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Decades of extensive research promoting the value of the inclusion of children with disabilities in classrooms and programs with typically developing children or children without identified disabilities supports inclusion as a best practice in early childhood education (Bailey, McWilliam, Buysse, & Wesley, 1998; DEC/NAEYC, 2009, Odom, Buysse, & Soukakou, 2011; Stahmer & Carter, 2005). Previous research confirms the value of parents participating in inclusive early childhood programs as stakeholders in programs enacting inclusion (Deiner, 2013; Soodak et al., 2002). As the majority of preschool-aged children with disabilities are educated in separate settings (U.S. Department of Education, 2013), continued examination of stakeholder perspectives remains a priority. The purpose of this qualitative phenomenological study was to gain insight into the current perspectives of parents of young children without disabilities related to their experiences as participants in inclusive early childhood programs. Open-ended exploratory interviews were conducted with nine parents of children without disabilities enrolled in one of three private and community-based early childhood programs that include children with disabilities in preschool classrooms. Analysis of interview data provided descriptions of the participants' perspectives about inclusion and the children included in classrooms with their children without disabilities. The experiences reported by participants in these programs and themes emerging from these accounts, provide insight into avenues and barriers towards full inclusion in early childhood classrooms. Following the results of these interviews, this study addresses

future directions for research and implications for professionals in the field of early childhood education.

STAKEHOLDER PERSPECTIVES OF EARLY CHILDHOOD INCLUSION:
A PHENOMENOLOGICAL STUDY OF PARENTS OF
CHILDREN WITHOUT DISABILITIES

by

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To my mother, Olive Jordan, who does everything for everyone all the time and to my father, William Jordan, who has provided me with invaluable support.

To Mary, for sharing this journey with me. You are the best.

To my grandparents, James and Pearl Beavers, and their strong value for education.

And especially to my three daughters, Olivia Jordan, Georgina Welch, and Mia James, who show me new ways to see the world every single day.

APPROVAL PAGE

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

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CHAPTER I

INTRODUCTION

Early childhood programs that include children with disabilities have been increasing in numbers over the past 25 years in accordance with initiatives in early childhood education and federal legislation (DEC/NAEYC, 2009). Such actions have increased the access of children with disabilities to inclusive programs (Odom, Buysse, & Soukakou, 2011). As a preschool teacher in the early childhood field, I have worked in a variety of inclusive classrooms for almost 20 years. As an instructor of pre-service teachers at both the community college and the university levels, I have advocated for the inclusion of children with disabilities in childcare and preschool settings in a variety of classes for pre-service teachers for eight years in. As an administrator of a community early childhood program, I have worked to balance the needs of children with disabilities in classrooms and their families' concerns with the questions and concerns that have periodically arisen from parents of children considered to be developing typically. It has been my goal to find a balance between preserving and protecting the confidentiality of individual children and sharing general information about how conflicts are resolved and barriers are overcome when families of children without disabilities express concern and ask questions about children with disabilities included in classrooms with their children. On more than one occasion and in more than one setting, I have heard families of children without currently identified disabilities express opinions and ask pointed

questions that potentially marginalize children with disabilities. These have included parents' explicitly questioning a child's ability and asking a teacher in front of a classroom full of children "what is wrong with him?" In doing so, they express their concerns about how their own child might suffer from the attention that a child with a visible disability might require from teachers, and covertly disclose their opinions that certain children with disabilities should not be included in their child's classroom. I have also been the recipient of parent reports supporting the idea of inclusion in theory while simultaneously expressing that inclusion will not work for their typically developing child. These anecdotal experiences present a stark contrast that often exists at the practitioner level between research, best practices, professional literature, laws supporting inclusion, and the actual practices of inclusion when negative perceptions or problems arise or when families of children without currently identified disabilities do not support it. As a result of these combined experiences, it is evident that teacher preparation faculty, administrators, professionals, and pre-service teachers need a better understanding of the perspectives and experiences of all stakeholders in the early childhood inclusion process. Thus, I seek empirical documentation of parent perspectives of inclusion from a social justice standpoint as a dedicated supporter of early childhood inclusion. The current study aims to expand on the literature on parent perceptions of inclusion in early childhood education.

Background

The inclusion of children with disabilities in classrooms and programs with typically developing children has been extensively investigated and asserted as a best

practice in early childhood education (Bailey, McWilliam, Buysse, & Wesley, 1998; DEC/NAEYC, 2009; Odom et al., 2011; Stahmer & Carter, 2005). Inclusion has become standard practice in many early childhood classrooms as a result of the advocacy of inclusion by professional organizations, civil rights legislation including Section 504 of the Rehabilitation Act (1973) and the Americans with Disabilities Act (1990), and educational mandates for young children as stated in the Education for the Handicapped Act (1975). The addition of preschool aged children beginning in 1986 with revisions to the Education for the Handicapped Act, later renamed the Individuals with Disabilities Education Act (1990), and more recently under the Individuals with Disabilities Education Improvement Act (2004) have continued to provide children with disabilities opportunities for education in inclusive settings.

The inclusion of children with disabilities now occurs in a variety of private settings in early childhood with the support and action of many stakeholders (Deiner, 2013). Stakeholders identified as vital to the process and practices of fully including children with disabilities in early childhood settings encompass faculty in higher education who prepare the teachers and professionals who work directly with children and their families, the classroom teachers and professionals, program administrators, and families (Deiner, 2013; Soodak et al., 2002). Thus, all levels of participants in the inclusion process and practices are represented as stakeholders. Families who enroll the children in programs, teachers and professionals who work with the families and children directly, administrators who create program policies that may facilitate and support inclusive practices, and higher educational faculty who prepare teachers, professionals,

and administrators with research and theory are all influential members of an inclusive program. It takes all of these stakeholders to ensure that a child with disabilities and his or her family have access to inclusive early childhood programs. Without the participation and commitment from all levels of stakeholders, children with disabilities and their families continue to face barriers to being included (Beckman et al., 1998; Deiner, 2013; Odom et al., 2011).

Families of children with and without disabilities are unique stakeholders in the inclusion movement in early childhood because inclusive early childhood programs vary widely in the services they provide. Because many inclusive early childhood settings, programs and classrooms are chosen (and often paid for) solely by families, independent of a formal placement by a professional, it is vital to consider family perspectives, experiences and feelings related to these choices. Families of children with and without disabilities are experts on their children and are constant presences in their children's lives. They must be willing to place their children in the care of the teachers and professionals entrusted with the care and education of their individual children. They often must work in partnership with professionals and teachers to ensure that care is individually appropriate.

Parents of children considered to be developing typically or children without disabilities must also be willing to place their children in settings in which teachers care for and educate a group of children who have a wide range of needs and goals, particularly in private early childhood and childcare programs. In an inclusive classroom or program with a typically representative population, ten to fifteen percent of children

enrolled could be expected to have a disability as this percentage represents the natural proportion of disability in the US population (Kids Together, 2010; DEC/NAEYC, 2009). Because there are many more families of children considered to be typically developing in an inclusive classroom with a natural proportion, ensuring that parents of typically developing children understand the rights and benefits of inclusive classrooms could increase opportunities for children with disabilities and ensure more successful inclusion (Deiner, 2013). Previous research has identified more positive attitudes about inclusion in families of children with disabilities than in family members of children without disabilities (Stoiber, Gettinger, & Goetz, 1998). Findings from this study pointed out that the experience associated with having a child with a disability was a factor in significantly influencing positive beliefs about inclusion.

Previous research has also provided evidence that proximity to children with disabilities has been related to positive attitudes of acceptance and positive views of inclusion (L. J. Miller & Strain, 1992; Gorenczny, Bender, Caruso, & Feinstein, 2011). Inclusion or integration has been shown to positively affect the overall perceptions about disabilities even for those closest to children with disabilities, as family members reported positive changes in the expectations they had for their own children as a result of participating in inclusive education (Halvorsen & Hanline, 1989). Identifying and addressing positive experiences and/or barriers of families of children without disabilities toward inclusion could lessen marginalization of children with disabilities and their families, thereby increasing access for children with disabilities. The Developmental Disabilities Task Force (n.d.) calls for a paradigm shift in education and the overall view

on education that addresses attitudes and barriers as well as the way differences and diversity within classrooms and programs is viewed by stakeholders (as cited in Deiner, 2013).

Rationale

The term “inclusion” denotes a philosophy that declares that every child belongs, as a member of society and every child’s unique needs and abilities are valued (NAEYC, 1993). In order to operationalize the tenets of inclusion, professionals practice including children with disabilities alongside their typically developing peers in early childhood classrooms (Allen & Schwartz, 2001; NAEYC, 1993). The Division for Early Childhood (DEC)—Part of the Council for Exceptional Children and National Association for the Education of Young Children (NAEYC) asserts in their most recent joint position statement on early childhood inclusion (2009) that young children with disabilities and their families should be fully included in their communities and thus does not limit the definition of inclusion for young children and their families strictly to educational settings. Giangreco, Baumgart, and Doyle (1995) discuss inclusion in education in terms of welcoming all children in settings in which individual goals are pursued with necessary support and a balance between academic, functional and social goals, when the proportion of children with disabilities is representative of the population at large—about ten to fifteen percent of children with identified disabilities (DEC/NAEYC, 2009; Kids Together, 2010). Thus, in early childhood settings inclusion is often practiced through the enrollment of children with and without disabilities in childcare and preschool/early childhood community programs.

For many years prior to the aforementioned most recent position statements from these national early childhood professional organizations, researchers and professionals asserted inclusion as best practice in early childhood. Bailey et al. (1998) outlined four foundational and historical considerations that support inclusive settings as the most appropriate placement for all children. From a legal standpoint, both civil rights legislation (Section 504 (1973), IDEA (2004), and ADA, 1990) and federal educational legislation (EHA, 1975; IDEA, 1986; IDEA, 2004) have provided parents of children with disabilities with a legal right to education for their children in public schools and inclusion in non-public programs serving young children before Kindergarten. These laws have been further refined to provide educational support for young children requiring special education in early childhood and childcare settings through the provision of services for children as young as three by the local school system and for children under three through local early intervention agencies.

A moral basis for inclusion has been asserted through the tradition of civil rights legislation and advocacy (Bailey et al., 1998). Further, the moral foundation for inclusion provides an argument that including all children in activities and providing for their right to participate is the right thing to do. Many proponents for inclusion agree. Such individuals consider segregating children by classroom or program unjust. When children do not have access to programs or community resources because of a disability, this is often viewed as unethical. As such, civil rights legislation has provided for access to private community early childhood and childcare programs for children with disabilities and their families (ADA, 1990).

Bailey et al. (1998) delineate a rational foundation for inclusion, affirming that the opportunities provided by the inclusion of children with disabilities presents opportunities for their learning from typically developing peers and the opportunities for challenging experiences and social benefits in a realistic environment. Additionally, children developing typically can benefit from inclusion in a variety of ways including experiencing differences, opportunities to learn about others, and the opportunity to develop attitudes of acceptance of their own unique strengths and weaknesses as well as the strengths and weaknesses of others. Wolery (n.d.) also asserts that children developing typically are able to experience seeing individuals overcome great challenges to experience success in a variety of skills and tasks.

Beyond the legal, moral, and rational underpinnings for inclusion, the empirical foundations for inclusion support positive outcomes for children with and without disabilities with research evidence, particularly in the preschool or early childhood years (Bailey et al., 1998). Holahan and Costenbader (2000) found in two studies that children with disabilities experienced greater development in social and emotional functioning in inclusive preschool classrooms than those in self-contained (non-inclusive) preschool settings. Odom (2000) reports on a history of positive outcomes for children with and without disabilities in inclusive preschool settings with a focus on individualized learning. Deiner (2013) asserts that academic and social/emotional education for all children can be improved through inclusive practices and the inclusion of children with diverse abilities.

Because of federal legislation (ADA, 1990; IDEA, 2004), and advancements in research in the early childhood education and early childhood special education professions, national organizations, such as the NAEYC and the DEC have adopted position statements on inclusion as part of best practice in early childhood programming (DEC/NAEYC, 2009.) Further, the organizations detail the need for a position statement in part in reaction to practices where young children have been segregated because of disabilities. The NAEYC professional code of ethics touts inclusion of children with disabilities as a standard and beneficial principle to be followed as an ethical practitioner (NAEYC, 2008.) Professionals in early childhood education settings have roles and responsibilities in providing access, ensuring participation, and offering supports to ensure that children with disabilities and their families are included appropriately in programs. Additional recommendations are made in both positions statements and codes of ethics that programs incorporate the adoption of a philosophy of inclusion and supporting policies.

In addition to the recommendations of national organizations, and related to the foundations of legal, moral, rational, and empirical grounds for inclusion, teacher preparation via professional development and pre-service education has moved toward individualized practices for the full inclusion of children with disabilities. The professional development of teachers and teacher preparation has been a subject of much consideration over the years (Jordan, Schwartz, & McGhie-Richmond, 2009; Scruggs & Mastropieri, 1996; Soodak et al., 2002). Investigated as a route toward more fully including children with disabilities, teachers and higher education faculty have been

asserted as critical stakeholders to enacting inclusion (Deiner, 2013; Soodak et al., 2002). Pre-service teacher preparation programs (including interdisciplinary programs for early childhood educators such as the programs at the University of North Carolina at Greensboro), have been developed and implemented to give students experiences in special education in order to better prepare them for classrooms including children with disabilities (University of North Carolina at Greensboro, 2010). Texts that tout inclusion in early childhood as best practice in the field are designed specifically to prepare early childhood teachers (Deiner, 2013). This trend in professional preparation offers further evidence of the movement toward inclusion in early childhood education and teacher preparation in early childhood education.

In addition to position statements by national professional organizations, a statement by the North Carolina Foundations for Early and Development (North Carolina Foundations Task Force, 2013) a group of researchers, professionals and stakeholders invested in early childhood education in North Carolina provides a set of early learning standards intended as a guide to both child development and planning for children's development. Several of the guiding principles introducing the document address the usefulness of these early learning standards when considering uniqueness of each child and the understanding that developmental progress occurs for children, including those with unique circumstances and disabilities. Among the ten guiding principles that describe best practices in early childhood, Foundations asserts in the final principle that inclusion of children with disabilities in early childhood settings is best for ALL children.

Children with disabilities learn best in inclusive settings. Children with disabilities will make the most progress developmentally, socially, and academically when appropriate special education services are provided in inclusive settings. Children with and without disabilities learn from one another in inclusive settings. Inclusive settings where education and support are individualized to each child will benefit all children, including children with and without disabilities. (North Carolina Foundations Task Force, 2013, p. 14)

Despite the many legal advances and statements by professional organizations in early childhood education, specifically in North Carolina, many young children with disabilities do not have access to inclusive settings and are receiving special education services only in segregated or specialized settings. In 2010-2011, data available in North Carolina and reported for IDEA stated that more than 20% of children ages three to five with an identified disability were being served in separate settings with more than 57% of preschoolers with a diagnosis of Autism being served in separate settings (www.ideadata.org). The children served in separate settings in North Carolina under IDEA part B, included those with labels of Autism, visual impairment, developmental delay, and hearing impairment. These figures represent numbers slightly less than the overall reported average of almost 27% served in separate settings nationally. Only 51% of children with disabilities are reported as included with typically developing peers for the majority of day in North Carolina. Although this figure is greater than the national figure of only forty one percent of children in this age group being served in inclusive settings, more children with disabilities can be included in community programs in North Carolina.

When examining the number of young children who are still cared for and educated in segregated settings prior to their entering Kindergarten, it is clear that barriers

to inclusion in early childhood exist. This number is particularly staggering when compared to the more than 60% of children ages six to 21 who spend greater than 80% of their school day in settings with typical peers. Given the emphasis on early childhood inclusion in the literature and through professional organizations, it is perplexing to realize that specialized settings continue to be developed and utilized in school systems for very young children who are not included in community programs with typical peers. Given the evidence that professional and practitioner organizations have been active as critical stakeholders, parents as consumers of early childhood education settings, must be valued as a primary stakeholder group towards the full inclusion of children with disabilities in community early childhood programs.

To this end, an examination of a model of stakeholder perspectives is helpful in explaining parent perspectives as a valuable source of information. Katz (1993) conceptualized parents' perspectives as one of four primary perspectives on quality in childcare settings. This model can be used similarly to explain the importance of examining parent perspectives related to inclusion in early childhood. Researchers and professionals, staff in early childhood and childcare settings and children participating in programs comprised the other major group perspectives to be considered. The parents' perspectives are referred to as the outside-in perspective. Although this set of perspectives provides a more comprehensive view of total program quality, it is valuable to understand the perspectives of parents, as they are stakeholders in quality programming and they often choose programs and childcare settings based on a variety of factors. When considering the movement in early childhood toward full inclusion of

children with disabilities, the perceptions and experiences of these groups identified by Katz are valuable to understanding the necessary components towards enacting full inclusion. To build on the model presented by Katz (1993), an investigation of inclusion should further delineate the perspectives and experiences of parents of typically developing children. These parents might have less invested in the inclusion of children with disabilities if they do not value inclusion as part of their child's overall experience in a program.

In addition to the model proposed by Katz (1993) to describe the various stakeholder positions in early childhood program research, parents' perspectives have long been valued in early childhood and childcare programming (Ceglowski, Logue, Ullrich, & Gilbert, 2009; Knoche, Peterson, Edwards, & Jeon, 2006). Previous studies have examined parent perspectives on various aspects of quality in early childhood programming, stakeholder priorities in choosing programs and childcare, and participant perspectives on inclusion. Further investigation into perceptions, experiences, and beliefs about the inclusion of children with disabilities in early childhood classrooms is necessary to gain a richer understanding of how parents of children developing typically or parents of children without currently identified disabilities enrolled in inclusive classrooms view the inclusion of children with disabilities. Avenues toward more successful inclusion and/or potential barriers for children with disabilities and their families that may exist in early childhood settings can be better understood when parents' perspectives and experiences are explored. When stakeholders provide information about their experiences with and perceptions about the inclusion of children with disabilities,

information about the acceptance of children with disabilities, as well as the perspectives of stakeholders about potential benefits or barriers of inclusion is expanded.

Research findings suggest that parent perspectives of inclusion provide valuable information on how programs are viewed in order to determine the extent to which parents buy-in to the professional movement toward inclusion of all children (Ceglowski et al., 2009; L. J. Miller & Strain, 1992; E. Miller, Chen, Glover-Graf, & Kranz, 2009; Leyser & Kirk, 2011; Palmer, Borthwick-Duffy, & Widaman, 1998; Palmer, Fuller, Arora, & Nelson, 2001; Stoiber et al., 1998). Specifically, parent support for inclusion has been identified as more positive for parents of children with disabilities (Stoiber et al., 1998). Leyser and Kirk (2011) found that although parents of children with disabilities expressed strong support for inclusion, participants in the study also expressed concerns about teacher knowledge and acceptance and concerns that their children would be rejected socially. Runswick-Cole (2008) revealed that parents of children with disabilities were often conflicted in their views of inclusion and reported a variety of barriers and concerns. Stoner et al. (2005) identified parent perspectives of a variety of needs related in an investigation of parents of children with disabilities related to their communication with teachers and professionals. The needs and concerns expressed in these studies are consistent with findings in previous research concerning the perspectives of parents of children with disabilities (Salend & Garrick Duhaney, 2001). Although these studies point to the need for greater attention to parent perspectives on inclusion, the research base has largely attended to the perspectives of parents of children with disabilities.

Knoche et al. (2006), who investigated participants' perspectives on childcare, recommend additional research into the parent perspectives and experiences in inclusive early childhood settings. It is notable that both parents with and without children with identified disabilities were included in their participant pool. Peck, Staub, Gallucci, and Schwartz (2004) examined more specifically the perspectives of parents of children without disabilities about inclusive elementary classrooms. Although parent participants were largely positive about the experiences of their typically developing elementary-aged children, especially in regards to social development, some negative views and concerns were expressed. Parents who expressed negative views reported concern about teachers spending more time with children who had disabilities and children with disabilities disrupting the classroom. Many participants in this study who reported positive social benefits did not report academic benefits to their child as a result of including children with disabilities. The current study aims to add to the knowledge base through the examination of perspectives of parents of children developing typically who are enrolled in inclusive early childhood settings.

By investigating the perspectives of these stakeholders in early childhood care and education, professionals engaged in the movement toward full inclusion in early childhood education can gain a greater understanding of the experiences in inclusive preschool-aged early childhood classrooms as perceived by parents. Deeper investigation of the perspectives of the participants in this study can assist both researchers and faculty in higher education in preparing pre-service teachers and professionals by providing rich descriptions of parents; perceived experiences of their child's experiences in inclusive

settings. Specifically, this study aimed to investigate the parents' perspectives about inclusion and the children with disabilities enrolled in early childhood classrooms, parent reports about their child(ren)'s experiences, and the parents' perspectives about including children with disabilities in early childhood classrooms with their children. Moreover, the current study investigated how this combination of factors plays a part in parents' perceptions of the early childhood program they chose for their typically developing child.

