.g. consulting with families on child's development goals, the ways services are delivered, etc.).	1	2	3	4	5	NA

VI. Families and their communities …

When I work with families of Latino heritage who have children with disabilities…		Never	Rarely	Sometimes	Often	Always	NA
21.	… I am mindful of the importance of families' sense of belonging to their communities.	1	2	3	4	5	NA
22.	… I am mindful of the importance of families' access to resources in their communities.	1	2	3	4	5	NA
23	… I am mindful of the importance of reflecting the characteristics of families' communities when assisting with planning and delivery of activities (e.g., using community resources).	1	2	3	4	5	NA

Please answer the following question in the space below:

In your opinion, what would be some of the things that could help you better serve families from Latino heritage?

© 2011 Mariana Mereoiu

For research analysis purpose only:
Project ID# _____

APPENDIX B

INTERVIEW QUESTIONS

Interview Questions

1. Thinking about the survey you have completed, please describe some of the strategies you use with families of Latino heritage who have children with disabilities, to help them identify their concerns for their child and their family.
   Prompts:
   1.1. How do you help families identify their child and family's main needs? How do you help them identify their goals?
   1.2. What are some of the ways you use to help identify and use family's strengths (e.g., skills, knowledge, resources, etc.)?
   1.3. What are some strategies you use to empower families of Latino heritage who have children with disabilities?
   1.4. What strategies do you think are most important/ helpful when you collaborate with families of Latino heritage who have children with disabilities?
   1.5. What are some of the ways you use the communities of the families?
2. How do you think your own cultural background is reflected in the ways you use FCPs?
3. How do you think your own professional background is reflected in the ways you use FCPs?
4. What are your main challenges in using strategies that address the needs of children and their families?
5. What were some of the best sources of support that helped you in using strategies to address the needs of the families and their children?
6. What other support would help you make better use of strategies that address the needs of families and children with disabilities of Latino heritage?

APPENDIX C

FAMILY-CENTERED PRACTICE MATRIX

FC Approach Component	Practices		Outcomes	Emphasize for CLD Families
1. Family focused [9, 6, 15, 16, 37, 3, 43, 44, 32, 21, 20, 4]	Work with families to identify goals for the family and ways to achieve them Assist families identify concerns they have, needs and priorities for the family		Sense of coherence in family life Coherent service delivery	Identify culturally relevant goals for the CLD families (reflecting family's beliefs and values)
	Participatory	Relational		
	Help families identify priorities, needs and goals Design services revolved to families' needs	Effective communication Respect for family values and beliefs		
2. Strengths-based [10, 42, 11, 38, 37, 32, 29, 28, 22, 21, 18, 4]	Work with families to identify the strengths of the family and use them to achieve family goals		Increased family-self esteem Sense of efficacy	Acknowledge the values and beliefs of the family as assets in their children' education
	Participatory	Relational		
	Help families identify the strengths of family members and family as a whole	Value the families for their resources and their expertise, and how they function Let families know they are appreciated for their resources and expertise		

FC Approach Component	Practices		Outcomes	Emphasize for CLD Families
3. Family empowerment [11, 12, 22, 43, 42, 31, 7, 9, 1, 26, 48, 40, 34, 28, 33, 23, 22, 21, 19, 5, 4]	Participatory	Relational	Sense of control Self-efficacy Parents understand children's development, special needs, progress Parents gain parents' knowledge about services and their rights Participation and collaboration Meeting family needs Understanding the environment Personal action	Culturally sensitive practices reflecting family's concepts of development, disability, parental practices Teaching families practices for helping their children in alignment with their values and beliefs Culturally sensitive communication styles
	Share resources Help giving family-centered practices Support family decisions Providing families with options Support families to learn the skills for self-help and advocacy Facilitate access to support services medical and childcare, services, support for family life, etc.)	Communication (positive, friendly, responsive, sensitive) Shared information Acknowledge families as constant in children's lives and main decision makers		
4. Collaboration [43, 13, 14, 26, 2, 41, 47, 45, 39, 37, 36, 35, 30, 29, 27, 26, 24, 23, 21, 19, 18, 17, 2, 4, 5, 8]	Participatory	Relational	Families have real opportunities to be partners Sense of control Sense of being valued as a partner Sense of coherence in service delivery	Culturally sensitive communication Respect for diverse values and beliefs systems
	Commitment to support family engagement Enhance family competence Promote interagency collaboration Shared information and resources	Effective communication Respectful relationships Establish and maintain trust Equality Shared power		
5. Individualized services [22, 9 , 28, 37, 46, 45, 44, 34, 31, 23, 21,2, 11, 43]	Participatory	Relational	Families achieve their goals Families participate actively in service design and delivery Family empowerment	Acknowledge and accommodate cultural differences when designing and delivering services
	Identify and understand the unique needs of the families Accommodate services to unique needs of families Providing families with options tailored to their needs	Acknowledge the unique resources, expertise and needs families have to be able to actively participate in supporting their children		