Purpose

Parents of children developing typically or parents of children without disabilities compose the majority of parent stakeholders in childcare and other early childhood settings. Stakeholders in the process of inclusion may contribute to the social construction of the meaning and implications of "disability," as experienced by young children with disabilities and their families. Examining the attitudes and perspectives about early childhood inclusion from the outside in can lead to a better understanding of how disability is viewed. Deiner (2013) emphasizes the importance of a shared vision and asserts that positive stakeholder attitudes comprise the central concept for successful inclusion. Professionals must continue to examine the factors influencing access to inclusion, the participation in inclusive settings and the supports necessary in inclusive classrooms in early childhood program in accordance with recommendations by national professional organizations (DEC/NAEYC, 2009) Thus, the current study explores the perspectives of parents without children with disabilities in order to expand understanding of potential barriers and avenues toward the inclusion of children of disabilities in early childhood classrooms and programs. Moreover, the current study

expands knowledge of stakeholder (parents') perceptions of inclusive early childhood classrooms. Participant perspectives related to inclusion are explored specifically regarding perceptions of the children with disabilities enrolled in their children's classrooms and their perspectives of their children's experiences in inclusive early childhood classrooms. The current study implemented a phenomenological qualitative design to deepen the available knowledge on parent perspectives of inclusion with rich information about the perceptions of parents of children who are developing typically. Parent participants were interviewed about their perspectives and experiences as participants in an inclusive early childhood program. The purpose was to explore how the inclusion of children with disabilities and the children enrolled in classes with participants' children are viewed by participants in the study. Results were considered in light of the movement toward greater inclusion in the discipline of early childhood education.

Research Questions

1. What do parents of typical children say about children with disabilities?
2. What do they say about the inclusive programs in which their typical children are enrolled?

Definitions

Childcare Center—In the current study, childcare is defined as an early childhood program licensed by the North Carolina Division of Child Development and Early Education that enrolls children for a minimum of eight hours per day.

Inclusive Classroom—In the current study, an inclusive classroom is defined as a classroom within an early childhood program or childcare that enrolls children ages three to five, with at least child enrolled with a label under IDEA that makes him/ her eligible for a current Individualized Education Plan (IEP) (PL 108-446, IDEA, 2004). The child(ren) with identified disabilities receive at least one service or therapy (Special Education, Speech Therapy, Occupational Therapy, Physical Therapy) provided by the county school system through itinerant services provided at the current early childhood program or center. The child(ren) with identified disabilities should spend the majority of their day (80% or more) in the classroom with peers without disabilities or considered to be developing typically.

Parent of a Child with a Disability—For the purposes of the current study, parents of a child with a disability are custodial biological or adoptive parents of children who have at least one child with a current or previously identified disability and receive services now or received services in the past. A more detailed description of study inclusion and exclusion criteria appears in Chapter Three.

Parent of a Child without a Disability (Considered Typically Developing)—Custodial biological or adoptive parent of a child or children without a disability label and receiving no services, with at least one three to five year old child enrolled in an inclusive early childhood classroom.

CHAPTER II

REVIEW OF THE LITERATURE

As the movement toward the inclusion of children with disabilities in early childhood programs continues, gaining insight into the potential barriers and avenues toward inclusion highlights a focus of needed research (Odom et al., 2011). Although the current study examined a small segment of stakeholders in the process of inclusion, the relevant research that informs the current study encompasses several areas of previous investigation. Those areas include examination of literature on adult attitudes about disability, parent perspectives about and experiences with inclusion, and family choice of early childhood program or childcare setting. The literature in these areas informs the research agenda related to developing a better understanding of parent perspectives and parent choice of program when the inclusion of children with disabilities is investigated.

Attitudes toward Disabilities

In a review of studies assessing attitudes toward individuals with disabilities, Wilson and Scior (2014) found that negative implicit attitudes were prevalent in 18 studies they reviewed. The authors cite the need for continued attention to address the barriers experienced by individuals with disabilities such as stigma and inability to form relationships related to the negative attitudes held by those without disabilities. Beyond examination of attitudes toward individuals with disabilities, a research synthesis conducted within the field of early childhood describes attitudes and beliefs about

inclusion as a primary factor influencing the way inclusion is enacted and perceived (Odom et al., 2011). There is a great deal of research in other disciplines specifically focused on the attitudes of individuals considered typically developing or *nondisabled* (those without identified disabilities) toward individuals with disabilities that should be examined prior to examining the practices, processes, and philosophies specifically related to including children with identified disabilities in early childhood. The literature review presents an explanation of factors that may contribute to or detract from the inclusion of children with disabilities into settings in which the majority of participants are children considered to be developing typically. To begin to understand how perspectives of parents of typically developing children play a role in program choice, and thus how parent perspectives may influence the processes of inclusion for children with disabilities, a broader perusal of the literature on attitudes about individuals with disabilities needs to be examined.

The field of health care has previously examined the acceptance and associated stigma for individuals with a variety of physical and health related disabilities (Westbrook, Legge, & Pennay, 1993). Conducted in Australia with a focus on differences in acceptance between cultural strata, this study explored the attitudes of 665 professionals in health care related to 20 different conditions of “disability.” At the time of the study and within the sample used, various degrees of lack of acceptance of individuals with disabilities from each category were noted. The less visible the disability, the more likely respondents were to report acceptance of the individuals with those disabilities. The authors found evidence of biases towards individuals with disabilities

and the associated stigma that affected acceptance of those individuals. Results revealed that different disabilities were less acceptable and that a hierarchy of stigma existed in participant responses. Participants reported willingness to develop closer relationships with individuals with less severe disabilities. The researchers concluded that the attitudes of exclusion evident in the responses presented barriers towards the integration of individuals into society at large. More information about the attitudes that currently exist that may contribute to marginalization and exclusion, even in early childhood settings, should be a continued goal for researchers interested in the intersect between inclusive philosophies and realized best practices.

Also in an Australian study, research into attitudes and prejudices about individuals with disabilities described evidence related to the need for awareness in order to promote greater acceptance within the field of tourism (Daruwalla & Darcy, 2005). Although the study centers on the tourism industry and these authors ground their findings in theories of attitude formation, there are contributions relevant to understanding the processes of acceptance of individuals with disabilities through an intervention program including disability awareness training and for some participants, interactions with individuals with disabilities. The training programs were found to have positive effects on the attitudes of participants with some notable need for further inquiry. There were differences in various measures of attitudinal shift depending on length of time in a program and variables of disability awareness including information provided and the types of interactions and experiences with individuals with disabilities. The researchers also found that participant reported biases were related to the experience

participants had with individuals with disabilities. Participants with more experience had less negative biases than participants who had only been provided with information about disabilities. This study provides additional evidence of the potential barriers individuals with disabilities face as recipients of negative attitudes and biases from individuals without disabilities and the need for additional experience in social contexts.

Consistent with the findings of Daruwalla and Darcy (2005), Gorenczny et al. (2011) disclosed that attitudes of individuals without disabilities toward those with disabilities depended on several factors including proximity to, experience with and knowledge about specific individuals. The attitudinal opinions/ beliefs surrounding individuals with disabilities and inclusion have been examined as a barrier to inclusion for years. With the logic that might result from the findings of Daruwalla and Darcy, (2005) one might assume inclusion begets inclusion. With increased interactions, more knowledge about individuals and more experience with individuals, positive attitudes about the children with disabilities should increase as familiarity increases. Interestingly, Goreczny and his colleagues (2011) found that younger participants reported more positive attitudes toward individuals with disabilities. Participants reported reluctance to form close relationships with individuals with disabilities, even though participants reported positive attitudes toward individuals with disabilities. Notably, the participants were professionals working in a field that supports adults with disabilities.

Iobst et al. (2009) also identified a continued need for addressing the negative attitudes adults have specifically towards children with disabilities. In a study of 288 college students, the researchers found that the participants who viewed a video of a

young child engaging in behaviors typical for his age were more likely to hold positive attitudes about the child than those expressed by adults who viewed a video of a young child demonstrating behaviors considered typical for a child with autism. When the researchers presented either information with an explanation about the child's diagnosis or information about neuropsychological condition of Autism, the attitudes of the participants viewing the child with Autism were more positive than those reported by participants who received no information. The authors posit evidence that adults' attitudes may have been affected by the participants' assignment of blame or responsibility for behaviors that were consistent with a presentation of stereotypical Autism. When provided with additional information, the adults may have been more likely to remove some of the blame or responsibility from the child. This presents an interesting conundrum when considering the confidentiality and respect for actual individuals with disabilities enrolled in classrooms and other community programs in which negative attitudes could marginalize their participation and contributions. It would be unethical to breach a child's confidentiality in a real-life scenario in order to provide similar specific information to counteract negative attitudes of adults. Considering the potential existence of negative attitudes that may present barriers for children with Autism, asking families about their experiences and perceptions of the children in their child's classroom could provide insight into possible barriers. If the attitudes and beliefs of individuals without disabilities, particularly the attitudes of adults toward children with disabilities, create barriers to the inclusion of young children in community settings, the opportunities for increasing proximity, gaining more experience and knowledge might be

limited. Thus, negative attitudes that create barriers to inclusion perpetuate negative attitudes concerning inclusion. What is troubling about this study is that an explanation was needed specifically for the boy in the video who displayed “autistic” behaviors. This type of explanation in a classroom scenario would potentially compromise confidentiality and is not possible in a early childhood classroom without direct violation of the rights of a child and his or her family. If negative attitudes exist in early childhood classrooms or childcare settings, more work in these settings may be needed to uncover and address how attitudes about children with disabilities such as Autism contribute to exclusion. Finding ways to share information, build trust, and protect confidentiality in a way that doesn’t marginalize children remain tenets of ethical inclusive practice.

In similar study of adult attitudes toward a child with Autism, Chambres, Auxiette, Vansingle, and Gil (2008) found that adults held more positive views of a young child’s behaviors if they were informed of his diagnosis of Autism. 88 adults viewed a videotape of a child with Autism engaging in four behaviors, two typical behaviors and two behaviors that could be deemed problematic (one problematic behavior was a seemingly unprompted temper tantrum). The researchers found that the adults expressed negative views of the child’s problematic behaviors. Participants who were informed of his diagnosis of Autism held less negative views of the problem behavior than the participants who were not informed. The study also revealed that adults perceived lower cognitive abilities or lower expectations for the child and that participants expressed views that the child was emotionally disturbed when they knew he had a diagnosis of Autism. These findings present another dimension to the problem of providing

information about children with disabilities to adults in order to alleviate negative views of disability. It is possible that the negative stigma associated with broadcasting a disability may further limit a child or project increased limitations onto him/her. Thus, a greater number of avenues should be explored to increase adults' positive views of children with disabilities as a means toward greater acceptance of individual children. Considerations should be made to ensure that children's rights to confidentiality are not violated and that incapability or diminished capacity of a child with a disability is not projected or communicated. The rights of a child and his or her family should be a priority when considering sharing information.

Several studies also discuss negative attitudes and social stigma as barriers for children with disabilities and their families (Chambres et al., 2008; Fox, Vaughn, Wyatte, & Dunlap, 2002; Green, 2003). These studies examined the perceptions of parent participants to reactions of the public and the contributions of those reactions to feeling uncomfortable, stigmatized, and/or judged in social contexts and interactions. By directly asking participants about their experiences as recipients of social barriers and stigma, these studies complement work in other areas of research that identifies negative attitudes towards individuals with disabilities (Daruwalla & Darcy, 2005; Gorenczny et al., 2011; Iobst et al., 2009). Parents of children with disabilities may experience significant barriers based on the experiences and interactions they have with others in the community. Thus, investigating the perceptions of parents who do not have children with disabilities can lead to greater understanding of both the barriers and the avenues towards inclusion for families of children with disabilities. Moreover, rich descriptions of parent perspectives

are needed to determine the extent to which experiences between and among children affect parent perceptions of individuals with disabilities.

Parent Perspectives of Disability and Inclusion

After considering findings from explorations of attitudes, biases, and prejudices that may affect individuals with disabilities and their families in a wide range of community settings, research that focuses on the parent perspectives of disability and the perspectives of participants in inclusive programs needs investigation. Much of the previous research has been stratified into research that reports on the perspectives of parents of children with disabilities and their unique perspectives and concerns about disability and research about the experiences and perceptions of parents of typically developing children in programs where children with disabilities are included. Thus, parents make up two sub-groups of stakeholders in early childhood inclusion: Parents of children with disabilities and parents of typically developing children.

Parents of children with disabilities. Parents of children with disabilities have long been valued as informants with insight into the practices and success of inclusion for their children. Much research has investigated the perspectives of the parents of children with identified disabilities related to their experiences with inclusion (Bailey et al., 1998; Hurley & Horn, 2010; Knoche et al., 2006, Seery, Davis, & Johnson, 2000). Although parents of children with disabilities must be willing to place their child into an inclusive setting, these children make up roughly 10–15% of the overall population of children served in early childhood placements where populations are representative of the overall population.

Stigma, stress, isolation, and support. Previous research has examined both the beliefs and attitudes of parents of children with disabilities and their perspectives and concerns about inclusion. Adult attitudes and perceptions of disability can impact the acceptance and inclusion of children with disabilities. Thus, parent perspectives have been important to investigate, especially in gaining greater understanding of the positions of parents of children with disabilities as well as the barriers they identify.

In a study in the discipline of school social work, Kayama (2010) examined the experiences of parents of children with disabilities in Japan and the United States. The parents in Japan reported experiencing the stigma associated with disability and reported a desire for empathetic professionals with whom to partner. The author reports of parents in Japan report having to fight for inclusive services because of the majority societal view that promotes segregation of children with disabilities. In contrast, parents in the United States, reported the need for support in getting the educational services their child was due under federal law. The benefits of having emotional support were found to be important, too, to parents in the United States due to the stress associated with parenting children with disabilities. Parents of children with disabilities in both countries expressed the need for partnerships with professionals that empower parents in which trust is a central tenet, and respect for their children as individuals was present in the relationships. Parents in the United States reported experiencing a lack of empathy from professionals when meetings often focused on procedures and paperwork were taking place. These perspectives and the perspectives of other parents of children with disabilities add to the framework for best practices for professionals who work with children with disabilities

across ages and disciplines. Although the field of early childhood education and childcare has progressed toward inclusion of all children with a focus on family-centered practices, building partnerships with professionals is only one route toward ensuring the access, participation and supports necessary for young children and their families, (DEC/NAEYC, 2009).

Beyond the intimate knowledge parents have as a result of their day-to-day interactions with their children, parents possess unique perceptions of disability as a result of the interactions they have with doctors, diagnosticians, teachers, professionals, and care givers. Providing some evidence of the influence the interactions with professionals have on parents' perceptions, Leiter (2007) reports that parents participating in Early Intervention services for their child with a disability experienced both a clinical setting that emphasizes impairment and a social support system that minimizes differences. In this study of 31 families and 19 early intervention professionals, qualitative analysis of interviews with participants was used to examine disability in early childhood. Analysis of the interviews evidenced that the practices of professionals in early intervention including clinical assessment helped build a socially constructed view of disability in early childhood as an impairment leading to parent views that their children were different from the norm. Thus, parents may view the location of disability within the child needing to be rehabilitated so that they can make progress with their peers, rather than viewing the disability from the societal level, in which change could be enacted to more fully include children with a variety of needs and goals. Professionals framed the child's goals in terms of disability/delay while also normalizing the child's

differences. Families reported being in positions of viewing the disability or delay in terms of both what the child needed to accomplish to “catch- up” as well as needing to accept that all children are individuals and that there is no “normal.” The processes of defining developmental disabilities through experiences and interactions with early intervention professionals also affected the way parents viewed their children. Thus, examining the systems of influence on parental attitudes about disability can potentially expose some of the societal level influences on the public’s overall views about children with disabilities. If support systems in place focus on changing the child so that he or she will “do better” or “catch up” may lead to continued barriers for children who are different than the typical child. Parents’ attitudes and beliefs can potentially influence the understanding and inclusion of their children in community settings.

Worcester, Nesman, Raffaele Mendez, and Keller (2008) shared the perspectives of parents after conducting interviews with eight family members (seven parents and a grandparent) of two and three year old children with challenging behaviors. In the tradition of providing a voice to individuals who have been marginalized, this qualitative phenomenological study was designed to explore the in-depth perspectives of the participants. Participants all reported some difficulty in finding resources and services for their young children, financial stress related to parenting a child with challenging behaviors, stress in families’ relationships, and experiences of community isolation. Again, the experiences and perspectives of parents are valuable to inform practices that better support a variety of families of young children. Noteworthy to the current study in particular, are the reported perspectives related to community isolation. Parents reported

feeling stigma associated with their child's diagnosis and behaviors, embarrassment in public when experiencing negative reactions of other adults to their child's behavior, and feeling judged because of their child's behavior. Participants also reported negative perceptions about interactions with others who do not understand their children. Thus, further research identifying the gaps between the perspectives of parents of children with disabilities and those without could provide better avenues toward most effective and developmentally beneficial inclusion for all children.

One barrier for families of children with disabilities may be related to the stress they report experiencing as parents of children with disabilities. The emotional stress could contribute to the stigma or isolation experienced by these families. Green (2003), similar to the findings of Worcester et al. (2008), found that families of children with disabilities experience stigma associated with parenting a child with a disability. In a survey of 81 mothers of children with disabilities in Florida, Green (2003) documented evidence that participants experienced discrimination and stigma that added to their stress as mothers. Subsequent interviews conducted with a sub-set of the participants found that some of the participants held negative perceptions about disabilities before they became parents of a child with a disability. This study also adds evidence about isolation from same age peers as a function of maternal stress. Although there is not a causal link, Green's findings demonstrate that there is evidence that participants reported emotional stress from caring for a child with a disability as a barrier for seeking out interaction with typically developing same age peers for their child. Participants in this study also reported incidents in which relating to parents of typically developing children was

difficult. Because some of the parents of children with disabilities felt that their parenting experiences were more challenging in some ways, they found that they did not have as much in common when discussing daily life. The author presents the idea that the isolation many parents experience leads to feelings of stigma, and thus more isolation. This process resulted in less frequent opportunities for children to interact. Thus, finding ways to increase the informal interactions between and amongst typically developing peers, children with disabilities and their families exist as a continued motivation for early childhood professionals interested in support for inclusion.

In another study of the perspectives of fifteen families of children with developmental disabilities and challenging behaviors, whose children were enrolled in special education programs, Fox et al. (2002), demonstrated that participants reported discomfort in public related to their experiences with the reactions of others. Many participants expressed increased stress and negative effects on emotional stability through the process of parenting. Participants also reported losing friends and family support systems after receiving the diagnoses for their children. The authors point to a need for increased understanding in order to create and implement supportive family centered interventions. Thus, determining the effects of segregated settings on feelings of isolation by of families of children with disabilities could be another avenue for inquiry.

Stakeholders. Earlier research focused heavily on the perspectives of parents of children with disabilities as stakeholders in the processes of inclusion while the language, philosophies, and practices were shifting from segregation versus integration or “mainstreaming” toward inclusion (Halvorsen & Hanline, 1989; L. J. Miller & Strain,

1992). Some of this early research examined parent attitudes, buy-in or comfort as best practices were being established and concurrent research was being conducted to determine needs from the perspectives of teachers and professionals and the children in programs (Stoiber et al., 1998). The shift towards inclusion continued throughout the 1990s.

Professionals and past research asserted that participation in segregated settings isolate children with disabilities and their families from children considered to be developing typically and their families. There is an extensive history of examination of parents' specific perspectives on inclusion. For several decades researchers have valued the perspectives of parents as students were integrated into settings with children considered typically developing. Halvorsen and Hanline (1989) investigated the perceptions of parents of children with disabilities to understand more about their views on "integration" of their children in regards to supports they needed during the transition. Parents from thirteen families were interviewed about their experiences moving from segregated into integrated educational settings. Parents who had assumed roles as advocates for their children during the transition also reported the least satisfaction. This is an important finding as the stress associated with advocacy activities might affect parents' perceptions of available support. Participants reported feeling disliked or unwelcome in classrooms when they had "to push" for their child's participation. Family members reported feeling accepted and supported in segregated setting; however, they reported general concerns about acceptance and support in integrated settings.

In contrast, positive avenues toward inclusion are evident in the perspectives of parents of children with disabilities. Parents of children with disabilities report having a lot of child-specific knowledge about their individual child and his or her disability (Fox et al., 2002). When asked, parents of children with disabilities reported the need for teachers, professionals, and care providers to have more specific knowledge about their individual child (Stoner et al., 2005). Previous research has shown that providing information to adults about disability may result in more positive attitudes about a child or his or her behaviors (Chambres et al., 2008). Finding appropriate and respectful ways for information sharing might reduce stigma and increase acceptance for individual children for families who are willing to share child specific information. The ethics of this avenue need further attention as families may bear too great a responsibility in sharing information and thus feel the pressure to advocate leaving them open to possible decreased satisfaction in their level of actual inclusion (Halvorsen & Hanline, 1989).

There is also evidence in previous research studies that parents of children with disabilities had more positive beliefs about inclusion than parents of children without disabilities (Stoiber et al., 1998). This study investigated the beliefs of 415 parents and 128 early childhood professionals about inclusion. Parents of children with disabilities held more positive beliefs about inclusion than parents of children who were developing typically.

Palmer et al. (1998) examined parents' perceptions of inclusion when the participants had children with significant disabilities. They found that often the parents who advocated for placement of their children in inclusive classrooms expressed a greater

interest in social goals for their child. The authors discussed the possible trade-off parents may make when they are willing to sacrifice some services and specialized instruction for their children in order to provide access to a social environment. Parents should not have to choose between social goals and other academic goals and thus inclusion should continue to move toward true integration of goals in an environment that supports participation in a community.

In an effort to address parent perspectives about service delivery models, Werts, Harris, Tillery, and Roark (2004) presented their findings on the perceptions of parents of children with disabilities related to the roles of paraeducators in inclusive classrooms from pre-Kindergarten through fifth grade. Twenty-eight parent interviews were conducted and thirty-three students in inclusive classrooms were observed. Initially, observations within classrooms were conducted to examine the para-educator's role in instruction and interactions with students and the identified student's expected workload and interactions and engagement with other students and adults in the classroom. The parent interviews were conducted using a pre-determined twenty-question protocol after data collected through observations of paraeducators and students were graphed and presented to parents for review. The results of the parent interviews shed light on the perceived roles of the para-educators within the classrooms. Parents reported that their child with a disability had more help because of the para-educators and that inclusion was made possible because of the use of paraeducators within the classroom. These results pointed to a value for inclusion although there was no evidence presented that parents preferred inclusive settings. It would be helpful to ascertain parent perceptions on

inclusion as a separate question or set of questions; however, the findings of Werts et al. (2004) are most valuable for exploring the perspectives of parents of children with disabilities' perceptions about their child's school experiences. Another approach that the researchers could have implemented would have been a two-part interview with parents being asked a set of questions prior to receiving information collected by observers in the classroom. It could be that parents were influenced by the graphs and information presented by researchers prior to interviews. Asking for their perspectives without receiving any information collected from an external source might serve as a more productive line of inquiry into what parents think and on what experiences they base those opinions. Continuing to recognize parent opinions and values as driving factors in services provided calls for regular avenues into the examination of parent perspectives.

More recently, Hurley and Horn (2010) examined both family and professional perspectives of inclusion in order to better understand which characteristics of inclusive programs were of most value to the participants. The only parents' perspectives included in this study were those provided by parents of children with identified disabilities. In addition to valuing program characteristics that promoted independence, parents specifically noted that children with disabilities were actively involved and supported and that teachers who want to work collaboratively in inclusive settings were employed by the school site. The authors pointed to results demonstrating that the parents of children with disabilities valued high-quality settings. This study provides evidence for the importance of obtaining parent perspectives as professionals set objectives in early

childhood inclusive education. All perspectives should be examined as standards for inclusive classrooms are developed and implemented.

The extensive research into the perspectives of parents of children with disabilities points to a professional value in hearing the voices of families as children with disabilities are educated in more inclusive classrooms. Research that focuses on perceptions of parents of children with disabilities provides evidence that families still experience barriers within the community at-large related to parenting children with disabilities. It is alarming that parent participants in more recent studies also report concerns about acceptance amongst other adults, and thus the perception of stigma and isolation persists, at least in some aspects of the community for some families of children with disabilities (Fox et al., 2002; Worcester et al., 2008). The continuing reports of stigma and isolation point to a need for more exploration of the perceptions about disabilities and the inclusion of children with disabilities with various stakeholders in order to reduce the marginalization of young children and their families who use community early childhood programs and childcare resources.

Parents of typically developing children. The parents of children without disabilities comprise the second sub-group of parent stakeholders in early childhood programs. Their perspectives comprise a large and potentially influential majority of experiences and beliefs about inclusion. Their collective voice no doubt influences administrative decisions and program policies. Because the vast majority of children in community-based early childhood programs and childcare classrooms are considered typically developing, the current study sought to further expand the knowledge base

surrounding perspectives of parents as stakeholders in early childhood inclusion. When examining the perspectives and experiences of parents of typically developing children in inclusive early childhood settings, several areas of research influence deeper understanding.

As such, the perspectives of parents of typically developing children have also been investigated related to experiences and attitudes about inclusion (L. J. Miller & Strain, 1992; Peck et al., 2004; Stahmer, Carter, Baker, & Miwa, 2003). A majority of parents who participated in these studies were supportive of inclusion, although attitudinal barriers were identified in a minority of parents participating. Consequently, not enough information is known about parents' of typically developing children perspectives and experiences specifically related to program choice and enrollment in community-based early childhood programs or childcare to expose potential barriers to enacting inclusion.

In a study of parent beliefs about inclusion, Stoiber et al. (1998) disclosed that parents with more education were more likely to express positive beliefs about inclusion. The authors assert that these parents may be more reflective about the discriminatory practices inherent in segregated settings. Although participants who were parents of children with disabilities expressed more positive comments about inclusion in the study than parents of children without disabilities, the authors question whether parents of typically developing children who have had more experience with inclusion would have more favorable beliefs.

An earlier study of parents in integrated or “mainstream” settings and parents whose children participated in segregated settings found evidence to support the development of more positive attitudes toward integration by parents of typically developing children enrolled in integrated preschools (L. J. Miller & Strain, 1992). This finding is consistent with research that provides some evidence that proximity to and experience with children or individuals with disabilities positively influences attitudes and acceptance (Daruwalla & Darcy, 2005; Gorenczny et al., 2011). Surveys were completed by 70 parents of typically developing children in settings labeled as “mainstreamed” in which children with disabilities were included and 59 parents of typically developing children in segregated settings in which no children with disabilities were included. The study analyzed responses of parents in areas related to opportunities for integration and parental involvement/ program satisfaction. Parents of typically developing children in integrated settings reported support for integrated preschool settings and as well as satisfaction in their settings. The parents of typically developing children in mainstreamed preschool settings also reported support for integrated educational settings for older school-age children at a higher rate than parents of typically developing children in segregated settings. Rich descriptions of parental perceptions of experiences and attitudes about disability would further illuminate the qualities of support for inclusion and the extent to which inclusion influences families’ program enrollment choices.

Another study investigated perspectives of both parents with children with disabilities and children developing typically. Seery et al. (2000) used telephone

interviews of parents with and without children with disabilities and teachers/staff members in one university-based preschool program. Parents of typically developing children were interviewed, as were parents of children with disabilities enrolled in the program. The total number of voluntary participant parents was thirty. Twenty participants were parents of typically developing children and ten participants were parents of some of the twelve children with disabilities that were enrolled in a program with a total of 140 children. Two interviews were conducted with each study participant; one in the early school year and one late in that same year. Several issues of concern arise when considering the representative numbers of parents and staff in this study. The overall voice of parents of children without disabilities may not be accurately represented. Because it was mentioned that the children being included in classrooms beyond those specifically designed to serve children with disabilities were expanding through the course of the year in which this research was conducted, the attitudes toward inclusion may have also been affected by programmatic changes occurring in conjunction with the time of the interviews. It may be that parents were influenced by experiences within their child's classrooms. Although there was little further explanation, the classroom appeared to be a segregated setting. Moreover, there is little explanation about whether or not the parents participating in the study were parents of children who were included in regular classrooms or if their children were in settings split between inclusion and separate classrooms. It is notable that the results indicated that there was a decrease in parent reports of benefits of inclusion for children from eighty seven percent from the beginning of the study to seventy five percent later in the school year. A definite difference in

parent and staff support for inclusion late in the year was demonstrated. Although more than sixty percent of parents reported unconditional support for inclusion and more than thirty five percent reported conditional support at the end of the study, only twenty seven percent of staff reported unconditional support for inclusion and more than seventy percent reported conditional support at the end of the year. The staff participants believed to a much greater extent that significant additional support was necessary for future efforts to make all educational programming inclusive. Differences in parent and teacher opinions and perspectives of the effects of inclusion on children with and without disabilities need to be further investigated to determine the overlap and potential two-way effect of one perspective on the other. These findings suggest that asking parents and staff members questions about the future efforts to make all programming inclusive may affect their responses if they think that the desirable answer is in favor of inclusion. A different research design for asking parents in programs in which there was not a current programmatic change towards greater inclusion occurring, might have resulted in less affirmative support for inclusion. Thus, it can be posited that more experiences for parents with children with disabilities in classrooms may affect parents' appreciation for the programming within their child's classroom.

Peck et al. (2004) explored the perceptions of parents of typically developing children enrolled in inclusive public elementary programs in which choice was not a factor in their educational enrollment. Parents of children without disabilities or children considered typically developing reported little or no connection between academic learning and social learning (Peck et al., 2004). Although this study focuses on inclusive

settings and experiences for elementary aged children, the implications for early childhood settings (in which a close connection between social learning and academic learning is best practice) should be further explored.

Parent education and communication about specific teaching practices may be a pervasive need throughout inclusive classrooms. When investigating the knowledge parents report about children with disabilities, parents of typically developing toddlers reported gaining knowledge thorough parent education opportunities in one study (Stahmer et al., 2003). Parents of typically developing children reported positive feelings about inclusion perhaps, in part, as a result of positive experiences and parent education in a program intentionally inclusive of young toddlers with Autism (Stahmer et al., 2003).

Program Choice

Researchers have investigated the perceptions of parents of both children with disabilities and parents of typically developing children regarding program choice. Parent perspectives may influence programs that depend on voluntary enrollment. Professionals and administrators should recognize the need for parent support and buy-in when enrollment is dependent on parent choice. Thus, investigating previous research focused on how parents' perceptions and experiences affect overall perspectives and choice of program needs further exploration. Previous research has addressed the factors that influence parents' decisions about program type in a variety of ways.

Parents of children with disabilities. Parents of children with disabilities must evaluate all aspects of a program to determine whether or not their child's needs will be met. In a study focused on perceptions of childcare, Ceglowski et al. (2009) found that

parents of children with disabilities rated the quality of their childcare arrangement as good although the rating appeared to be related to finding a childcare provider who was willing to work with their child. Ceglowski et al. (2009) found that the observable quality of the care was not related to parent perceptions. Additional issues revealed in this study relate to the difficulty some parents of children with disabilities experienced in finding care that should be considered when professionals conceptualize quality and inclusion. For example, family members reported difficulties in finding caregivers who were willing to care for children with disabilities. Participants also reported having to pay more to find adequate care for their children with disabilities. Still other participants reported difficulty in finding caregivers with the necessary training to care for their child. These findings of parent perceptions and experiences can provide valuable information professionals can use in both directing policies and providing professional development as avenues toward improvement in overall program quality and practices that promote the successful inclusion of children with disabilities.

An important aspect to inspect further is the opinion parents have about service delivery models regarding the use of co-teachers, paraprofessional and support staff within inclusive settings. An investigation of parent perspectives of an inclusive classroom that utilized co-teachers provided interesting information that adds support to this model for successful inclusion (Tichenor, Heins, & Piechura-Couture, 2000). Through the use of an open-ended questionnaire parents of children with and without disabilities reported their child's opinions of the classroom including likes and dislikes and their satisfaction and perceived benefit with the co-taught classroom experience.

Evidence presented in this small-scale study pointed out that parents support inclusive classrooms that utilize co-teaching teams. Parents of forty-two students were surveyed. Twelve of the students had identified disabilities. Because there were not significant differences in the reported perspectives of parents of children with and without disabilities, the support seems to be relatively universal. An obvious limitation of these findings is the size of the study. Children of the families participating were all enrolled in one classroom. There may be other factors present either in program characteristics or in the dynamics of the co-teaching team that had greater effects on the positive support for a co-taught inclusive model. Moreover, this type of study should be replicated in a variety of settings (with similar programmatic characteristics), to determine whether or not parent support is universal.

Another related area that deserves further exploration is the parent's perceived ability to partner with care providers, a factor sought by some parents of children with disabilities (DeVore & Bowers, 2006). Moreover, parents of children with disabilities have emphasized the importance of having knowledge specific to their child as influential to their feelings about a program, classroom, or teacher (Stoner et al., 2005). These factors about program type, teaching expertise, and service delivery clearly influence parents of children with disabilities. The childcare provider's characteristics are valued by families. DeVore and Bowers (2006) revealed in their study of eighteen parents of children with disabilities that two criteria for determining choice of care were important to these families. Participants reported the need to find providers that offer care specially tailored to their child's needs and providers or programs that partner with parents and

families. The parents often relied on personal recommendations for providers and were skeptical of licensing or program standards as in order to feel comfortable placing their child in a program. These findings demonstrate the additional need for an expanded understanding of what parents value in early childhood settings, especially related to inclusion.

Knoche et al. (2006) gathered information on parent perspectives of inclusive childcare settings and compared them to the perspectives of childcare providers. Although a small percentage of the parent participants had children with identified disabilities, the surveys collected from these parents provide valuable insights about parent perceptions. Information about parents' perceived stress related to childcare and accessibility or availability of care was collected as well. For parents of children with disabilities, certain factors were rated as more crucial than for parents of typically developing children. These included stability of providers and training and credentials of providers in addition to acceptance of subsidies. More importantly, parents of children with disabilities reported that the willingness of a program to accept their child into a particular setting had a significant influence on the parents' choices of care. Characteristics of care providers including willingness have been seen as valuable in other studies as well (DeVore & Bowers, 2006; Gilbert, 2009; Stoner et al., 2005).

Additional evidence exists to demonstrate the value families of children with disabilities place on teacher or provider characteristics. Booth-LaForce and Kelly (2004) conducted a study focused on parents' of children with developmental disabilities using childcare. Eighty-nine mothers of children with identified disabilities participated in data

collection including in-person interviews starting when children were a year old. In addition to information collected on type of care used and age of entry into childcare, mothers in this study were asked to rate the problems they experienced with finding quality care, feeling confident in staff members and care providers, service provision continuity, and factors related to convenience such as cost, location, and available transportation. The most significant issue reported by participants was in finding high quality care for their children across the ages of children from which data was collected. An important issue revealed in this study was the rate of use of relative care versus non-relative care for children with disabilities. The authors therefore propose that perceived confidence in care providers may play a large role in choosing care. Moreover, the researchers assert that cost may play a role in the decision to utilize family members as care providers. Although the availability of integrated services was a reported issue for children transitioning into special education programs, there was little mention of supportive inclusive settings to meet the needs of working families needing full-time childcare. Thus, the information provided by parents in this study should be considered as further evidence for the need for accessible, inclusive programs for families with a variety of needs.

Parents of typically developing children. Several studies have explored parent perspectives about their choices of early childhood or childcare programs for their children without disabilities. When considering parents' choices of care, several important areas relate to parents' rated satisfaction in settings when they were asked to respond to questions about either classroom quality or inclusiveness. Fantuzzo, Perry, and

Childs (2006) examined parent experiences with teachers, the classroom and the early childhood program their child attends in order to establish documentation of their general satisfaction with the program. These authors conducted a study using a parent satisfaction scale created by parents and professionals as a means to measure various characteristics of the experiences of families in early childhood settings. Family members (primarily mothers) who were considered to be primary care providers of more than 600 children completed the ratings. The sample was diverse culturally, economically and in family structure. Children of study participants attended Head Start programs, full day childcare, Kindergarten or first grade. Areas measured by the scale encompassed communication between school and home, families perceptions of contact with other families and other school staff, and the child's experiences within his or her classroom. Results indicated that parent satisfaction depended on several factors including type of program, employment status and family type (married or unmarried parents). These findings can lead to greater information about meeting the needs of families who work full-time and those who are single parents. The researchers point out the value of this type of research for policy creation and implementation so that all perspectives are represented. This could be particularly relevant in situations in which families pay for programs or childcare provided by the private sector and for families seeking assistance through subsidies or whose children attend federally funded Head Start programs. Satisfaction in childcare and early childhood programming is a factor to consider when examining enrollment into various early childhood programs. If inclusive programs are to increase in number, examining satisfaction from the perspectives of parents of typically developing

children should remain a goal of future studies. Thus, the perspectives of *all* parents using these programs must be explored.

Related to the importance of understanding parent perspectives, a study examining reasons why parents choose a particular type of childcare (Peyton, Jacobs, O'Brien, & Roy, 2001) also delineated categories of quality based on parents' preference (home based care/center based care and relative or non-relative care) as well as practical concerns. Three family factors including demographics, maternal responsiveness, and parenting stress were investigated to determine whether or not they were related to choices of childcare used by parents. Another topic investigated in this study was whether or not the quality of programming chosen by mothers was related to the reason they cited for using that type of care for their child. The study further examined whether or not mothers' satisfaction with the type of care they chose was related to their reported reason for choosing that care or to the observed quality of care. Six hundred and thirty three mothers participated in the study and were contacted through phone calls and home visits beginning as early as one month after their children were born. Additional data included recorded observations of the mother and child and observations of the child's care type (home-based, center-based or relative care) and the observed quality of the childcare at age three. More than half of the participants reported that quality (either of the provider, environment, or program) was one of the most important factors in their choice of childcare. More than 20 percent cited a preference for a type of care (home-based, center-based, or with a relative) and more than 20 percent cited practical factors such as availability, cost, location, or hours of operation. Mothers' working status was related to

whether or not quality was considered in the choice of care. Mothers working full-time were less likely to choose care because of quality but the authors discussed the probability that family factors may outweigh quality concerns. Somewhat surprisingly, 70 percent of mothers participating in the study reported high satisfaction with their care arrangement regardless of measured quality. There was a difference in reported satisfaction for mothers who used quality as a key decision factor over those that chose childcare based on practical needs. The study included participants of a wide range of diversity in economic backgrounds and cultures but did not address the needs of families with children with identified disabilities. Although the researchers cited the use of trained observers to gain data about quality of programs as a point of strength in this study, a more open-ended data collection inquiry might have uncovered information unavailable in the type of structured inquiry employed in the study. In summary, the findings of Peyton et al. (2001) provided evidence that parents valued many of the same childcare characteristics proposed as most important by researchers and professionals in early childhood care and education. Given the evidence that mothers' views of satisfaction were related to whether or not quality was a determining factor in their choice of care, it would be worthwhile to further examine their reported experiences and opinions on inclusion.

Similarly, examining access families have to early childhood programming in an investigation of parent use of childcare provides information that lends to a more in-depth understanding of parent perspectives. Shlay, Tran, Weinraub, and Harmon (2005) uncovered the dynamic between availability of care or type of care and the actual choices

parents make. These researchers asserted that if quality care is widely available, the choices families make for actual childcare settings will be different than in circumstances in which quality care is limited. Using a dynamic, simulated childcare environment, participants made active choices based on a wide variety of criteria including factors of convenience, program type, quality factors and characteristics of caregivers. Caregiver characteristics were favored most highly by participants, pointing to a strong value by parents for experienced, attentive and caring caregivers. This is consistent with evidence investigating the values of parents of children with disabilities (Booth-LaForce & Kelly, 2004; DeVore & Bowers, 2006; Hurley & Horn, 2010; Stoner et al., 2005).

A study on childcare choice for African American parents from lower economic backgrounds included information on their ratings of program quality (Shlay et al., 2005). One hundred forty-three parents completed a survey in a small group site. In accordance with previous research findings, these parents' ratings of quality were related to choice of childcare when mothers' work schedules were more flexible. This investigation revealed that parents who worked full time desired a particular location for childcare and rated commute time to the childcare program as important. Another significant contribution of this research was evidence that parent participants valued safety and sanitation factors in considering the physical environment of prospective childcare settings. Most critically, the researchers found that parents' perceived interactions between children and caregivers were the most valuable criteria in choosing what they perceived as optimal childcare. The underlying goal of obtaining safe and supportive care for children in which the providers of care are knowledgeable was represented vividly in this study. It is posited that using

parent survey methodology as did Peyton et al. (2001) and Shlay et al. (2005) to determine which specific characteristics are desirable to the consumers of childcare programs can provide insight into the measures traditionally used in classrooms and programs to ensure that best practices are enacted. Thus, if there were more consistently utilized parent participation techniques in providing feedback to programs that offer a voice to greater numbers of family members, researchers and professionals could be better connected to consumers in the community early childhood and childcare marketplace in which program enrollment is voluntary and programs depend on parents as consumers.

When considering the availability of early childhood programming or childcare and the issue of choice, research must examine the limitations to families given their ideal objectives. Li-Grining and Coley (2006) found little agreement between the type of care mothers used and their desired care for children. They revealed that many parents may philosophically want to use a particular type of care (home based, relative care, center-based care, etc.) but they may be unable to obtain that choice for their child. Li-Grinning and Coley (2006) also addressed several perspective-focused questions in their study of mothers' views on childcare. Survey questions investigated included determining the type of childcare used by these families and determining whether or not the care available was appropriately addressing their needs and preferences. Mothers participating in the study completed a Likert scale that addressed satisfaction with the childcare they were using. Pre-identified items were selected by the researchers to assess the mothers' perceived quality of the environment and interactions, the perceived

accessibility to care and flexibility for the mothers, and the mothers' perceptions about communication with care providers. When results were considered, program type was delineated by center or home-based care, and whether or not the care provided was licensed care. Several analyses were performed to determine how parent perceptions matched observed and measured developmental quality of programs and chosen care providers and how mothers' needs were being met by the care they were using. Results revealed that the quality of care was primarily measured as minimal except in cases in which children were enrolled in Head Start programs in which quality was determined to be good on average. All of the mothers who participated in the study were generally satisfied with the quality of childcare they were using and reported higher levels of satisfaction with the flexibility in hours of operation and accessibility to care. The authors pointed out a potential limitation to the reports of higher satisfaction in regard to the accessibility and flexibility of available care. Mothers using childcare were the only mothers surveyed; whereas, mothers who were unable to find satisfactory care or care that met their needs were not represented in the sample employed for the study. A critical issue uncovered through this investigation included evidence that the participants often judged the quality of a program on a different set of characteristics than those used in traditional quality rating scales or researcher criteria. The findings could influence future research conducted to address the issues of availability of childcare for low-income families. More studies addressing childcare choice and availability in conjunction with parent perceptions of their childcare experiences will lead to better understanding of what

motivates choice of care and thus expose areas for greater professional attention when improving childcare options for all children and families.