FC Approach Component	Practices		Outcomes	Emphasize for CLD Families
6. Ecological approach (including the importance of linking to community and cultural groups)[20, 31, 1, 33, 45, 41, 25, 6]	Participatory	Relational	Families have a sense of "normality" and coherence in how life evolves. Families feel integrated, part of a community Families benefit support from a wide variety of agents.	Acknowledge the importance of social context and its cultural characteristics for families Connect families with culturally relevant support networks: shared values and beliefs Respect and understand local community and cultural contexts Ecological perspective on child development
	Help families access community services Help families access and build support networks Help families integrate and participate in community life according to their needs	Reflect respect and value for the importance of families' communities and the role they play in families' lives		

References for conceptualization of the approach and family-centered practices:

1. Bailey, D. B., Bruder, M. B., Hebbeler, K., Carta, J., Defosset, M., Greenwood, C., Kahn, L., Mallik, S., Markowitz, J., Spiker, D., Walker, D., & Barton, L. (2007). Recommended outcomes for families of young children with disabilities. *Journal of Early Intervention, 28,* 227–251.
2. Brorson, K. (2005). The culture of a home visit in early intervention. *Journal of Early Childhood Research, 3*, 51–76.
3. Brotherson, M., Summers, J., Naig, L. A., Kyzar, K., Friend, A., Epley, P., . . . Turnbull, A. P. (2010). Partnership Patterns: Addressing Emotional Needs in Early Intervention. *Topics in Early Childhood Special Education, 30(1),* 32-45.
4. Bruder, M. B. (2010). Early childhood intervention: A promise to children and families for their future. *Exceptional children, 76*(3), 339–355.
5. Buysse, V., Castro, D. C., West, T., & Skinner, M. L. (2004). *Addressing the needs of Latino children: A national survey of state administrators of early childhood programs. Executive summary.* Chapel Hill: The University of North Carolina, FPG Child Development Institute.
6. Correa, V., Bonilla, Z., & Reyes-MacPherson, M. (2011). Support Networks of Single Puerto Rican Mothers of Children with Disabilities. *Journal of Child & Family Studies, 20(1),* 66-77.
7. Dempsey, I. & Dunst, C. J. (2004). Helpgiving styles and parent empowerment in families with a young child with a disability. *Journal of Intellectual & Developmental Disability, 29,* 40-51.
8. Dempsey, I., Keen, D., Pennell, D., O'Reilly, J. & Neilands, J. (2009). Parent stress, parenting competence and family-centered support to young children with an intellectual or developmental disability. *Research in Developmental Disabilities, 30,* 558-566.