Examining the perspectives of parents of typically developing children in inclusive early childhood programs, Stahmer et al. (2003) gathered information from the earliest experiences for parents. Two different toddler programs were included in their research. Although legislation in place since the passing of the Americans with Disabilities Act (1990) requires that all programs are accessible to all children and families irrespective of ability level unless a major program alteration would be necessary to include those with disabilities, one program included in this study was identified as a “regular” program and thus did not include children with disabilities. Thirty-one parents with children under age three enrolled in one of these two programs participated by responding to a questionnaire. The other program, an inclusion program, specifically enrolled children with behaviors typical of a diagnosis of Autism and provided special programming for the identified children who only attended the inclusive classroom for part of the day. Children developing typically were enrolled for a full day and with at least four teachers with bachelor’s degrees present in these classrooms. However, this setting specified in the study as an inclusive setting may not be representative of other inclusive settings with less staff support and children with disabilities enrolled full time. Additionally, many children may be identified later than the specific age range noted in the study meaning that other programs may be including children with disabilities without the specified goal of doing so. The questionnaires used for parents with children enrolled in intentionally inclusive settings and for those with children enrolled in a

program considered a regular childcare program posed the same questions with one exception. A question assessing parents' opinions of their typically developing child's enrollment in an inclusive setting was added to the questionnaires provided to that set of parents only. According to the results of this investigation, parents of typically developing children do not cite specific detrimental effects on their child's enrollment in an inclusive program. In fact, participants identified the potential benefits for children without disabilities beyond those of other programs, with the proper support. Although parents and teachers reported concerns of lack of time and attention for children without disabilities, these issues were not found to exist in the inclusion program. Consequently more research is warranted in other inclusive programs that operated with a higher teacher to child ratio or with fewer educated teachers represented in the Stahmer et al. (2003) research study. These issues need replication and further examination amongst various groups of participants using a variety of early childhood programs in order to best represent all stakeholders in the lives of young children.

Although factors of cost, convenience, and location clearly affect parents' decisions about care and education choices for their typically developing children (Booth-LaForce & Kelly, 2004), this study suspended these family priorities for enrollment and specifically asks parents about the inclusion of children with disabilities in their children's classrooms. Further, the current study sought to uncover factors that may contribute to the disconnect between parents of children with and without disabilities given the history of research on negative attitudes about disability and the parent perspectives and experiences of stigma, isolation and lack of acceptance.

Central Question

The central question for this study is: What are the perceptions of parents of typically developing children about inclusion and the children with disabilities who are included in their children's early childhood classrooms?

Conceptual Framework

The conceptual framework for the current study is depicted in Figure 1.

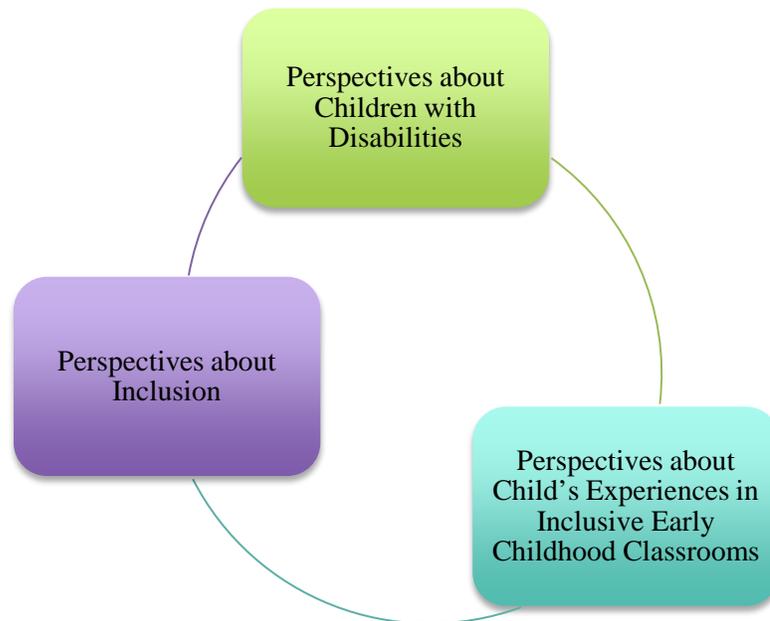


Figure 1. Perceptions of Early Childhood Inclusion.

For the purposes of the current study, I examined parent perspectives of inclusive early childhood settings in order to better understand their overall perception of early childhood inclusion. The circle depicted in Figure 1 describes the examined perspectives related to their child's experiences, inclusion in their child's early childhood program or center and their perspectives about the children with disabilities enrolled with their child,

and the contribution of these perspectives to the overall perception of each participant. These perceptions are influenced individually by each parent participant's experiences and their perspectives of the experiences of their children in early childhood programs, along with their perspectives about the children with disabilities enrolled in classrooms with their typically developing children, and their perspectives about inclusion. The areas of focus for the current study are depicted in the squares, and these areas are reflected in the interview protocol for this study. Parents of young children draw conclusions and express perspectives about their child's experiences based on their own perceptions of their child's experiences as well as their attitudes, beliefs and values. Overall perceptions about inclusion combine elements from perspectives from each of the areas of focus depicted above. Thus, the three areas of perspectives in the circle combine to illustrate parents' overall perceptions of early childhood inclusion.

Understanding the perspectives of parents of typically developing children is important to illuminate the full picture of inclusion in early childhood programming. An established history of investigating parent perspectives exists. Perspectives and perceptions of inclusion from parents of children with and without disabilities have been investigated as valuable sources of stakeholder information (DeVore & Bowers, 2006; Stahmer et al., 2003; Stoiber et al., 1998; Stoner et al., 2005). The data from these studies provides a clearer picture of the overall progress in providing inclusive opportunities for all children, but more data is needed to identify potential barriers and avenues toward full inclusion.

The current study investigated the perspectives of participant experiences in inclusive early childhood programs as a contributing factor to their overall perceptions of inclusion in early childhood. The data collected about these perspectives adds to the existing literature that has focused on the experiences of families in inclusive programs (Knoche et al., 2006; L. J. Miller & Strain, 1992; Peck et al., 2004; Stahmer et al., 2003; Seery et al., 2000).

A history of parent perspectives has been established through research that highlights the experiences of parents of children with disabilities (Fox et al., 2002; Green, 2003; Worcester et al., 2008). Little is known about parents of typically developing children's perspectives about the children with disabilities enrolled in classrooms with their children. The current study investigated the participants' perspectives about children with disabilities who are enrolled in their child(ren)'s classrooms as part of their overall perception of inclusion. The data on perspectives of parents of children considered to be developing typically compliments the literature describing the experiences of parents of children with disabilities. Previous literature focusing on parents of children with disabilities highlights feelings and experiences of stigma, isolation, and discomfort interacting with families of typically developing children. Data from the current study and perspectives explored related to each participant's overall perception about inclusion and the children with disabilities enrolled with participants' children adds to the overall context of stakeholder perspectives of early childhood inclusion.

Previous research has established value for the perspectives of parents of children without identified disabilities about inclusion. Participants reported positive feelings

about inclusion resulting from both positive experiences and parent education opportunities (Stahmer et al., 2003). The current study adds to the literature investigating perspectives of parents of children without disabilities on inclusion in community-based early childhood settings (Knoche et al., 2006; Seery et al., 2000).

Interviews with parents of children enrolled in inclusive early childhood classrooms allowed the researcher to examine their perspectives about experiences in these classrooms and programs. Thus, the study employed open-ended interviews with parents of children considered to be developing typically to gain a better understanding of the experiences, perspectives and perceptions of these stakeholders.

The collected data adds to the literature about inclusive classrooms in a variety of ways. Given that the professional field of early childhood education is moving towards inclusion, based on a historical rationale and variety of arguments that support providing educational experiences for children with and without disabilities together in early childhood settings, one must examine the nature of early childhood placements available from the perspectives of those enrolled, in order to better understand what is needed to ensure inclusion is enacted. Professionals and administrators need more information about how to effectively advocate for inclusion and higher education faculty need additional information to prepare pre-service professionals for this position of advocacy for families of typically developing children.

From a programmatic perspective, a program that has a strong philosophy of intentional inclusion has an obligation to enroll a majority of typically developing peers to maintain a natural proportion. Inclusion cannot be fully enacted in community early

childhood programs without enrolling children with and without disabilities. If parents of children with and without disabilities are not voluntarily enrolling their children in these programs, inclusion cannot be fully enacted. Peyton et al. (2001) found three strata of types of factors that influence parents' choice of childcare. These included quality, practicality and preference for type of care. The current study sets aside factors of quality and practicality or convenience in order to focus on the perceptions of, and experience in, inclusive community-based early childhood programs chosen for a variety of reasons by families.

More information about participant perspectives and perceptions is needed to be able to effectively communicate the benefits of inclusion for all children, including those who are considered typically developing. As education, and more specifically, early childhood education, moves toward inclusion of children with disabilities through childcare and schooling, inquiry into the perceptions parents of typically developing children who use inclusive early childhood programs have about inclusion and the children with disabilities enrolled in their classrooms adds to the literature on stakeholder perspectives in early childhood. Moreover, given the standards for best practice in early childhood programming and because parents of young children are the consumers and stakeholders of services and programs in early childhood, acquiring their perspectives about inclusion is paramount if inclusive practices in early childhood education are to be fully realized (Peyton et al., 2001; Salend & Garrick Duhaney, 2001). Gaining more insight into the reported values, perspectives, and experiences of parents of children without disabilities illuminates areas in which programs and professionals can provide

inclusive education experiences. In the current study, the perspectives of parents of typically developing children are explored in order to gain more information about how their perspectives about inclusion and the experiences of their children in inclusive classrooms affect their overall perceptions of early childhood inclusion as it is enacted in their early childhood programs.

CHAPTER III

METHODOLOGY

Introduction

The purpose of this study was to explore parent perceptions of their child's experiences in an inclusive early childhood setting. Further, this study sought to investigate parent perceptions of inclusion of children with disabilities and the children enrolled in their typically developing child's early childhood classroom. Qualitative methodology and design was used to conduct the study. Qualitative methodology is the best method for understanding the experiences of participants and making meaning of those experiences (Creswell, 2009). Therefore, I interviewed parents of typically developing children using an in-depth, open-ended interview format to investigate the perceptions and perspectives related to the inclusive early childhood setting in which their child is enrolled. Interviews were analyzed and coded for structural and textural emerging themes that reflected the participants' perspectives about their child's experiences and the children with disabilities in their child's classroom, their perceptions of their experiences with their early childhood program or childcare, and their overall perceptions of inclusion. The essences of these perceptions experience were ascertained from these themes.

The current study discloses dense and diverse perceptions of inclusive early childhood or childcare experiences, including beliefs about inclusion and children with

disabilities. The perspectives of parents of children considered typically developing were studied in order to more fully examine inclusion in early childhood education programming. Parents of typically developing children enrolled in early childhood programs and childcare centers that include children with disabilities in classrooms for three- and four-year-olds in a county designated as “Middle” County, NC were interviewed. After interviews are recorded, I reviewed the recordings and made field notes. The interviews were transcribed, read, analyzed, coded, and verified using a peer reviewer/debriefer. To further verify the data collected through interviews, member checks were conducted by providing full verbatim transcripts to interview participants (Creswell, 1998). Initial codes and themes were discovered through phenomenological analysis of the structures and textures of each participant’s perspectives and experiences as evident in the interview transcripts (Moustakas, 1994). After seeking to represent the perspectives of participants included in the study, the data was further analyzed through an epistemological lens that included acknowledgement of the social construction of “disability” and the history of marginalization of individuals with disabilities addressed in critical disability studies (Goodley, 2013).

In order to conduct an in-depth investigation of the experiences and perceptions of each of the study participants, I defined two guiding questions. The research questions for this study addressed participant perspectives and the experiences of their children as they described them.

Research Questions

1. What do parents of typical children say about children with disabilities?
2. What do they say about the inclusive programs in which their typical children are enrolled?

Epistemology

The phenomenon under investigation in this study was the perceptions that parents of typically developing children express about inclusion and their perceptions about children with disabilities included in their children's inclusive classrooms. Because phenomenological studies examine lived experiences of participants, it was my goal as a researcher to balance voices of the participants' perceptions with the interpretations of the researcher. I have chosen to use first person to clearly express both my position as the researcher and the voices of the participants in the study in order to best demonstrate the balance between emic and etic approaches to understanding how inclusion is experienced and perceived. Rather than attempting to project objectivity into the study, the first person voice allows me to align my study methodology with my overall epistemological lens. Qualitative inquiry rejects the notion of subject/object dualism and therefore invites the interpretations of the researcher as meaning is found in the data provided by study participants. Thus, my voice as a researcher—as well as the voices of the participants in the study—are both represented in the results and discussion chapters that follow.

In addition to identifying the voices of participants and the voice of the researcher, the standpoint epistemological approach used in this study, as discussed by Glesne (2011), keeps the marginalization of children with disabilities and their families a central focus of

interest for discussion. Although the participants in the current study were not a part of the potentially marginalized group under investigation, the processes and beliefs that add to marginalization were uncovered through examination of participants' perceptions and experiences. Moreover, the epistemological approach to understanding the experiences of the participants in this study required in depth identification of and reflection on my positionality, theoretical approach, and overall epistemological lens as the researcher in order to make those clear and best represent the voices of the participants separate from these influences.

Positionality

It is important to identify the position of the researcher when conducting qualitative inquiry (Maxwell, 2005; Shank, 2006). Part of the overall epistemological approach to the current study incorporates the understanding that the perspective of the researcher informs the process of analysis (Schram, 2006). A particular challenge in phenomenological research rests in determining the extent to which the personal experience of the researcher is appropriate to the interpretation of data (Creswell, 1998). As an outspoken proponent of inclusion with a history as a stakeholder in several capacities of the early childhood education, I assert that my position as researcher is valuable for uncovering the perspectives of participants in this study related to the marginalization of young children with disabilities and their families who utilize private and community-based early childhood programs and childcare.

More specifically, I recognize my position in several important areas. I am a parent of three children with and without identified delays or disabilities who have been

enrolled in inclusive early childhood classrooms. My personal perspective and personal experiences lend a better understanding of local, or emic, accounts of participants' experiences. In analysis, my own experiences and perspectives must be recognized and set aside in order to effectively examine the perspectives of other parents, particularly those of parents of only typically developing children, in order to best understand the emic accounts provided in the data. Also, as a teacher in an inclusive preschool classroom and an administrator of an intentionally inclusive program, recognizing the biases I have developed about program standards and inclusive practices was critical in moving the conversations forward during interviews. By identifying my standpoint on inclusion of children with disabilities in early childhood settings, I committed to first, making the voices of participants' clear when describing their perspectives and experiences, and second, providing a critical interpretation of the experiences of participants as they may add to our overall knowledge of the systems that serve them. Phenomenological analysis procedures, including bracketing researcher interpretations, aided in clarifying the experiences and perspectives of the participants, separate and apart from the biases and presuppositions of the researcher. Although I did not intentionally share information about my background and interests and information that lend to my perspective, as a researcher, no effort to conceal this information was made, as recommended by Schram (2006).

Theoretical Approach

The theoretical approach used in the current study addressed the theories inherent in my analytical lens as a researcher. Beyond simply identifying my positionality as a

researcher, the use of a research lens that incorporates critical theory positioned me for valuable analysis of data collected. The critical paradigm informs the direction and intentionality of the data collection. My experiences are inextricable from my identity as a researcher and influence potential analysis from an etic standpoint. These factors positively contribute to my overall critical lens (Schram, 2006).

The current study also makes use of concepts from critical disability studies. Specifically, Goodley (2013) describes the evolution of critical disability theories, when he addresses critical disability theory and the intersection between critical disability theory and other established and emerging critical theories as a path toward praxis in which combining theory and activism is necessary.

Annamma, Conner, and Fern (2013) describe the intersection between theories of critical race theory and disability studies as a new theory that combines both called DisCrit. Because of the overrepresentation of non-white students in special education, it is important to consider both the social construction of race and the social construction of perceived disability in order to better understand marginalization of students of color or individuals from cultures other than the majority culture. “DisCrit renounces imposed segregation and promotes an ethic of unqualified belonging and full inclusion in society” (Annamma et al., 2013, p. 15). Acknowledging the development of this theory and the potential for its use in interpreting the interviews of participants does not predispose the current study to additional bias, but rather makes available an extension of a useful lens when developing concepts through data analysis. Finally, one of the essential assertions from the developers of DisCrit cautions against making any assumptions about the lived

experiences of individuals without their voices present. Thus, the current study made use of ideas presented that could be potentially marginalizing to children with disabilities and their families without assuming their positions or feelings.

A critical lens is necessary in data analysis to uncover potential barriers toward the inclusion of children with disabilities from these parents' perspectives. Inclusion of children with disabilities is mandated in early childhood programs through federal legislation and is advocated through advances in the discipline of early childhood education, and parents are the consumers of early childhood programs. Social action is necessary to address how these consumers perceive inclusion. Shank (2006) describes the need for a critical approach to direct social action as necessary. The type of analysis required for the current research used a value-mediated line of inquiry in the interest of spurring change. Hence, the use of a critical lens as described by Schram (2006) permits taking issue with things as they are.

This study uncovered more information about how parents describe their perceptions of and experiences with inclusion by presenting the structural and textural themes from each participant. In deriving the essences of these themes, the current study addressed the extent to which parents' perceptions can point to the way to providing greater access to early childhood education for children with disabilities and their families. Certainly, legislation (ADA, 1990; IDEA 2004) related to inclusion would direct audiences toward social action necessary to move toward a greater degree of acceptance and support for the inclusion of children with disabilities in early childhood programs by parents of children without disabilities. The draft of the current position

statement from the federal government's Office of Special Education Programs (USHHS & USDOE, 2015) also directs attention to specific action items necessary for movement towards full inclusion in early childhood programs. Glesne (2011) describes the interest in praxis present in the current study as an examination between thought and action or practice. By using the critical identity framework (Shank, 2006) to determine how the participating parents perceive inclusion, the current study added insight from stakeholder perspective to the areas that need attention in order to provide greater access to early childhood education for children with disabilities and their families.

Epistemological Lens

Examining the marginalization of individuals with disabilities as members of modern society in the United States through a critical lens incorporates both the position of the researcher and critical disability theories to determine whether the ideology concerning the care and education of the country's youngest children in early childhood programs is compelling. Parents of typically developing children or children without diagnosed disabilities constitute a majority of the population of enrollees in inclusive early childhood programs and childcare. In this study, this epistemological lens was used as part of the overall conceptual framework of the study, guiding analysis of data and taking into consideration the lack of personal voices from those who could be marginalized by the perceptions, perspectives, or experiences of the majority. Thus, the area shaded in purple as part of Figure 2 depicts the researcher's lens as a necessary layer for understanding the concepts under investigation.

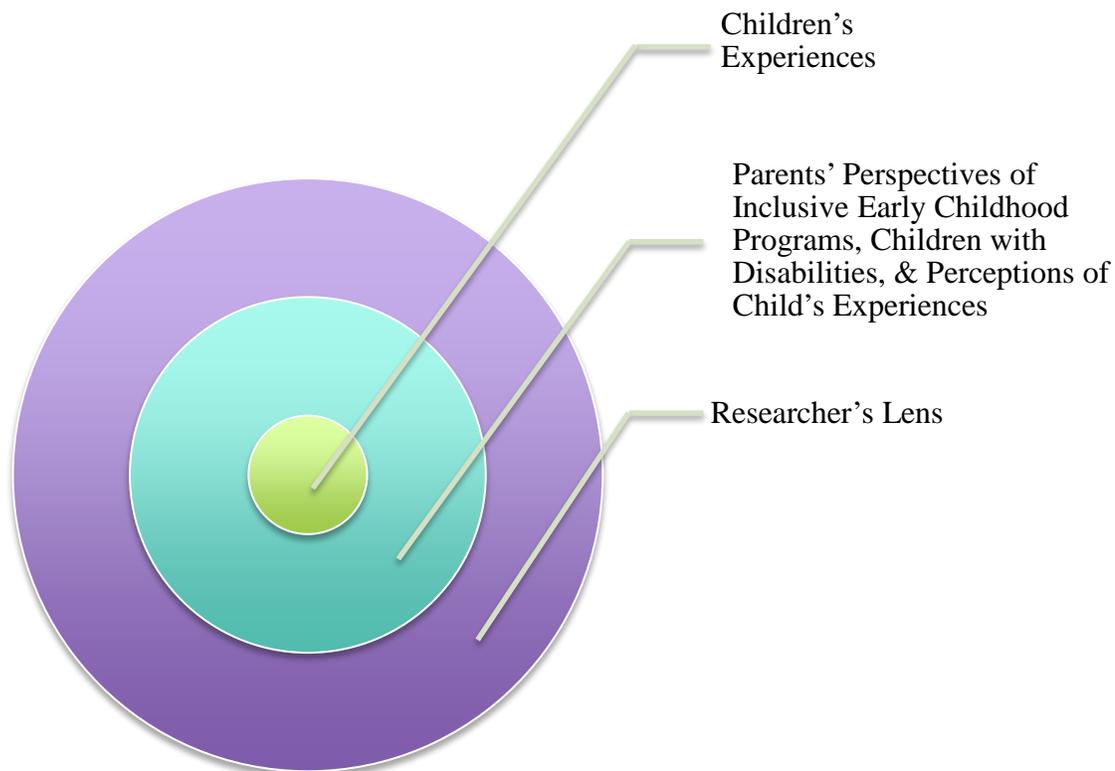


Figure 2. Epistemological Lens for Investigating the Perceptions of Parents of Typically Developing Children about Inclusion in Early Childhood Programs.

Research Design

The current study is a qualitative phenomenological study. In accordance with Schram's (2006) description of phenomenology, this study examined in-depth the experiences and perspectives of parents who have children enrolled in inclusive early childhood settings. Creswell (1998) describes the need for a phenomenological approach when the researcher desires greater insight into lived experiences. Examining the lived experiences of participants in inclusive early childhood settings allowed me to find and expose deeper meaning of the phenomena associated with the experiences of inclusion from the perspectives of those involved. The phenomenological approach to interviewing,

discussed in Shank (2006), provides the foundational framework for the interviews used in this study. Schram (2006) outlines the phenomenological approach using several primary suppositions. Because inclusion is enacted in many different ways with many different children and is perceived differently by each child and his or her family enrolled in a program, gaining rich descriptions of these experiences is necessary. Also, because each family experiences inclusion differently, using this approach is particularly relevant to answer the research questions posed by the current study through in-depth examination of the participants' perceptions. The specific intent was to describe and make meaning of the experiences these parents report. Their perspectives and their reports about their experiences provide the basis for understanding how families of typically developing children experience inclusion. Ultimately, issues of marginalization were examined from the data collected during in-depth interviews and related field notes.

Phenomenological studies use participant interviews as a source for better understanding of the phenomena of interest, in this case the lived experiences of families who have enrolled children without disabilities in inclusive early childhood settings. Schensul, Schensul, and LeCompte (1999) assert that open-ended exploratory interviews are the best way for a researcher to gain deeper knowledge in a particular area. I used in-depth, open-ended interviewing to better understand participants' perceptions of inclusive early childhood settings and the roles of those perceptions in perspectives of inclusion, children with disabilities, and their experiences in the classroom or program.

Data Sources

In addition to the data produced from in-depth exploratory interviews and the resulting recordings and verbatim transcripts, several data sources were used in this study for providing contextual information and deeper analysis. All data sources are described related to the information obtained as necessary to the study design.

Demographic Data

This study made use of two types of demographic information forms to describe both sites and participants. Demographic information collected from program/ center directors was used in order to thoroughly describe the sites in which participants' children are enrolled.

Center Demographics Notes

I collected demographic information from center directors in order to obtain specific information about the classes in their programs that include children with disabilities. This demographic information provides contextual data related to the settings of experiences described by participating families. The center directors were asked to provide demographic information about the inclusive classrooms to add to descriptions of sites from which participants were selected in order to further illuminate the context of the study.

Family/Participant Demographic Form

The data collected through the use of the Family/Participant Demographic Form in Appendix E during telephone screenings of participants was used to provide an in-depth description of the participants in the study. The demographic information provided

by families adds context to inform the results and adds to the descriptions of participants' experiences and perceptions. Information collected includes parent participants' current work outside the home status, number and age of siblings, time in early childhood classrooms or childcare, and reasons for choosing care. Demographic information collected from participants was verified and expanded during extended interviews.

Interview Transcripts and Field Notes

The study made use of verbatim transcripts from extended interviews along with field notes collected during interviews and while listening to and reading interviews with each participant. The extended interview transcripts from participants and field notes I made during interviews and while listening to interviews and reading transcripts were primary data sources for this study. Information collected in my research journal adds to data analysis procedures. The data collected via verbatim transcripts was conducted and processed using the data analysis method discussed in the following procedures section.

Confidentiality

Confidentiality of participants was of utmost concern in this study. As data was collected and analyzed, I protected the confidentiality of all participants by storing all information from all paper form data sources in a locked filing cabinet. In order to protect the confidentiality of participants, all data collected in this study from participant screening interviews on demographic forms and interview recordings and transcripts were de-identified as participants were given a letter to represent their screening interviews and extended interviews.

All center demographic information gathered in person and participant demographic form notes were stored in a locked filing cabinet with invitations and written field notes. Interview transcriptions, research journal notes, and code books and data tables have been stored on a password-protected computer and on external drives that are stored in a locked filing cabinet to protect identifying information. No full names or contact information has been stored with transcriptions of interviews on password protected electronic space. Member checks of interview transcripts were conducted through password-protected email. All peer review notes, interview recordings, and transcriptions have been stored electronically on a password-protected computer and in password-protected electronic space. Additionally, copies of this information were collected in electronic folders and stored on an external drive and flash drive in a locked filing cabinet. Participant contact information for the purposes of gathering a member check and for distributing participation incentives has been stored in a locked filing cabinet. The peer reviewer and transcriber employed during this study signed an agreement of confidentiality acknowledging the data and knowledge of the data as property of the study and the associated participants.

Procedure for Data Collection

Site Selection

Using the site selection procedure outlined in Appendix A, I contacted early childhood programs and childcare centers in “Middle” and “Green” Counties, North Carolina. These centers and programs were initially located through the North Carolina Division of Child Development and Early Education (NCDCDEE) website as well as

through web searches of local childcare center and early childhood program referral sites. Initially, centers and programs were sought that list either serving children with disabilities or national organization accreditation on the North Carolina Division of Child Development and Early Education (NCDCDEE) website. A program director screening script (Appendix B) was used to rule out programs where children with disabilities were not currently enrolled in classrooms for children ages three and four years old. Recommendations from colleagues resulted in locating three local programs that actively included children with disabilities and that also had directors willing to support the research study and allow participants to be invited from inclusive classrooms. When I located programs willing to support this study and allow me to invite participants I collected letters of support for the University Institutional Review Board.

Sites

Three early childhood programs that enroll children between infancy and 5 years (and specifically children who are three and four years old) participated. Two of the participating programs have a Childcare Center Facility License from the North Carolina Division of Child Development and Early Education and the third program, an NAEYC accredited half-day, church-based preschool program shares a director with a full time childcare program that is also licensed through the North Carolina Division of Child Development and Early Education. Detailed program descriptions are included in the results of this study as the program provides important context through which participant perspectives can be understood. Within the three participating programs, twelve

classrooms serving children with and without disabilities were identified as potential sources for participants.

Site Demographic Information

After receiving a letter of support from the sites for the Institutional Review Board, I contacted center directors to collect demographic information about the early childhood program or center. The information about the classrooms and students enrolled was used to determine which classrooms should be used as participant recruitment sites due to the inclusion of children with disabilities.

Invitation to Participate in the Study

At each identified program an invitation with an informed consent letter and invitation to participate in the study was distributed to all parents of three-year old and four-year old children enrolled in classrooms identified by the directors as inclusive of children with disabilities. The process for gaining informed consent from participants in this study, in accordance with the Institutional Review Board, is included in Appendix C. The voluntary nature of participating in the study was explained in writing during recruitment and again during the telephone screening process and extended interviews. The identified risks to participants were limited to the time devoted to the interview process and member checking process requested as part of the data collection and analysis. Participants were free to withdraw their participation in the study at any time for any reason. Benefits to participants included the opportunity to provide information to the professionals in the field that could benefit the field of early childhood education and special education as increased access to inclusive early childhood and childcare settings

remains a priority for researchers and professionals. The invitation and informed consent form can be found in Appendix D. The interested participants were invited to leave contact information in a designated location in the early childhood center.

One program identified two inclusive classrooms for children ages three and four. The other two programs each identified five inclusive classrooms for children ages three and four. Participants were invited from a total of twelve classrooms. A total of 198 invitations were distributed to families in these twelve classrooms. Second rounds of invitations were distributed in one of the programs with five inclusive classrooms for three and four year olds. Seventeen invitations were returned in total from all three classrooms.

Participant Selection: Telephone Screening Interview

After receiving contact information on returned invitations in each program or center, I conducted a screening interview by telephone to select participants for the extended interviews. I contacted all seventeen of the participants who left contact information in the designated envelope at their early childhood program or center by telephone to schedule the screening interviews so these could be scheduled at a time convenient to the participants.

When participants were called for an initial screening interview, I read a brief consent script prior to asking any questions to be sure that all participants were aware that they could opt to end the screening interview or withdraw from participating in the study at any time. The telephone-screening interviews were typically about five minutes and no

more than 10 minutes duration. The telephone screening interview script is located in Appendix E.

The current study used several personal characteristics to narrow a sample of participants (Shank, 2006). During the telephone-screening interview, I asked whether the parent participants worked outside the home and about how many hours per week the parents work. Along with descriptive demographic information that includes the age of the child and other children in the household, I also asked about children currently or previously receiving therapies, services or special education, privately, through early intervention, or through the school systems' preschool exceptional children's services in order to focus on parents of children without identified disabilities or delays. During the telephone screening interviews, demographic information was collected along with inclusion/exclusion criteria and recorded on a Demographic table. This information was recorded using the form in Appendix F and used to describe participants in detail along with structural themes that arose for each participant.

After establishing how long the child has been in his/ her current classroom and how long the child has been enrolled in an early childhood program, I also asked an open-ended question to determine the reasons the parent chose that setting. This initial information provided a base upon which to build rapport and initial interview questions for participants who were invited to extended interviews.

Participant Inclusion Criteria

Narrowing selected participants according to selection criteria, I excluded participants who had a child (of any age) currently or previously receiving services

through early intervention or preschool exceptional children's services, as well as families of children who had received private speech therapy, occupational therapy or physical therapy at the recommendation of their pediatrician, in order to select parents of children without currently (or previously) identified disabilities or delays. Respondents invited to participate in the extended interviews were parents of a child (or children) not currently identified with a disability or delay *and* had a three to five-year old child enrolled in an inclusive early childhood classroom as identified by the program/center director, where children with currently identified delays and/ or disabilities are enrolled.

Participants

Participants were selected to ensure that they experience the central phenomenon of focus in this study (Creswell, 1998). These participants were able to provide the desired targeted information: perceptions of families of children developing typically who experience the inclusion of children with disabilities in early childhood settings. All participants in the study were at least 18 years of age and older and had children without disabilities enrolled early childhood classrooms that report to include children with identified disabilities and delays in "Middle" County, NC.

Seventeen invitations were returned with contact information from the three supporting centers. Eight potential participants were excluded from the study as they reported parenting children with current or previous disabilities or delays warranting services from early intervention, the county preschool exceptional children's programs or private therapies. A total of nine participants were located and invited to interviews. Five of the participants reported knowing that children with disabilities were enrolled in

classrooms with their children. Four participants reported not knowing that children with disabilities were enrolled in their child's classroom. Results from all nine participants are presented in chapter four.

Extended Interview

The interview questions, were designed to elicit information necessary to informing the research questions in this study (Glesne, 2011; Maxwell, 2005). The open-ended interviews were conducted using the script and prompts found in Appendix G. The first interview protocol guided questions for the participants who reported knowing that children with disabilities were enrolled in classrooms with their children (Appendix G: Part 1). The second set of interview questions and prompts guided the interview conversations with participants who reported not knowing that children with disabilities were enrolled in their child's classroom.

The first few questions in the interview protocol were designed as warm-up questions. By asking about how participants liked their child's early childhood classroom, I started with "grand tour" broad questions to build trust and conversational rapport in the interview (Glesne, 2011, p. 107). Additional information about the program and classroom qualities participants' valued was gathered through initial questions to develop the context. The interview protocol was developed based on Glesne's (2001) recommendation to start with presupposition questions. These questions allowed me to probe responses for additional information related to the parents' perceptions of inclusion and the children with whom their child interacts without leading participants to an answer (Shank, 2006).

Schensul et al. (1999) discuss using prompts for more information as an important part of the exploratory and open-ended interview. A list of prompts for each question is also found in Appendix G. These prompts were employed when necessary and guided conversations in order to gather a rich understanding of participants' perspectives of their experiences and of the experiences they report for their children. The conversations were driven by the prompts when more information from participants was needed to fully address the research questions.

Glesne (2011) recommends expanding the generality of questions when study participants are hesitant to respond or when the subject matter might lead to hesitation in responding. I expanded the generality on questions in several instances during interviews. When participants provided relatively short responses and when participants identified areas that they reported with emphasis, I was able to ask what other parents in the program might say or talk about in order to further explore a topic and broaden the perspective. Also, I expanded generality when participants' hesitated on questions that focused on problems or negative opinions or experiences. For example, I asked about how parents of other children in the class might describe problems with the teachers or what a participant thought the concerns of the other parents were, when concerns were reported during the interviews.

Part of the interview design included using prompts that opened the conversation toward more pointed areas of interest. Several questions in the extended interview protocol were designed to provide data about family preferences and values in their early childhood or childcare setting building on previous research about choice of childcare. In

an effort to move towards a more specific examination of parent perceptions of inclusion of children with disabilities, these interviews explored broad concepts of parents' perceptions about the other children in their child's classroom. My initial intent was to determine how or to what extent parents' perceptions about their child's peer group and their reported interactions between peers affects or contributes to their perceptions of their child's experience. This set of prompts was designed to open the conversation to the inclusion of children with disabilities without influencing the participants' responses. Kvale (1996) discusses the use of this type of prompt in order to deepen knowledge without sharing information about what specifically the interviewer is pursuing. I asked about participants' experiences with children in their child's classroom as an entry into describing their experiences. The initial questions provided me with greater understanding of their perspectives about their child's peer experiences, and in some cases, information on their perspectives about the perceived benefits or costs to their child of including children with disabilities in their child's classrooms. Parents interviewed had the opportunity to describe their perceptions of inclusion and experiences with inclusion as they have seen demonstrated, reported, or evident in their child's interactions with peers in the classroom, from their personal perspectives. In cases where parents did not know that children with disabilities are included currently, their perspectives on what would be needed to include children with disabilities provided insight into their perception of "disability" along with perceived benefits or concerns. In interviews I also asked families about their current and previous experiences with

children and individuals with disabilities as well as their beliefs and opinions about what is needed to successfully include children.

It was particularly important to gain a foundational understanding of what, specifically, participants liked and valued about their current early childhood classroom or childcare arrangement during these interviews, since opinions and beliefs about inclusion do not exist separately from participants' perspectives, opinions and choices about their child's early childhood classroom setting, but rather, are part of the overall context of any stakeholders' priorities in educational settings (USDHHS & USDOE, 2015). These perspectives provided textural information for each participant as well. The textural themes for each participant are presented in Chapter IV.

In accordance with recommendations from Glesne (2011) summary questions were created and included at the end of the interview protocol. When I asked what recommendations parent participants' had for the classroom or program, additional information was provided about their experiences and resulting perceptions and participants were able to highlight the points from the earlier interview questions that they found most important.

Glesne (2011) recommends creating interview questions with a strong commitment to revising them after piloting the protocol with the first few study participants. As interviews were conducted and transcribed I was able to think critically about the information obtained from questions used in order to make revisions as necessary when participants are selected. The second interview protocol, developed to use when participants reported not knowing specifically that children with disabilities

were enrolled in classrooms with their children, was created in order to access additional perspectives and descriptions of experiences. These revisions were made in order to continue the conversations with families of children without disabilities about their experiences, opinions, and perspectives. After I gathered information from participants about their child's experiences, I determined how specific I needed to be regarding children with disabilities. For example, when participants reported knowing that children with disabilities were in the classroom and I asked generally about children with disabilities in the classroom I was able to ask more specifically about a particular child during the interview if the participant mentioned peers by name.

At the end of the interview I thanked participants for their time and all of the information they provided. I also reminded each participant that I would be sending the transcript of the interview for review and collect a best email for that transaction in order to expedite the process of member checks.

All nine of the participants who met criteria for inclusion in the study were contacted by telephone to arrange a time to conduct an extended in person interview. Interviews were scheduled at times and locations convenient to participants and took approximately one to one and a half hours. Participants were asked for their permission to record the interviews at the beginning of the interview. Interviews were recorded when verbal permission of participants is granted. Initially, I verified the demographic information collected using the form shown in Appendix F at the time of the telephone screening, prior to the interview to ensure the stratification and variance within group

demographics as recommended by Shank (2006). Full descriptions of participants are provided as results are reported.

Transcription of Data Collected

When each interview was completed, the audio recordings were loaded onto a password protected computer. The audio files were transferred via password protected drop box to the chosen transcription service provider. Interviews were transcribed verbatim by the transcription service provider (Maxwell, 2005; Guion, Diehl, & McDonald, 2012). The full transcripts were also placed in the shared electronic drop box so that I could read them and distribute them to participants for verification.

Member Checking

I sent the transcript of the interview to each participant via email as soon as I received it in order for participants to conduct a *member check* while the interview is recent enough to ensure validity and applicability (Maxwell, 2005). This member checking process helped determine that the participant's voice was appropriately captured and conveyed and provided another avenue toward verification of data (Creswell, 1998).

Procedure for Data Analysis

I used a multi-step content analysis process during and after data was collected, in order to code data from both interview transcripts and field notes according to a priori codes recorded in advance and emerging themes as data was interpreted. My research journal reflected the process of arranging data, bracketing my own suppositions and biases, and coding data

Informal Analysis

Maxwell (2005) discusses the need for “‘rich’ data” and the use of verbatim interview transcripts to ensure thorough and rich data (p. 110). Each interview was audio recorded. I listened to recordings and added to field notes as I reflected on each of the participants’ perspectives. Audio recordings were transcribed verbatim. After interviews were transcribed, I read the transcripts and reflected on my positions, my presuppositions and the perspectives of participants. Reflections were also recorded in my research journal as I developed more codes, refined definitions of the codes, and compared those to data from the verbatim transcripts. I made notes on the content of the interviews as they were read. Informal analysis conducted through the process of reading/ listening, and creating field notes was recorded in my research journal.

Field Notes

Several steps of informal analysis of collected data and the use of a research journal helped ensure the consideration of all possibilities prior to coding (Moustakas, 1994). Maxwell (2005) and Creswell (2009) both point to the need for intentional listening and note taking to better organize and understand the data. Field notes aided in my understanding of the tone of the responses and captured non-verbal cues that were evident in listening that were not immediately evident in reading transcripts. Shank (2006) discusses the need for descriptions that provide a context for understanding. The descriptions in my field notes helped me make meaning of paralinguistic behaviors, tones of voice, hesitations and pauses, and other cues audible in interviews and not

immediately evident in verbatim transcriptions. I used the field notes during coding in the manner I describe below for coding initial categories from the interview transcripts.

An important distinction in data analysis lies in understanding the role field notes play in the analysis of collected interview data. The notes contain my voice and notes about possible emerging themes as they have arisen through analysis and reflection. As that occurred, I bracketed my thoughts and prejudgments as codes or themes emerged in field notes in order to remain open to new ideas (Creswell, 1998) and to ensure understanding from the emic perspective of participants.

Coding: Categories

Creswell (1998) reports on the importance in a phenomenological study to approach the data with the idea of reduction. Likewise, Glesne (2011) refers to the use of rudimentary coding schemes as an initial step in breaking down or organizing “fat data.” Data were coded for initial categories that appeared while reading and reviewing the interviews and moving towards finding all possible meanings. In order to begin the process of reduction, I developed a data table and code book in which to store each set of initial codes and sub codes that were first noted in my research journal. In order to begin to tease apart the meaningful information present within the data collected, the first set of statements identified were statements of meaning for the research questions in this study. I collected data representing both a priori codes informed from previous literature and studies and code categories emerging during the listening and reading process by electronically highlighting text (words and phrases from transcripts) and moving them into the text column for each code. This initial process of categorization involved a

process where meaningful phrases and individual statements were extracted from transcripts using the method of *horizontalization*, described by Moustakas (1994) and Creswell (1998). All excerpts from interview text were given equal value. A best example from interview transcript text was used to represent a particular idea once horizontalization was completed for each participant. An example of the process used for horizontalization of text is included in Appendix H.

Initially, I divided interview transcript data into three main areas with some overlap. Data representing parent perspectives (ten code areas with up to thirteen sub codes per code area), parent perspectives of child's perceptions (five code areas with up to seven sub codes per area), and reported experiences (three code areas with up to four sub-codes per area) were divided and displayed as data was categorized and considered.

Themes

When I have exhausted the initial set of phrases determined and listed under the original set of code categories, themes between statements were determined as statements were analyzed. Creswell (1998) refers to this collection of themes between statements or meaning units as "textures." This step uses phrases of text verbatim to describe the experience of the participants in detail and reduces the initial number of codes by arranging similar information into overarching themes.

I used a column in the data table into which I highlighted similar text phrases and statements while compiling themes for each interview. The initial data table and codes revealed important textural themes for study participants. For each participant, textural descriptions were created as data was considered relative to the phenomenon being

examined (parent of child without disabilities lived experiences and perceptions of inclusive early childhood programs).

The aim is to arrive at structural descriptions of an experience, the underlying and precipitating factors that account for what is being experienced; in other words the “how” that speaks to the conditions that illuminate the “what” of experience. How did the experience of the phenomenon come to be what it is? (Moustakas, 1994, p. 98)

Structural themes for each participant are described as the structures of the experience that become evident through examination of the textural descriptions of the participants’ responses.

Descriptions

Creswell (1998) describes the last step in phenomenological data analysis as a creation of descriptions of the meaning of the experience being investigated. The *essence* of the experience is revealed in descriptions created after the processes of coding for categories and emerging themes. These processes alone do not result in the creation of a description of an experience. Sokolowski (2000) describes the need for the use of *eidetic intuition* to make meanings of the experiences and perceptions of the study participants’ interviews. The process of using eidetic intuition is described in three stages. In the first stage, I listed similarities that are apparent. In the second stage, truths emerge. In the final stage, referred to as imaginative variation by Moustakas (1994), reflection and imagination is called upon to think about all possibilities. During the process of creating the descriptions, I analyzed the data from both initial codes (a priori and emergent) and from overarching themes that emerge. Participants’ perceptions and their descriptions of

their experiences were examined through a process of thought analysis described in the tradition of phenomenology as imagining all of the possibilities until a clear picture of what is happening or what must be happening, is evident. *Imaginative variation*, used in the third stage of eidetic intuition, was used in order to reach a point where no further possibilities exist in my imagination (Sokolowski, 2000). This process provided me with the opportunity to thoroughly explore the connections inherent in the statements of experiences and perceptions of participants in the current study. Imaginative variation promoted the discovery necessities as I described the lived experiences of study participants.

For practical tracking purposes, the data table within which to store combined text statements from each participant with the descriptions of individual experiences assisted me in managing data while employing connecting strategies through the processes of eidetic intuition. These analysis processes were used in creation of descriptions of how inclusion and participation in inclusive early childhood classrooms was experienced by participants in the study (Creswell, 1998). This level of structural explanation of the experiences leads to an overall interpretation of the meaning as a last step.