9. Dempsey, I., & Keen, D. (2008). A review of processes and outcomes in family-centered services for children with a disability. *Topics in Early Childhood Special Education, 28*(1), 42–52.
10. Dunst CJ. 2000. Revisiting ‘‘rethinking early intervention. *Topics in Early Childhood Special Education,* 20, 95–104.
11. Dunst, C. J., Trivette, C. M., & Hamby, D. (2007). Meta-analysis of family-centered helpgiving practices research. *Mental Retardation & Developmental Disabilities Research Reviews, 13*(4), 370–378.
12. Dunst, C.J. & Trivette, C. M..(2008). Using research evidence to inform and evaluate early childhood intervention practices. *Topics in Early Childhood Special Education, 20,* 1-13.
13. Epley, P., Summers, J., & Turnbull, A. (2010). Characteristics and Trends in Family-Centered Conceptualizations. *Journal of Family Social Work*, 13(3), 269-285.
14. Espe-Sherwindt, M. (2008). Family-centred practice: collaboration, competency and evidence. *Support for Learning*, 23(3), 136-143.
15. Gallagher, P. A., Rhodes, C. A., & Darling, S. M. (2004). Parents as professionals in early intervention: A parent educator model. *Topics in Early Childhood Special Education, 24,* 5–13.
16. Guiberson, M. (2009). Hispanic Representation in Special Education: Patterns and Implications. *Preventing School Failure, 53*(3), 167–176.
17. Hardin, B. J., Mereoiu, M., Hung, H. S. & Roach-Scott, M. (2009). Investigating parent and professional perspectives concerning special education services for preschool Latino children. *Early Childhood Education Journal, 37,* 93–102.
18. Harry, B. (2008). Collaboration with culturally and linguistically diverse families: Ideal versus reality. *Exceptional Children, 74*(3), 372–388.
19. Harry, B., Allen, N., & McLaughlin, M. (1995). Communication vs. compliance: A three year study of the evolution of African American parents’ participation in special education. *Exceptional Children, 61,* 364–377.
20. Hebbeler, K., Spiker, D., Bailey, D., Scarborough, A., Mallik, S., & Simeonsson, R., et al. (2007). Early intervention for infants and toddlers with disabilities and their families: Participants, services, and outcomes (SRI Project 11247). Retrieved May 1, 2011 at: http://www.sri.com/neils/pdfs/NEILS_Report_02_07_Final2.pdf.
21. Hiebert-Murphy, D., Trute, B., & Wright, A. (2011). Parents’ Definition of Effective Child Disability Support Services: Implications for Implementing Family-Centered Practice. *Journal of Family Social Work, 14(2),* 144-158.
22. Kaczmarek, L., Goldstein, H., Florey, J., Carter, A., & Cannon, S. (2004). Supporting Families: A Preschool Model. *Topics in Early Childhood Special Education, 24(4),* 213–226.
23. Keen, D. (2007). Parents, families, and partnerships: Issues and considerations. *International Journal of Disability, Development & Education, 54(3),* 339-349.
24. King, G., Strachan, D., Tucker, M., Duwyn, B., Desserud, S., & Shillington, M. (2009). The application of a transdisciplinary model for early intervention services. *Infants and Young Children, 22(3),* 211-223.
25. Lee, K., & Johnson, A. (2007). Child Development in Cultural Contexts: Implications of Cultural Psychology for Early Childhood Teacher Education. Early Childhood Education Journal, 35(3), 233–243.
26. Mandell, C. J., & Murray, M. (2009). Administrators’ understanding and use of family-centered practices. *Journal of Early Intervention*, *32*(1), 17–37.
27. Minke, K., & Scott, M. (1995). Parent–professional relationships in early intervention: A qualitative study. *Topics in Early Childhood Special Education, 15*, 335-352.