Finally, I created descriptions of the meaning of the experiences in inclusive early childhood programs for the participants in the study. The amalgam descriptions of the meaning of the experiences identify the *essence* of the experience (Creswell, 1998). Families' experiences were described in a way that addresses both the emic perception and the etic view of the perceptions, taking into account past research and the movement towards the inclusion of children with disabilities in early childhood settings. Further,

through the use of my epistemological lens described above, the use and experiences in inclusive early childhood settings and the related choices made by parents of children without identified disabilities was examined for potential contributions to the overall inclusion of and possible marginalization of children with disabilities and their families.

Peer Reviewer

I employed the use of a peer reviewer and debriefer as a final step in the examination of emic/etic perspectives evident in the data compiled for this study during construction of textural/ structural themes, descriptions, and emergent themes for discussion. I chose a peer reviewer and debriefer with knowledge of the discipline of early childhood and the movement toward full inclusion of children with disabilities. The peer reviewer and debriefer has a Master's degree in Birth-Kindergarten Interdisciplinary Studies in Education and Development and five and a half years of teaching experience in early childhood classrooms that include children with disabilities. Additionally, she is a parent of two young children ages one year and three years eleven months who do not have diagnosed disabilities or delays and who are not currently enrolled in an early childhood program. She did not have prior knowledge of the current study or the specific body of research that informed the inquiry and research questions.

After a verbal description of the study purpose and research questions was provided, the reviewer examined the selected transcription text within each step of the coding/ analysis process. After initial code categories were determined for each interview transcript, the peer reviewer examined the list of statements for agreement on codes and categories. The peer reviewer was employed to review the identified statements and

phrases within each over-arching code category and the emerging themes data table in order to verify the data as relevant to addressing the research questions guiding this study. Peer debriefing sessions were arranged to establish agreement on the organizational codes relevant in the transcripts for each participant. The discussions with the peer reviewer provided opportunities to thoroughly identify the descriptions of “how” inclusion was experienced by participants. After the peer reviewer and debriefer reviewed the two full transcripts and the data table, an important general conclusion was shared that corroborated the study design. The factors within the interview transcript excerpts that represent the participant values and beliefs (representing the textural themes for participants) create the context for the paradigm through which participants experience and perceive the phenomenon under examination and lead to structural themes for each participant. Additional descriptive notes made by the peer reviewer for codes and themes were added to the research journal. These notes were discussed and reviewed during debriefing meetings and determined to be relevant to making meaning of the transcript data as well as themes and codes that emerged for later discussion.

Results from the study, including site descriptions, participant descriptions, textural and structural themes for participants and overall descriptions are presented in chapter four. The researcher lens is evident in the connected structural themes and overall descriptions, as well as discussion of emergent themes from interview data.

CHAPTER IV

RESULTS

The purpose of this phenomenological study (Moustakas, 1994) was to examine the lived experiences and perceptions of parents of children without disabilities who participate in an inclusive early childhood classroom. In-depth, exploratory interviews were used to gather insight into the perspectives of the study participants about their experiences in an inclusive classroom and their perceptions and beliefs about inclusion and the children with disabilities enrolled in these classrooms. The results from nine interviews with parents of children without disabilities are presented in this chapter in order to answer the research questions for this study. Participants' names and program names have been changed in order to provide confidentiality.

I employed a set of semi-structured interview protocols to guide the collection of qualitative data. After extensive recruitment for support of the study across multiple counties, a total of three programs in Middle county, North Carolina agreed to be included as sites from which I could invite participants.

After obtaining letters of support from each of the programs, I identified classrooms within each program where children with disabilities were included using director reports. I distributed invitation letters with informed consent notice in each classroom. When contact information was provided, I called willing participants and conducted telephone screenings and explained the purpose of the study. I located a total

of nine willing parents of children without disabilities to include in the study and established interview appointments for in-person extended interviews. Interviews were conducted at a time and location convenient to participants and recorded. Audio recordings were transcribed. Transcriptions from each interview were provided to participants and then analyzed.

Analysis Process

Data were analyzed using a process of coding and reduction to arrive at individual and across-participant group textural themes, structural themes and essences of the experience. The first step in data analysis produced codes within participants' interview data and across interview data. I used a bracketing process described by Moustakas (1994) to separate the views of the researcher from the perspectives of participants. Transcript excerpts were coded and horizontalized as I examined all statements by participants as equally relevant and related to the research questions under investigation (Moustakas, 1994). After extracting excerpts from the interview transcripts and identifying the statements that were most representative of participants' perceptions related to their experience in early childhood inclusive settings by removing repetitive statements, codes were given for those prominent points made by each participant. The codes with participant interview transcripts and across participants' transcripts were reduced and collected into themes. The textural themes for each participant provided information about what each participant experienced in their participation in an inclusive early childhood program. Additionally, individual textural descriptions provided data on participant's experiences with regard to diversity and children or individuals with

disabilities. The textural themes across participants were visible once each individual textural description was created.

Imaginative variation was employed at this point while I considered all of the possible structures emerging from the textural descriptions and themes (Moustakas, 1994). I imagined all of the ways that the textural themes within participants and across participants comprised the whole experience or phenomenon, participation in an early childhood inclusive classroom as a parent of a child without a disability. This process led to the structural themes—the perception of how these classrooms and programs are experienced for parents of children without disabilities. “From an extensive description of what appears and is given, one is able to describe *how* the phenomenon is experienced” (Moustakas, 1994, p. 78). Across participant structural themes were also evident as each individual structural description was considered and examined. Examples of each structural theme are provided for participants and for structural themes across participants.

The essences of the experience are illustrated and described as a result of combined textural and structural thematic descriptions. Following Moustakas’s (1994) analysis procedures for combining the textural and structural themes “into a unified statement of the essences of the experience of the phenomenon as a whole” (p. 100) essences are revealed. Further, emic and etic views are evident in these aggregate descriptions as this group of participants shares a significant viewpoint as parents of children without disabilities experiencing the inclusion of children with disabilities in early childhood settings.

In this chapter, the site descriptions and participants' descriptions are presented. Following the descriptions of the programs and demographical participant information, individual textural descriptions and comprehensive textural themes are offered to describe what the participants experienced in their early childhood programs. From the text in the interview transcripts, individual structural descriptions are displayed for each participant before presenting comprehensive structural themes that demonstrate how participants experienced participation in early childhood inclusive classrooms. Overall essences of the experience are presented after combining the textural and structural themes. The essences describe the meanings of the experiences and perceptions of the participants' chosen program from an emic perspective.

Site Descriptions

Three early childhood programs provided letters of support for the current study and allowed me to recruit participants from the families enrolled in classrooms that currently included children with disabilities. All three programs were located in the downtown area of "Centerville," a mid-size city with a population of about 300,000 residents in "Middle" county North Carolina. Each of these programs is located within a few blocks from the others. The three programs from which participants were selected vary in structure and available programming. Descriptions of the programs are provided to present greater contextual information as results of the study are considered. The program names have been changed in order to further protect the confidentiality of the participants.

Site 1: Family Child Care Program (FCCP)

FCCP is a privately owned and operated for profit child care center located in the downtown area of Centerville. The program has been in operation for over twenty five years and was serving 67 children in seven classrooms for infants through pre-Kindergarten at the time of the study. The program is open for families from seven in the morning until six at night. See Table 1 for Site 1 description.

Table 1

Site 1: Family Child Care Program

FCCP	Classroom 1	Classroom 2
Age of Children	3	4
Number Enrolled	18	20
Number of Teachers	2	2
Education Level of Teachers	Associates Credential	Associates Working on degree
Number of Children receiving Services and Type of Service	1 Speech, Special Education, OT	1 Speech

The licensed capacity for the program according to the North Carolina Division of Child Development and Early Education is 135 children during first shift operating hours only. The center currently holds a three-star child care license indicating that seven out of fifteen possible quality points were earned at the time of the program's last quality rating assessment in 2011. Five stars is the highest level of quality a program can currently achieve according to current North Carolina quality rating systems. The following description of the program comes from the website published online:

Our goal is to partner with you to provide your child the same attentive, nurturing, loving care that you provide in your own home. The school provides services for infant, toddler and pre-school and we are dedicated to low child-to-teacher ratios with a developmentally appropriate educational curriculum specifically designed with your child's needs in mind. **[FCCP]** is committed to your child's well-being. We provide security cameras in every classroom for their safety. The childcare center also provides educational childcare for ages six weeks to five years. It caters its students with attention, care and nurturing. We also offer nutritional lunches and snacks for the growth of the students. We are based in [Centerville], NC and as a locally owned and operated business, we are dedicated to developing long term relationships with our staff and families. We consider your child part of our family and hope you will consider us part of yours.

At the time of the study, two classrooms for children ages three and four years old each included a child with a disability who were provided with itinerant services through the local county's preschool exceptional children's division. One of the children, aged three years old, received speech as a service and another child, aged four years old, received speech and related services. One classroom currently enrolled eighteen children and a second classroom had a current enrollment of twenty children.

A total of 38 invitations were distributed to families enrolled in these classrooms. Five invitations were returned by families interested in participating in the study. Two of the invitations returned were from parents of the two children with disabilities included in these classrooms. Three invitations were returned by parents who reported that their currently enrolled three- or four-year-old child does not currently have or has not previously been diagnosed with a disability or delay and has not ever received services for a disability or delay. Further, they reported that any other children they have do not now, nor have they in the past been diagnosed or served for a disability or developmental delay. Thus, these parents were selected and all agreed to participate in the extended

interviews. Two of these parent participants reported that they did not know that their child had any classmates with a disability and thus did not know that their child's classroom was inclusive. One parent participant from FCCP reported knowing that a child or children with disabilities were also enrolled with his child and thus knew in advance of the interview that he was a participant in an inclusive program. Results including participant descriptions and results from participant interviews are presented following the site descriptions.

Site 2: Center for Early Learning (CEL)

CEL is another program located in downtown Centerville. Situated in the heart of the down town district, this program is a non-profit church-based child care and preschool program with options for half-day enrollment and full day enrollment in classes for infants through transitional kindergarten. The program is overseen by a board of directors administered by the church with which it is affiliated. See Table 2 for Site 2 description.

Table 2

Site 2: Center for Early Learning

	Classroom 1	Classroom 2	Classroom 3	Classroom 4
	Three Year Olds: Half-Day	Four Year Olds: Half-Day	Four Year Olds: Full-Day	Transitional Kindergarten
Number Enrolled	18	20	18	16
Number of Teachers	2	2	2	2

The program is open for families using child care from seven in the morning until six in the evening. Children ages four weeks through Half day options include a morning option from nine until one or an afternoon option from one until six. This program provides NC pre-K classrooms and offers opportunities for scholarships to families as well. A description of their programs and capacity was listed on their website:

The [CEL] enrolls children ages 6 weeks through Pre-K in both our full and half-day programs. [CEL] offers Transitional Kindergarten, a program designed for older 4's and young 5's as a bridge between Pre-K and Kindergarten. Our after-school program enrolls children Pre-K through 1st grade.

According to the North Carolina Division of Child Development and Early Learning, the CEL program has an enrollment capacity for 160 children. The program currently holds a five star license, earning thirteen out of fifteen possible points for quality at their last assessment in 2012. The programs offers a description of its quality and philosophical approach on their website:

[CEL] maintains a five-star center with the Division of Child Development through the Department of Health and Human Services of the State of North Carolina. We strive to offer high quality care and a developmentally appropriate program for children of families in the community and in the church. It is our goal to work in partnership with parents to best meet the needs of the child. We respect each child as an individual and use teaching techniques that are relevant to the child's learning. We seek to promote a positive self-concept within each child in order for the child to develop respect for self and others.

At the time of the current study, four classrooms that include children ages three and four with identified disabilities and delays. Two half-day classrooms and a full-day classroom for children ages three and four were identified as well as a transitional

kindergarten classroom where children who turned five during the current school year were enrolled. A parent reported on the set up of classrooms: “Yeah, everything on the right side is half-day and everything on the left side is full day and both sides have infant/toddler, two, three, pre-K, actually pre-K is all one but—and then T-K for those kids with late birthdays.” In one half-day classroom for three year olds a child receiving speech therapy, occupational therapy, and itinerant special education services was enrolled and in a full-day classroom for four year olds a child receiving speech therapy was enrolled. In the transitional Kindergarten classroom, a child receiving speech therapy was enrolled. In a classroom designated as a half-day four year old classroom four children with disabilities were enrolled, though one child with a diagnosis of Autism was reportedly attending only one day per week while another child was reported to attend only in the afternoons after ending his or her day in a separate setting or a school specifically designed for children with disabilities. It was reported that two other children attended on the same schedule as the children without disabilities. Both of those children received speech therapy and special education itinerant services while one of those children also received occupational therapy.

Site 3: Church Child Care (CCC) and Church Preschool Program (CPP)

CCC and CPP are two separate programs, also in downtown Centerville both of which are overseen by the church with which they are affiliated. Both of these programs share a director. The director has been employed as the director of the preschool program for almost twenty years and has been the director of both programs for almost three years. She provided me with a letter of support initially and provided information about the

classrooms currently including children with disabilities. See Table 3 for a description of Site 3.

Table 3

Site 3: Church Preschool Program

	Classroom 1	Classroom 2	Classroom 3	Classroom 4	Classroom 5
Age of Children	3	3	4	4	Pre-K
Number Enrolled	16	16	18	18	12
Number of Teachers	2	2	2	2	2

The child care center, **CCC**, is a full time center located within the church that oversees both early childhood programs. This program operates from seven in the morning until six in the evening and has a licensed capacity to enroll 135 children. The CCC has a three star child care license through the North Carolina Division of Child Development and Early Learning. They earned nine out of fifteen possible points during their last program quality assessment in 2015. The program description found on the church's website online states:

At [CCC] we are committed to providing high quality early education for young children. Our curriculum is developmentally appropriate and focused on meeting the needs and interests of each child in a small-group environment. Educated and loving teachers model Christian values and implement activities which foster kindness, friendships, creativity, curiosity, teamwork, and fun through hands-on learning and exploration. We have approximately 110 children ages 6 weeks to 5 years old. We are committed to the high standards set by the National Association for the Education of Young Children.

The director reported that no children with disabilities were enrolled in the full-day program at CCC currently, so there were no classrooms from which to recruit participants for the current study.

The preschool program (CPP) is a half-day program also located within the church building that houses both programs, though the two programs do not share space. The preschool program is a separate program that runs on a school year schedule. The hours of operation are from nine in the morning until one in the afternoon. Children eat lunch while at school but leave mid-day. The program is NAEYC accredited. It is not a licensed child care facility currently holding a NC license and thus does not receive a quality rating from the North Carolina Division of Child Development and Early Learning. The philosophy of the program is listed on their website:

The [CPP] seeks to offer young children a developmentally appropriate curriculum that focuses on each child's unique development while considering the needs and dynamics of the entire group. Experiences and activities will contribute to each child's development.

Additionally listed on the website were program goals including:

Provide an appropriate, stimulating, enjoyable learning environment in which children are encouraged to develop individually. Model a high-quality early childhood program based on NAEYC program standards. Be inclusive of children with all ranges of development and ability whenever possible. Help families become aware of all that is available to them within the community as well as help them become aware of ways they can contribute to community success.

The program currently included children with disabilities in five classrooms for children ages three and four. Two classrooms for three year olds, two classrooms for four

year olds and a Pre-K classroom were all including children with identified disabilities who were receiving services to address their individual goals at the time of the study.

Thus, I distributed invitations to families in those five classrooms. I made a second and third attempt at recruitment by inviting families at drop-off and pick-up, too, distributing an additional 20 invitations to families I saw in person. A total of 88 invitations were distributed the first time for a total of 108 invitations distributed. I received five invitations back from willing participants. Four of the invitations I received were from families of children who either receive services currently or have received services in the past for a disability or delay. In sum, one participant from this program participated in the extended interview.

Participants

From the three programs, a total of over 200 invitations were distributed (198 initially and approximately twenty additional invitations at the third program site) to parents of children enrolled in one of eleven classrooms identified as inclusive of at least one child with a disability who was currently receiving services. From these programs, sixteen invitations to participate were returned during the recruitment phase of the study. Another potential participant contacted me by email at the conclusion of the study and provided demographic information during a telephone screening interview but was unavailable for inclusion in the extended interview due to scheduling conflicts before the study period had ended. I did not receive a returned invitation from the last potential study participant and thus, she is not included in the discussed sample.

Of the 16 potential study participants, seven reported parenting a child who currently or previously received services for a disability or delay either identified through early intervention agencies, pediatricians or the county school's Preschool Exceptional Children's Program. For the purposes of the current study with a focus on perspectives and experiences of families of children without disabilities or those considered to be developing typically, the nine parent participants were chosen as participants if their child and any other children had not ever been identified as needing services (private, through early intervention, or through the school system) for a disability or delay.

Table 4

Participants by Program ($N = 9$)

	Program					
	Family Child Care Program (FCCP)		Center for Early Learning (CEL)		Church Preschool Program (CPP)	
Knowledge/ Awareness of children with disabilities included	Knows	Does Not Know	Knows	Does Not Know	Knows	Does Not Know
Participants	O: Billy	K: Lynn	B: Jason C: Lorraine	A: Katherine	G: Leah	N/A
Participants Per Status	1	2	3	2	1	0
Total number by Program	3		5		1	

Individual Participant Profiles

Individual profiles provide descriptive and demographical data for each of the study participants. Each participant was assigned a letter during screening interviews. The letters for each participant correspond to the order in which they were screened. Participant information and demographics from parents who were screened but excluded from the extended interviews are not included. Names provided in the results section have been changed to protect confidentiality. The demographical data were obtained during telephone screening interviews and recorded on demographic forms (Appendix D). Table 5 provides an overview of the demographics of participants including children in the household and their ages along with each participant's current employment status at the time of the study. Additional employment information is provided as it was deemed relevant to the perceptions of inclusion, early childhood programs, and children with disabilities expressed by participants. Reported personal experience in terms of training, employment, and family experiences with individuals with disabilities is provided.

Table 5

Participants' Demographic Data

Parent	Number of Children	Ages of Children	Employment	Personal Experience with Individuals with Disabilities
A: Katherine	2	4, 7	Employed Full-time outside the home (40+hours/week)	Older sister with a disability

Table 5

(Cont.)

Parent	Number of Children	Ages of Children	Employment	Personal Experience with Individuals with Disabilities
B: Jason	2	4 22 months	Employed part-time outside the home (25–30 hours/week) (Recent change from fulltime employment status)	Background in social work
C: Lorraine	2	4, 7	Employed fulltime outside the home (32 hours/week) as a clinical psychologist	Clinical Psychologist addressing college students with disabilities in clinical settings Serves on the Board that oversees the CEL-inclusive program
D: Eliza	2	3, 8	Employed part-time outside the home (15 hours/week)	Spent some time in college as a Deaf Education major Taught English in high school and has experience co-teaching with a special education teacher in inclusion classes
F: Mary	1	4	Employed full-time outside the home (40 hours/week)	
G: Leah	2	5, 7	Not employed outside the home Past teaching experience—11 years as a high school teacher	
I: Lynn	2	4, 8 months	Employed fulltime outside the home (50 hours/ week)	

Table 5

(Cont.)

Parent	Number of Children	Ages of Children	Employment	Personal Experience with Individuals with Disabilities
K: Rachel	2	4, 7	Employed fulltime outside the home (50 hours/week) as a special education teacher	Special Education teacher in a separate school setting with past experience as a resource teacher and an inclusion teacher
O: Billy	1	4	Employed fulltime outside the home (40+ hours/week) as a special education teacher Wife was previous employee of their current child care center	Special education teacher with experience as an inclusion teacher and a resource teacher

Table 6 provides an overview of the demographics of the participants' experience in the child's current early childhood program and classroom. Participants reported during the screening interviews whether or not they were aware of children with disabilities in their child's classroom. These initial responses are included below along with reasons the participants cited for choosing their current program. A description of each participant is presented below.

Table 6

Participants' Experience with Program

Parent	Program Name and Classroom Hours	Time in Classroom	Time in Program	Awareness of Children with Disabilities Included	Reasons for Choosing Program
A: Katherine	CEL Full-time	6 months	2.5 years (+experience in this program with older child)	No	1: Curriculum-(oldest child benefitted) 2: Hours are Flexible 3: Current opening at time of enrollment
B: Jason	CEL Full-time	8-9 months	2 years	Yes	1: Great reputation 2: Location (proximity to home/ work/ wife's work) 3: 5 stars (quality)
C: Lorraine	CEL	8 months	4+ years (+experience in this program with older child)	Yes	1: flexibility in hours (not FT) 2: Our church 3: Excellent Center
D: Eliza	CEL Half-day	8-9 months	2 years (+experience in this program with older child)	Yes	1: Older child attended 2: Recommended by a friend
F: Mary	CEL Full-time	4 months	3 years	No	1: location 2: reputation 3: director (agreed with her philosophy)
G: Leah	CPP 4 days- 4 hour morning program	8 months	4 years + older child	Yes	1: Our Church 2: NAEYC accredited 3: Education level of teachers 4: longevity of teachers 5: observation of educational practices

Table 6

(Cont.)

Parent	Program Name and Classroom Hours	Time in Classroom	Time in Program	Awareness of Children with Disabilities Included	Reasons for Choosing Program
I: Lynn	FCCP Full-time	3 months	3 months (moved from another program)	No	1: location 2: price
K: Rachel	FCCP Full-time	1 month	1.5 years	No	1: family-centered 2: comfortable, laid-back atmosphere/ great feeling 3: Size of program 4: hot lunch
O: Billy	FCCP Full-time	6 months	4 years	Yes	1: Wife previously worked there, knew it was a good program 2: Impressed with the program

Participant Descriptions

For each study participant, a demographic description is presented first followed by individual textural and structural descriptions. Each participant in the study shared information about *what* he or she experiences in inclusive early childhood classrooms. The individual textural profiles presented below demographic descriptions capture what was experienced by each participant as they recounted experiences. Participant statements from interview transcripts are included as evidence of what was experienced.

Katherine

Katherine is a married working mother of two children. Her four year old daughter is enrolled in full-time child care at CEL. Her seven-year-old son attends a private Catholic school and is currently in first grade. She lives in an affluent neighborhood in the northern part of Centerville. The child care center is approximately a ten minute drive from her home.

Both of her children have attended the Center for Early Learning because of the curriculum used, the hours of availability, and because there was an opening when she needed child care. She reported that the curriculum was a benefit to her son and thus believed her daughter would thrive there as well. She also wanted a program that offered hours that met her family's needs. During the telephone screening interview she reported not knowing that there were children with disabilities enrolled. She has a sister with disabilities and has a lifetime of experience with her.

Our interview was conducted in her home during a time where she reported being free between meetings and conference calls. Her husband was also home at the time of

the interview. He greeted me politely but excused himself during the time we were talking. Our interview lasted about an hour.

Katherine's individual textural description. Katherine chose the program she is in because of the curriculum. She identified Kindergarten readiness as an important part of her child's experience. She believes that the work that children do develops independence and she values the academic preparedness provided by teachers in her child's classroom. She finds the focus on independence and the work teachers do to be "very much empowering children to be the best version of their small selves." She thinks the firm nature of the teachers demonstrates that they have good control of the classroom and that environment prepares her daughter for Kindergarten.

Katherine views the children in her daughter's classroom as all very well-behaved and attributes much of that to the control of the teachers. She does report a range in evident behaviors and sees the same children in time-out regularly, but believes that in general, based on her experiences, the children at the CEL program are advanced. In her experience, teachers and child care providers have a main priority to make sure children are safe while their families' work. The curriculum used and learning in the classroom at CEL demonstrate a good combination of play and academics.

While she reports not knowing specifically that children with disabilities are included in her child's classroom, she values the diversity she sees her daughter experience in her classroom. Katherine appreciates that aspect of the peer population as her children will both attend a private school where her son is currently enrolled. At the private school there is a less diverse student population.

I guess there's a range, there is a diverse range from a, both a socioeconomic, race, pretty much any aspect that you can diversify a classroom in which I think is great, we lose some of that later.

Katherine draws on several experiences, both in the classroom and from her life that address her perceptions of children's understanding of difference and diversity. When reporting about an activity her daughter's class did on Martin Luther King Day she described how children were excluded from centers or activities. In her experience, children in the classroom have not yet recognized difference and do not understand exclusion.

They didn't even notice that anything was different between them and these friends of theirs and so they made it so that each, each station, center in the class, you couldn't, you couldn't go to it if you had a specific something, so like you have on a blue shirt, you can't play in this center, if you have blonde hair you can't play in this center, and I get the point and maybe it would be a great point for like adults or someone older, but I think at that young age, why even draw attention to it?

Katherine believes from her experiences with her children and her sister that her children do not really recognize difference yet. She recounted a time when her son encountered another child with Down syndrome at the park. She experienced seeing him process a visible difference, but he never said anything to her. While she has a lifetime of personal experience with disability as her sister has a disability, her children have not asked questions about her sister. While she reports experiencing embarrassment about having a sister with a disability, her family did not talk about the disability her sister has growing up and she has not talked to her children specifically about disability.

Katherine's individual structural description. Katherine's life experience and the associated feelings about 'disability' and addressing differences influence her perceptions of and experiences in her child's inclusive classroom. Specifically, she has beliefs about early childhood that affect the way she thinks that diversity and difference should be addressed.

I think it's so nice to have such innocence around people who are different and accept, you know, just general acceptance, so I hesitate in a way to think that things like that should be called out . . . I wasn't really a big proponent of this, but during, it was near MLK Day and like Black History Month, they taught the kids all about black history and oppression and then all of that sort of thing, which I was like "Really!?" because I don't think that it's time yet, let's just love all our friends . . . I'm not sure that Black history Month is something that they need to focus on, but that is, that's just my personal opinion but it touches on the, I don't think it makes a whole lot of sense to draw attention to differences unless they are—need an explanation.

As a result of Katherine's experiences growing up with a sister with a disability, she wrestles with the concepts of how and when to address children's questions about disability.

I think it's important to answer those questions and very honestly, but I just wonder how early on . . . Because I just love that innocent acceptance and you know, love to play with everyone.

She has wondered about the visibility of disabilities. She reports that her children have not ever asked about her sister who they see regularly. She values the idea of being more comfortable with disability, specifically based on her life experiences.

One thing that I think is important, too, is to not have such a fear for people with handicaps, and I think that all comes into play as things get more extreme

obviously, but I think even with a sister who's mentally handicapped, I still was uncomfortable with it, like going to special Olympics events or you know, whenever I would volunteer or go see or just at a young age having a sister that was mentally handicapped was awkward and embarrassing or whatever, you know.

She does not believe that including children with disabilities in her daughter's current classroom would impact her daughter negatively, but speculates that as children get past early childhood, into older grades having children who need extra help would be a problem for her child.

. . . it applies a little bit more I think as they get older, so not so much in early childhood education but is the taking away from the average or well, you know, ahead, advanced, whatever kids to cater to those who need extra help, and I think that that is a problem and it's not only, I don't think just disability specific, but more, you know, teaching to the lowest common denominator.

Jason

Jason reports currently working part-time, 25–30 hours per week, due to a recent reduction in hours from full-time or approximately 40 hours per week. Jason is the father of two children ages four years old and 22 months old. Both children are currently enrolled in full-time childcare at CEL. His daughter is enrolled in a toddler classroom and his son is enrolled in a four year old classroom. They have been a part of this program for about two years with a transition for his son into the current classroom at the end of last summer.

Jason and his wife chose their child care program based on a great reputation and proximity to home and work. He reported that the five star quality rating of the program was an important factor in their decision to enroll in the program. He reported knowing

that children with disabilities are enrolled in his son's classroom, though he did not know when first enrolling his child that children with disabilities were included. There have been times during their enrollment at the program where he has considered moving his family to another program. Currently Jason reports that his son is having a good year after having some trouble with another child who hit him frequently in his three year old classroom. Jason believes his background in social work offers him better preparation for handling conversations with his children about the behavior and development of other children, "I have a master's in social work and I've gone through . . . Human Development and . . . those sort of things, so like I feel like I was a little bit more prepared to be able to handle that conversation." He thinks that offering information up front to families about inclusion and children with disabilities would be helpful to most families.

Our interview was arranged at the local university after agreeing on a convenient time for Jason. The university was close and convenient for him. Our interview took approximately one and a half hours to complete.

Jason's individual textural description. Jason experiences an early childhood classroom that had many ways to engage his young son in play. His child's teacher connected with his son through superheroes and provides social emotional support to the children in the classroom. His son has a group of peers that he has moved from classroom to classroom with over time. His child is comfortable with this group and friends and experiences benefits from the friendships.

It was only through observation that Jason realized that his child was in a classroom that included children with disabilities. While his child has had many experiences being a helper to children with disabilities, he has also had experiences where he felt unsafe.

I'm actually really pleased that [Elliott] has had kids with developmental disabilities in his classroom all along, and for the most part they've been docile and you know, kind of adorable and you know, I like that [Elliott] has you know, learned that there's people with different abilities in the world, but what he was very, very clearly learning and this is why I try to, you know, was that you know, that people different than you can be extremely dangerous and scary and I was really worried that this was the message that he was getting with this one kid.

Jason has addressed concerns to the director in the past about situations he experienced as unsafe and has experienced the loss of great teachers over situations where there was not enough support to handle the children in the classroom.

Jason's individual structural description. Jason experienced a classroom where his child was able to play and engaged in play.

At times when he felt like his child was being hurt in his classroom, he felt unable to protect him. He interpreted his child's experiences with one child with disabilities in the class as a failure on his part to step in and protect his son from being hurt. He reports on his feelings upon observing his son be hit:

[Elliott] was standing right in front of me at one point and the daycare teacher's standing right there, and the kid like walked up with a toy and smacked him, like pretty hard, and I—I actually felt kind of guilty because Eli turned to me just like was kind of like why didn't you protect me, you know, like was like really upset at me because of that.

He was sad to hear reports of his child being afraid of another child that hit him at school.

. . . and the way that they talk to the kids about it is he doesn't understand and you need to stay away from him, you know, but—and you know, '[Chris] hits', you know, and he would come home and say that and it was kind of heartbreaking because he would—you could see him thinking about it totally out of context of anything else, like I'm told—I'm very aware of you know, priming with kids, you know, I wanted like talk to him about how scary this kid was in the classroom.

He feels that his child has learned to stay well away from the child who hit him and is glad he can now ignore that child's behaviors.

. . . and the other kids have seemed to get the routine, you know, so they just, they just go on, you know, he's throwing a tantrum in the corner, I've been in the classroom while this is happening, he's throwing a tantrum in the corner and kind of flopping around and other kids are just, you know, playing, like you know, like nothing's happening, you know, and so they've kind of adjusted to it, too, you know, they—they've kind of just moved on and said we're, you know, we're okay, that's what, what he does sometimes.

Lorraine

Lorraine is currently employed as clinical psychologist working approximately 32 hours per week. She has two children ages four and seven years old who have both attended CEL. Her four year old daughter is currently in the four year old classroom at the time of our interview, and has been for about eight months, though she has been attending the program since she was seven weeks old. Her seven-year-old also attended the program throughout the early childhood years.

Lorraine reported choosing this program because they offer a lot of flexibility in hours and children do not have to be enrolled fulltime. They are members of the church

affiliated with the program and she believes it is an excellent center. She currently serves on the board that oversees the operation of the center for her church and has a lot of insight into the daily functions, policies, and procedures as a function of this role.

Working primarily with college age young adults, Lorraine addresses a variety of disabilities in her role as clinical psychologist. She reported knowing that children with disabilities are served as part of the mission of the CEL program. She also reported that she occasionally has more knowledge about those children as a result of membership on the board, though she reports that efforts to maintain confidentiality are implemented and names are not mentioned directly.

I interviewed Lorraine in her office at a time that she identified as convenient and between appointments. Her office is located on the campus of the local university. At the end of an hour she had a client meeting scheduled and our interview ended when her next appointment arrived.

Lorraine's individual textural description. Lorraine has been participating in the early childhood program since her older daughter, now seven, was an infant. The program is a part of her church and she participates on the board that oversees the operation of the program as a function of her church membership. She experiences her child's classroom in a variety of ways. Her child's classroom uses themes to teach academic concepts that are embedded in play and interest areas. She experiences evidence of her daughter's learning through hearing songs, facts and new information from her daughter at home. She uses reports from her child to gauge her child's interests, engagement with the curriculum, and friendships and peer interactions.

Lorraine knew that her child's classroom and program included children with disabilities as part of the outreach and mission of the church with which the program is affiliated. She has experienced the inclusion of children with disabilities with this awareness since she enrolled. As a function of her membership on the church board, she has experienced more detailed communication about the issues of solving particular problems and meeting specific needs for children with disabilities who attend the early childhood program.

The teachers in Lorraine's child's classroom provide activities that offer her daughter a curriculum that is appropriate and play-based. Lorraine has also experienced the teachers providing for the classroom structure and providing for the safety of her child and others, even in situations where a child with behavioral disabilities needed to be separated from other children.

Because her child is developing typically, she reported on experiences her daughter has had with peers outside of school noting that her daughter does not choose to have playdates with children who are not on the same developmental level as her daughter is. Thus, she has not had interactions with the families of children with disabilities enrolled with her daughter. Additionally, she cites different schedules for drop-off and pick up as part of the reason she does not have interactions with the families of children with disabilities at her child's program.

Lorraine's individual structural description. Lorraine has several influential factors in the area of education and career. While she is a clinical psychologist who works primarily with college aged students, her education covered many areas of

development and disability. Her experiences and education are a part of her view of her experiences as a parent in an inclusive program.

I feel like my greatest area of knowledge is going to be on things that are, would be considered, fall in the psychological camp. I am less directly trained with or experienced with developmental disabilities, so I'm more familiar with behavior problems and those kinds of things and I'm pretty versed with Autism and I've done a lot of work with Autism, so I guess you could kind of put that in the developmental category, and have had more informal, personal and professional interactions with intellectual disabilities but certainly like, I mean I don't know if this is what you're asking but I mean I, like I teach intellectual disabilities in a class occasionally, those kinds of things, so I have, I definitely have knowledge of like how it's diagnosed and have diagnosed children with that and things like that, but I've had less direct intervention, interaction with kids other than personally and informally, so I've certainly known many children and adults over the years with intellectual disabilities.

She has considered safety for all children and the well-being of children with disabilities in her role on the board that oversees the early childhood program. She discussed a child with extreme behaviors who had to spend a lot of time separated from peers for safety reasons. She feels that there are times where ego may play a role in continuing to enroll children with disabilities who could be better served elsewhere. When talking about including children with disabilities she reports

. . . we serve them and that kind of thing but it's sort of like but at a certain point you have to decide if you're actually even doing the best for them and kind of evaluate that because I, you know, I know from being a psychologist, sometimes you hang onto cases longer than you should because you so badly want to be the one who makes the difference when maybe there's actually someone with greater expertise that would do a better job and so sort of not letting your ego get in the way.

Her professional paradigm informs her understanding of the limits she sees enacting inclusion.

As the parent of children without disabilities, she reports feeling sad that her daughter does not identify with the children who have disabilities as friends. She reported that her child was not judgmental towards the children with disabilities and wanted to help them.

Eliza

Eliza is a parent to two children. Her son, now eight years old, attended the CEL program part time starting when he was a toddler. Her daughter, age three, currently attends the CEL program part time and has since she was close to ten months old and entered the toddler classroom. She reported working outside the home approximately fifteen hours or more per week, some of that time during the periods where her four year old is in preschool.

Her family chose this program after the recommendation of a friend and her daughter attends the program because her brother went there. Eliza reported have some knowledge or awareness that children with disabilities are enrolled with her daughter, but she did not know specifics. She has some experience in special education as she spent time in college as a Deaf Education major and while teaching English in high school had the opportunity to co-teach with a special education teacher in a designated inclusion classroom.

Our interview was scheduled at the local university at a time that was identified as convenient for her. We rescheduled the appointment after Eliza reported that her daughter

had suffered a bad fall at school and had to be taken to the emergency room for treatment for a concussion. Once her daughter was evaluated and had a few days to rest and recuperate, Eliza contacted me to plan a time for our interview. She preferred to come to the university and our interview took place at the second time and location we arranged. We discussed her daughter's injury and treatment before the interview and the interview lasted about an hour.

Eliza's individual textural description. Eliza has a three-year-old enrolled part time in the program she chose for her older son. She experiences evidence of her child's learning primarily through the reports of her child. At home and outside of school she hears about the letters her daughter knows and the lessons her daughter has learned through the curriculum used in her class. She also gets information about her child's peer interactions from her daughter and friends of her daughter who approach her at drop-off and pick-up times requesting playdates.

Eliza reported being aware of children with disabilities enrolled in her child's classroom and has observed children working with service providers and therapists during times that she has been in the classroom. She reported experiences when children talk to the service providers or itinerant teachers as "just another teacher in the classroom." Her experiences with the children with disabilities and their related services providers have been a normal part of the classroom day. Even during times when they went on field trips together she reported that there is no singling out of children with disabilities. She does not believe her daughter notices the differences between children with and without disabilities. She has not experienced any particular accommodations that stand out except

for being aware of allergy information for children who may need to avoid particular foods or snacks during parties and celebrations.

When discussing her relationships with parents of children in the class she reported having some social interactions outside of school. She does not have interactions with families of the children with disabilities enrolled with her daughter. She reported that they are part of different social circles.

Eliza's individual structural description. Eliza is a former teacher with experience co-teaching in inclusion classes. Her views on inclusive early childhood classrooms and experiences in her children's classes at her current program and influenced by her reported positive experiences co-teaching in high schools. She is aware that children with disabilities are enrolled with her daughter's classroom and has observed what she believes to be seamless individualized practices and collaboration with professionals.

While she admits to not understanding all of the planning that goes into the curriculum in an early childhood classroom before having children, she has been pleased to see all of the benefits to both of her children as a result of the efforts of the teachers. In the past when she and her husband were struggling with some of her son's behaviors in and out of school she felt extremely supported by the teachers who offered suggestions, ideas and resources. Their recommendation for outside consultation on her child's behaviors produced immediate improvements by increasing the consistency between home and school and providing strategies to both parents and teachers in order to support her child's more appropriate expression of frustration and better overall social adjustment.

As a result of these experiences in the early childhood program her daughter attends, she views the teachers as willing to implement adaptations and willing to be consulted about individual children. This lends additional influence to her overall experiences in the program.

When considering peer interactions she reports a number of benefits to her child in the development of skills associated with collaborative work and play and finds value in the diverse population with whom her daughter is enrolled. She reports that her family socializes with some of her daughter's friends outside of the school setting but that the families of children with disabilities, even a parent she mentioned knowing from high school, were not part of their social group.

Mary

Mary is a single parent of one child and lives in a middle class neighborhood in Centerville. Her daughter is four years old and attends full-time for childcare. Mary reported being employed full time, about 40 hours per week, outside the home, while her daughter attends the early childhood program. Her daughter has been in full time childcare since she was four months old, though she was enrolled in another program for about a year before moving to her current program. Her current child care program is no more than five minutes from their home.

The CEL program was chosen by Mary because of the location, the program's reputation and the fact that Mary agreed with the director's philosophy. While she reported during our telephone screening interview not knowing in particular that there were children with disabilities enrolled in the classroom with her daughter, she recounted

in our interview remembering a disclaimer or clause in her paperwork at the time of enrollment that indicated that children with disabilities would be included. In describing her awareness of CEL's policies of inclusion Mary remembers, ". . . when we applied for this school that was, you know, that was at least three or four years ago, that they had a big clause, I think it stood out to me because it was this big thing . . . we make a big effort to include people with different backgrounds and there was something that made me think . . . or remember that they have a very explicit statement about wanting to include children with different levels of abilities or disabilities in their center . . .," though she does not think she has particular knowledge of children in her daughter's classroom.

Mary invited me to her home for the interview at a time that she identified as convenient. When I arrived, I was unable to contact her, though there was a car in the driveway. After waiting fifteen minutes or so and calling her, she came to the door and let me know she had forgotten and was in the back room of the house. She did not want me to come inside and told me she had not cleaned up but asked if we could complete the interview on the front porch. Some folded linens covered the porch furniture and because of the dust and pollen, we decided to sit on the floor of the covered porch. She shared some perspectives from her child's father and her own mother about her daughter's teachers during parts of the interview. I did not ask specifically what her family members and child's father's roles were in interacting with others at the early childhood program, though I received the impression that there is regular communication between the adults. Her overall interview lasted approximately an hour.

Mary's individual textural description. Mary reports that her child is in a classroom with a competent teacher who has been employed by the program for years. Her daughter knows how to spell her name and is regularly reporting new skills she learns in school. Mary regards her daughter as a valid and reliable source of information about the classroom curriculum and the teaching she receives in school, recounting experiences she's had where her child knows the names of animal babies and letters in the alphabet. Additionally, Mary experiences communication from the teacher that provides additional information about what her child will be learning each week. Mary also uses reports from her daughter about interactions with her teachers to determine what the teachers' roles are in the classroom.

Mary reported not being particularly aware of children with disabilities in her child's classroom, though she has experienced a diverse classroom of peers with various behaviors, personalities and learning styles. She believes this is a positive experience for her daughter as she wants her to learn about a wide range of what is considered "normal." In her experience, she reports observing children with visible or physical disabilities in other classrooms, but does not know if anyone has a cognitive disability in her child's classroom. She has observed teachers using extra patience with a child who she believes may have ADD. She does not know how a teacher would slow down for more explanation or how making accommodations for children with disabilities might take away from the other children in her class. She believes the experiences children are having in learning more about the range of diversity present in their classrooms is applicable to inclusion of children with a variety of needs.

Her daughter interacts with children in her classroom primarily at birthday parties and school organized social events. She also reports that her child sees another child at a dance class in the community. Mary's daughter reports on her peer relationships and Mary observes her daughter hugging particular children in the classroom indicating a closer friendship. She does not have any personal experience or relationships with individuals or families of children who have disabilities.

Mary's individual structural description. Mary does not necessarily experience inclusion of children with disabilities as part of her child's classroom. She does not have specific awareness of a child with a disability and reports that she might not know, though she has seen other children enrolled in the program who have more obvious visible or physical disabilities.

Her limited personal knowledge about disabilities and limited experience with individuals with disabilities influences her desire for more information about how to talk to her child about disability. She provided an example from a public interaction to illustrate the kind of information she would find helpful from teachers.

I think it's always helpful, like to understand how to . . . interact with that child or what would be helpful to that child, for instance outside of school we saw a child who had a—I don't know what to, I can't think of the word this second, but the, you know, like a basic prosthetic leg or a new, the new prosthetic leg, there's a metal, but you know, and I talked to the mother and said, you know, I want to make this kind of normal because we were bowling right next to them, and [Anna]'s staring and staring, you know, like she was paralyzed by staring and it was like, you know, 'can you help me? How do we talk about that? . . . Or how we include him?' and she said well, I guess what she had learned, her child lost his leg two years prior so she said, you know, they're gonna stare, so it would be helpful for teachers to say . . . to tell me that they're telling the children how to behave and how to include someone.

With the positive intention of including others, Mary discussed the importance of her daughter learning a wide range of “normal.” She feels that an environment with a diverse population provides those opportunities. She offers, “. . . this is a normal part of our lives, and this is how you interact with someone, you don’t isolate them, you give them part of your community.”