28. Murray, M. M., Christensen, K. A., Umbarger, G. T., Rade, K. C., Aldridge, K. & Niemeyer, J. A.(2007). Supporting Family Choice. *Early Childhood Education Journal, 35,* 111–117.
29. Murray, M., & Mandell, C. J. (2006). On-the-job practices of early childhood special education providers trained in family-centered practices. *Journal of Early Intervention, 28,* 125–139.
30. Olivos, E. M. (2009). Collaboration With Latino Families: A Critical Perspective of Home-School Interactions. *Intervention in School & Clinic*, 45(2), 109-115.
31. Olmsted, M., Bailey, D., Raspa, M., Nelson, R., Robinson, N., Simpson, M., & Guillen, C. (2010). Outcomes reported by Spanish-speaking families in early intervention. *Topics in Early Childhood Special Education: Families, Family Support, and Early Intervention, 30*(1), 46–55.
32. Pang, Y. (2010). Facilitating Family Involvement in Early Intervention to Preschool Transition. *The School Community Journal, 20,* 183-198.
33. Raspa, M., Bailey, J. B., Olmsted, M. G., Nelson, R., Robinson, N., Simpson, M., & Houts, R. (2010). Measuring Family Outcomes Early Intervention: Findings From a Large-Scale Assessment. *Exceptional Children, 76(4),* 496-510.
34. Rodger, S., Keen, D., Braithwaite, M., & Cook, S. (2008). Mothers' satisfaction with a home based early intervention programs for children with ASD. *Journal of Applied Research in Intellectual Disabilities, 21*(2), 174–182.
35. Salas, L., Lopez, E. J., Chinn, K., & Menchaca-Lopez, E. (2005). Can special education teachers create parent partnership with Mexican American families? !si se pueda!(reaching out to families: Parental participation). *Multicultural Education, 13(2),* 52-55.
36. Salisbury, C. L., Woods, J. & Copeland, C. (2009). Provider Perspectives on Adopting and Using Collaborative Consultation in Natural Environments. Topics in Early Childhood Special Education, 22, 1–16.
37. Sandall, S., Hemmeter, M. L., Smith B. J., & McLean, M. E. (Eds.). (2005). *DEC Recommended Practices: A Comprehensive Guide for Practical Application in Early Intervention/Early Childhood Special Education.* Missoula, MT: Division for Early Childhood.
38. Souto-Manning, M. (2009). Educating Latino Children: International Perspectives and Values in Early Education. *Childhood Education, 85*(3), 182–186.
39. Summers, J. A., Marquis, J., Mannan, H., Turnbull, A. P., Fleming, K., Poston, D. J., et al. (2007). Relationship of perceived adequacy of services, family professional partnerships, and family quality of life in early childhood service programs. *International Journal of Developmental, Disability, and Education, 54(3),* 319–338.
40. Summers, J. A., Poston, D. J., Turnbull, A. P., Marquis, J., Hoffman, L., Mannan, H., et al. (2005). Conceptualizing and measuring family quality of life. *Journal of International Disability Research, 49,* 777–783.
41. Swick, K. J., & Williams, R. D. (2006). An analysis of Bronfenbrenner's bio-ecological perspective for early childhood educators: Implications for working with families experiencing stress. *Early Childhood Education Journal, 33,* 371–378.
42. Trivette, C., Dunst, C., & Hamby, D. (2010). Influences of family-systems intervention practices on parent-child interactions and child development. *Topics in Early Childhood Special Education: Families, Family Support, and Early Intervention, 30*(1), 3–19.
43. Turnbull, A., Turnbull, R., Erwin, E. J., Soodak, L. C., & Shogren, K. A. (2010). Families, professionals, and exceptionality: Positive outcomes through partnerships and trust (6th ed.). Upper Saddle River, NJ: Merrill Prentice Hall.
44. Wang, M., & Brown, R. (2009). Family quality of life: A framework for policy and social service provisions to support families of children with disabilities. *Journal of Family Social Work, 12,* 144–167.

45. Withrow, R. (2008). Early Intervention with Latino Families: Implications for Practice. *Journal of Multicultural Counseling and Development, 36*(4), 245–256.
46. Woods, J., Kashinath, S., & Goldstein, H. (2004). Effects of embedding caregiver-implemented teaching strategies in daily routines on children's communication outcomes. *Journal of Early Intervention, 26,* 175-193.
47. Wright, A., Hiebert-Murphy, D., & Trute, B. (2010). Professionals' Perspectives on Organizational Factors That Support or Hinder the Successful Implementation of Family-Centered Practice. *Journal of Family Social Work, 13(2*), 114-130.
48. Campbell, P. H., & Sawyer, L. B. (2007). Supporting learning opportunities in natural settings through participation-based services. *Journal of Early Intervention, 29*, 287–305.