Demonstrating influence from the culture of individualism, if a wider range of abilities were visible and present in her child’s classroom, she might compare herself to one child in one skill and feel she is not a good, while she could compare herself to another child and be better.

[Anna]’s going to have things that she’s not as strong in and instead of seeing, you know, what might—what some others see as the, you know, like a leap that you’re, who we’re comparing ourselves against, if we say I can’t, I’m not as fast, well, as fast as who? As fast as the four boys that you’re thinking of in the class or one or two girls or are we really comparing ourselves against, you know, we’ll look at other people who can’t run at all, you know, who are you comparing yourself to, and so we’re seeing a greater average of people instead of less physically capable or mentally capable or whatever.

Another concern about inclusion that influences Mary’s perceptions was reported related to taking time and attention away from her child. She reports that this would be significant if her child were preparing for college or struggling or behind, she would worry that the teachers’ attention and time devoted to including children with disabilities might detract from helping her child.

I guess it’d be different if she was preparing for college and you know, seriously, like if she was preparing for college and there was a limited time for her to do certain things, at this point it’s interesting because on one hand I can say yeah, academically, like reading, writing type of things, and at the same time she’s well

prepared for that, she hasn't had any challenges herself, I guess I would say a challenge is if [Anna] had a little bit of a disability, and there was another child with a disability in the class, and then she wasn't getting the attention that she wanted or needed, it's not that she wanted but that she needed, that would be frustrating but she's fairly quick so I don't feel like she's behind, I think I'd be extremely frustrated, if she was behind or at a school where things were generally behind and they were always catching up and then they had to slow down for someone else.

Because Mary reports that her child is advanced for her age that is not a concern for her.

Leah

Leah has two children who have both participated in the CPP program. Her youngest son, now five, attends the half-day preschool program four days per week. She reported that he had been enrolled each year since he was about one and a half years old. Her older son, now seven, also attended CPP throughout early childhood. Leah is not currently employed outside the home and lives in an affluent neighborhood in a suburb of Centerville, approximately 15 miles from the downtown area. She drives her child to school and back most days and reports that it is a 20–25 minute drive to get there. She has an arrangement with another child's family to switch play dates weekly so that her child doesn't have to be picked up directly after school some days.

As a church member, Leah feels strongly about being a part of this program for her children. She values the NAEYC accreditation status and the education and longevity of the teachers who work there. She also reported that she has observed the educational practices of the teachers and that adds to her commitment to this program.

Further, she serves on the ministry team for her church that helps with policies and communication between the church and school. She is able to be more involved in a

variety of activities that affect the CPP. She expresses church membership as an important factor for her in having a voice to help and for her opinions and preferences to be valued.

. . . that's why I'm gonna join the team for Christian Education for next year when I'm no longer in the pre-school because somebody needs to say something, I mean I pulled [the director] aside at the beginning of the year and flat out said to her, [director's name redacted] what do I need to do as a church member to help you, and I even told her, 'you know something? You're gonna keep doing this job, you know, until something bad happens right?' And she got, she, when I say she got very upset, she felt my support and it allowed her to be emotional with me and she cried because she was like, I mean the weight of what she's doing's baring down on her enough that when I gave her my support she was able to, you know, emotionally answer and she basically was like 'I don't know what to tell you, [Leah]. Don't stop talking. Don't stop talking to people at church.'

She makes clear in her interview that the CPP is a very different program than the Church Childcare Center (CCC), also overseen by the church with which they are affiliated. She believes that the academic rigor is more evident in the CPP and that the caliber of teachers is different between the two programs and made it clear that she would not have her child enrolled in the child care center. Leah reported being aware that there were children with disabilities in her child's classroom during our telephone screening interview. She has experience as a former educator teaching high school English for 11 years. She invited me to her home for our interview at a time when both of her sons were in school. I drove to her house and our interview lasted about an hour and a half.

Leah's individual textural description. Leah experiences her child's early childhood program as a church member with preferential status to enroll. Her experiences with both of her children have been positive overall with several incidents that have

caused her to call her status as church member into communications with the administration. She believes her children's teachers have prepared them well for Kindergarten and beyond by providing them with many activities and by knowing her children so well that they have been able to individualize instruction for her sons. She values her youngest son's reports on the school day as a source of information about what he is learning and the structure of the day. She has experienced valuable communications with her son's current teachers towards Kindergarten preparation and curriculum. She believes that her experiences and those of her sons provide evidence of academic rigor valued by her family.

Over her time as a parent of a child in this program, Leah has experienced times that her children's teachers kept her child safe from other children with behavioral problems and times where the teachers did not provide for the safety of her son, leaving him on the playground alone and unsupervised while they returned to the school building. As a result of her child being left alone, she reported that those teachers did not return to teaching in the program the following year.

She has experienced the inclusion of children with disabilities in a variety of ways. There have been times when one of her children have reported being hurt by other children and times where she has had to explain to her children that another child's brain works differently. She has experienced seeing evidence of teacher training in the strategies employed by teachers in her son's classrooms and reported observing that other service providers and therapists work with children who have disabilities. There have been times when she believed she could offer advice to other parents about seeking

diagnosis based on her previous career as a teacher, but decided not to offer that information voluntarily.

Leah reports having a close social circle for her currently enrolled son that includes playdates outside of the school day. There have been times in the past when she has intentionally avoided children that had been aggressive to her older son and their families in social situations outside of school. The children with whose families she interacts frequently do not have disabilities.

Leah's individual structural description. Leah experiences her early childhood program with the influence she feels as a member of both the church affiliated with the program and the ministry team that handles communication between the church and the program. She feels strongly that her voice is heard on matters related to her children's education, safety and support reporting ". . . I get that being a church member, I feel as if well, I'm like well I'm a church member and I—sometimes I play that card which is fine because I am." At several points during our interview she recounts being able to support the administration through this role as well as feeling empowered to effect change and assert influence.

For Leah, her background in education as a high school teacher for eleven years has provided her with information she finds helpful in assessing disabilities or delays. Her background also has given her a lens through which she views her child's early childhood classroom. She is clear in her assessment that her child's program is not child care. She feels a great amount of pride in being part of a program accredited by a national organization and reports that these qualities are evident from the caliber of the teachers to

the focus on academics. She appreciates the academic rigor and all of the ways the teachers offer her child to learn since he is more interested in books than blocks. She reports that he likes the structure provided by his teachers and classroom and that adds to her overall positive feelings about the program.

Her views on disability include her experiences with children who have aggressive behaviors. During times when her child was being bullied in the past by a child who was frequently hitting and pushing him, she opted to avoid that family in social settings taking what she called a passive aggressive approach to avoidance. She has offered her child explanations about other children with disabilities citing that their brains do not work like her children's in the hopes of supporting her children to develop compassion.

. . . I've explained to [Brandon], that "his brain doesn't work like yours sweetheart," but he's learned, he play with him still and he's, you know, he's learned compassion, he's learned how to work with somebody and play with somebody that's different from him, which I think is invaluable that that's not something you can teach, that's just something that you have to be put in a situation and you know, model the behavior and you know hope and pray they pick up on it and you know, again, be nice to everybody.

As a parent of a child who does not have a disability, she wants her sons to learn to be nice to everyone. Also, because of her lens as parent of children developing typically, she has expectations that her child will meet milestones on time or ahead of schedule. Her perspective as a parent includes some influence of understanding that her child is more advanced in some ways than his peers. She remembered an instance where she was supporting her son through some frustration with his peers,

. . . and a lot of the rest of them aren't because they're like right now babies, so they're all just now turning five, but [Brandon]'s been five since November . . . and so we've had to talk about that. "Well sweetheart, you're older and that's why, you know, you're trying to organize a game of soccer and they're all just running around, you know, throwing balls at each other."

Similarly, she is influenced by the culture of individualism as she reports that she is pleased with her teachers meeting her child's individual needs and offering him books when other children still want to play. She remembers her child's teacher asking

. . . Are you ready for him to start reading books, I don't want to pressure him because he's only in pre-school but I think he's ready. Do you think he's ready and do you want to do this?

Leah has enjoyed the voice she has had at the school and plans to continue to serve her church community by joining another outreach team that works with the program after her sons have both completed the early childhood program, a few weeks after our interview.

Lynn

Lynn is a married mother of two children enrolled in FCCP. Her oldest son is four and is enrolled in full-time in the four year old classroom and her youngest son is eight months old and enrolled in an older infant classroom. She works full time, about 50 hours per week. Her family recently moved to this program about three months ago.

During her interview Lynn reported moving to this program because of cost most importantly. She cited a savings for her family of over three hundred dollars per month between tuition costs for her two children. While she thought her previous child care arrangement was "super fantastic," the expense of care led their family to change. There

are things she does not like as much in her new center arrangement, but reports that she tells herself that the financial savings make the compromises worth it.

When I conducted a telephone screening interview with Lynn she reported that they chose this program based on location, it is walking distance from her work, as well as the price. During our phone interview Lynn reported being aware of children with disabilities in her child's classroom, but when I called back to set up an interview she voluntarily clarified that she had observed a child with a positioning helmet in her youngest child's classroom and was not certain that the child she was initially thinking about had a disability. She said she was not really aware of children with disabilities in the center.

We arranged an interview at a time that was convenient for her and had to reschedule once as she forgot about our first appointment. She preferred to meet at the university and thus we arranged a meeting place in a study room in the library on campus. Our interview was about an hour long.

Lynn's individual textural description. Lynn does not experience her son's classroom as an inclusive environment. She does not believe that children with disabilities are currently enrolled and thus cannot cite experiences that would indicate teachers' roles that support individualizing strategies or accommodations.

Her son's teacher is strict and thus, is preparing him for Kindergarten. In her experience, she sees the teacher demonstrate high expectations for all of the children in the structured classroom. She receives reports from her child about the school day and

draws conclusions about the areas of curriculum or academic instruction he is not able to access due to his frequently reporting time spent on arts and crafts.

Due to the fact that Lynn recently moved her child to this center for financial reasons, she reports not knowing the other children and families yet. She does report that her child spent time outside of his last early childhood program with other children at birthday parties but they have not made those social connections in his new classroom yet. As the only African American child enrolled until recently, Lynn reported that he experienced being the different child. She reported that another child with brown skin recently joined the classroom and that now her child is not singled out as different.

Up until I think maybe two weeks ago Christian was the only African American child in the class, not only just the only African American child, he was the only child of color, like of any other nationality, which is strange, and it bothered me initially but he didn't seem to notice, so I didn't make it a big deal and then a couple weeks ago he told me that they had a new students who was a brown boy and he said he was—he said he was light brown.

Lynn does not have any experience with children or individuals with disabilities. Based on her lack of experience with children with disabilities, information might be helpful to her, though she does not want to have her child singled out as different. Her experience has been one of a parent of a child developing typically in a classroom of other children also considered to be developing typically.

Lynn's individual structural description. Lynn's understanding and experiences with her son's classroom are influenced by her lack of experiences with individuals or children with disability. She reported not knowing much about disability and in her estimation she does not see any children with disabilities in her child's

classroom. The meaning of definition of disability for her is different than it is for another parent who has had specific experiences or education around disability and thus, she may not readily identify a child who receives services when another person could.

When asked about what information she would find helpful she talked about needing information about a child to better understand their differences. During her thinking about it while we were talking she described her experiences in seeing her child as the only child of color and recognized potential marginalization that might occur by asking for information from a child with a difference.

. . . I think it would be helpful if there was a child that was going to come into my class, my son's classroom and this child had a disability, you know to like get a quick note to say hey, just so you know, this person is joining you know, [Charles]' class and this is what this, this is the disability that this person has and in three sentences, like here are a few things that are true about, you know, or tend to be true about people who have this disability, I can do the rest on my own if I wanted to do some research. I can do that, whatever, whatever, you know, figure it out for myself, but I think that would be helpful, honestly, but like I said, that may be too much because like hey, did I expect, you know, every student in [Charles]' class to get a, you know, a note to say hey, just do you know, there's an African American child and he's joining the class, I don't know, maybe that's too much, maybe that's too much.

Another area that influences her perceptions and experiences about her child's classroom is the concept of getting ahead or learning early that I call cultural individualism. She makes it very clear that she does not appreciate the arts and crafts her child does when he could be learning Spanish or Math or something meaningful to his future academic success. In her perception, the play-based approach is out dated and lacks meaning for her child's future success. She has expectations for her child that he

will be engaged in what she views as meaningful learning and thinks a lot of what he does during the day is a waste of time.

I'm his mom, but [Charles] is a very special child, I know everybody—everybody believes that, but he truly is gifted, like [Charles] was reading like as soon as he turned three we had him on his sight words, you know, and he was, you know, he reads and he's been reading for a long time and they're like "oh, [Charles] can read" and I'm like "yeah, he can, let's keep that up." But like in his old program, like they, you know, they were learning Spanish and it's like now I went to have lunch with him a couple weeks ago and I'm like oh, look at your Spanish words on the bulletin board, he didn't even know what they were, and I said Christian, like I could not believe it because he's forgotten, and we'd talk about this in the car, and he's forgotten his Spanish colors and his Spanish counting, and like he just spent a lot of time at his old school like tracing his name even, I think they do it at this school but they do it on like a, they use a chalk board, they use chalk!

Lynn's value for structure and academic instruction is evident in her reports of the frivolity of play. These priorities influence her experiences and expectations of her child's classroom.

Rachel

Rachel is a parent of two children. Her four-year-old daughter is currently enrolled in the FCCP in the four year old classroom. Her daughter moved into her current classroom about a month prior to our interview. They have been enrolled in this program for about a year and a half, since moving to Centerville from a town in the western part of the state.

After touring two programs, Rachel's family decided on the current child care center after moving here because they liked the family-centered atmosphere. She liked that the center felt comfortable and laid back. She reported that the small size of the program influenced their decision as did the offer of a daily hot lunch. During our

interview she discussed liking that the program allowed children to un-enroll for the summer and reenroll in the fall, which was a good fit for teachers' schedules.

Rachel is a special education teacher in a separate school in another county. She works full-time as a teacher and cites a 50 hour work week with a 30 mile commute to a neighboring city. She has had a variety of experiences in special education settings and reports having experience as both a resource teacher and an inclusion teacher before taking her current position this year. She has had experience working with children who have been diagnosed with autism and a variety of disabilities.

During our telephone screening she reported that she did not know or was not aware of children with disabilities in her child's classroom. During our interview, she elaborated on the importance of confidentiality for children with disabilities and their families and reported not needing to know, saying, "You know, I'm really okay with not knowing."

We arranged to meet for our interview at the university on a convenient afternoon. Her daughter was with her during the interview and had brought some activities from her classroom to do while we talked. Rachel told me that she did not know until earlier that day that her daughter would be with her, but that she was glad her teachers were thoughtful about sending her with activities to do. Our interview lasted about an hour.

Rachel's individual textural description. Rachel is a special education teacher who reports not knowing that there are children with disabilities enrolled in her daughter's child care classroom. She has experience in protecting the confidentiality of children with disabilities and thus, would not want information about the children in her

child's classroom. In her experience, her child is learning about getting along with everyone and benefits from the peer relationships in her classroom.

I think just, you know, play, learning to play, learning that not everybody plays what she wants to play, she learns that with her brother as well, and being flexible, kind of give and take a little bit of friendship.

She has had interactions outside of school with friends and peers, though none of her closest friends have identified disabilities.

Rachel is able to use her daughter's reports to infer the relationship she has with her teachers. Her daughter regular reports on the things her teachers like and what will be pleasing to her teachers. When she had particular concerns about her child's new teacher, she talked directly to the administration and since that discussion she has experienced more detailed communication from her teacher in addition to being invited to a classroom social and a field trip. These experiences have allowed greater insight into the teacher's communication style and teaching style. Additionally, as evidence of the curriculum and classroom activities, Rachel receives weekly lesson plan guides that add to the experience of communication with her child's teacher.

Her children have many experiences with children with disabilities as a result of her job. She perceives that they are comfortable communicating and learning from everyone as she reports that she is. Also, she reports that there is not a child that could not be included in her opinion and that the teachers do not need more hands, possibly just better strategies. In her experiences, she has observed a child with Autism included successfully with her son in a previous child care center before moving to this city. She

experiences the benefits of a diverse student population, even without specific knowledge of children with disabilities enrolled in her daughter's current classroom.

Rachel's individual structural description. Rachel is a special education teacher in a separate school. She reports that it is her first year in this type of setting, though she has worked in separate classrooms, most recently with children with Autism. She values the confidentiality of the children enrolled in her daughter's classroom and makes clear that her lack of knowledge about children with disabilities in her child's classroom is intentional and that she does not need to know or want to know. She has noted through observation of her son's classroom in the past that children with Autism can be successfully included in child care programs. This is important to her as she works with children with Autism and feels she learns something new every day. She wants her children to be comfortable with everyone and to value each person as a contributing member of society.

Her range of experience with children who have various disabilities contributes directly to her perceptions in several specific areas. While she sites parental concern about children's safety when asked what other parents might be concerned about or want to know about inclusion, she asserts that any child could hurt another child and that a child with a disability is as likely as any other child to hurt another. Thus, she is not concerned about safety and refutes those speculative concerns by other parents. Secondly, she reports that parents probably have concerns about lower expectations for the whole class as a result of including children with disabilities but decidedly argues against that potential concern.

I think parents of students who are taught in the inclusion setting have worried about things getting lowered, expectations being lowered for all students, which was never the case, but I think that that's probably something that might concern parents as well.

She does not believe that teachers need more hands or extra support to effectively include children or any child with a disability. She does believe that they need better strategies, specifically for deescalating behaviors, fading prompting for children who need greater independence and working with related services providers. These areas of influence were salient contributors to her overall perception of her child's classroom.

Billy

Billy is a married parent of a four-year-old child. His son is currently enrolled in the FCCP in the four-year-old classroom. He has been in that classroom for about six months, though he has been enrolled in that childcare program since he was an infant. Billy reported being employed outside of the home full time or approximately 40 hour per week.

Billy and his wife chose this program for their child because his wife had worked there and they knew it was an impressive program. During our interview he reported that the money parents put into childcare should be considered an investment and that the learning that his child is doing is part of the payoff.

He reported that he was aware of children with disabilities in his child's classroom and in the program during our telephone screening interview. During our interview he reported being able to offer ideas, help, and support at the center when he was provided with information about a child that could need more. Billy reported that

confidentiality was not breached, but rather children's identifying information was withheld when he was asked for input due to his area of expertise. He is a special education teacher at the middle school level with experience in separate settings, resource, and inclusion service delivery models.

We met for our interview in the library of the local university between birthday parties on a Saturday. He reported that his wife was taking his son to the next birthday party and that he would meet her there. My interview with Billy lasted an hour and a half.

Billy's individual textural description. Billy's son has the opportunity to be well prepared for kindergarten as part of his structured classroom. Billy reports that he is learning and reports frequently about academic skills and knowledge as well as knowledge of socially acceptable words and phrases. His child's teacher sets clear expectations and has rules that provide a structure that children need. He reports that the parents see the results of the teacher's knowledge and structure and that the children are advancing at a faster pace with this teacher. He experiences his child's classroom as a place where his child is pushed to excel and believes that is important in the private sector where parents pay for child care when children do not qualify for public pre-K.

But you want to accelerate, now you're looking into the private sector and now you're talking how much money it costs . . . you're investing in your child, you pay to go to daycare, it's an investment.

Billy has experienced his child as a reliable source of information about his school day including self-reporting on behaviors and interactions with peers. He reports that his child wants to please and is focused on making the adults proud. His child

regularly reports that he did not go to time out and that provides Billy with evidence that his child knows the rules and expectations.

Billy is a special education teacher who is aware that children with disabilities are enrolled in his child's class and program. In his experience, observations have provided him with information about children's developmental needs and delays. He has also experienced being a resource for the program when the teachers and directors ask for his advice and expertise. He reported that confidentiality is maintained, but that he can share information about scenarios and situations where teachers need ideas for children who have disabilities and delays.

He reports that his child has maintained a social relationship with a group of boys that have been in classes with him for several years. His child does not have disabilities, nor do the children with whom his child is most closely associated outside of school. He reports that his child has always been willing to help the children in the classroom who have delays.

Billy's individual structural description. Billy's career and associated training in special education influence the way he perceives and experiences his child's classroom. He has been a special education teacher in a variety of settings and using a variety of service delivery models. He has taught inclusion, as a resource teacher and in separate settings. He feels strongly that in his current position working with middle school aged students, building their confidence and enhancing their self-concept is a priority.

I teach special education, so the biggest thing I fight in my classroom with my middle school kids is building confidence in them and building that- so many of them have felt that they've tried so hard on things, that's one of the things I start

off the year with them, how many of you people ever really tired hard to do something and still got an F on it and then you feel like you don't want to work on it anymore, so I think building that confidence. We've got a couple, one girl in particular this year, middle schooler, she's always been delayed but now she finishes before everybody else because we really worked hard all year by building that confidence.

He also draws from personal experience that affects his view on supporting children to succeed from an early age. He attributes some of his experience in being retained in elementary school to his lack of any preschool education or experience with formal learning prior to elementary school.

I was retained in first grade because I wasn't a very good reader, so I think they could have been some delays on my part just because my parents, daycares weren't big, pre-schools weren't big back then . . . And now, again, as an educator, and seeing what I want for my son, I don't want him to have to go through those struggles, and I don't think any parent really wants to see their kids go through those struggles, . . . you know, you want them to be in there and unfortunately, sometimes some schools, you start grouping kids and you don't want them to fall into, you know, the red robins and all those reading groups and all that crazy stuff.

He views his child's experience in his current classroom as a benefit in preparing him for elementary school and so that he will not be placed in the lowest group of learners when his teachers separate learning groups by ability. Ultimately the influence of the culture of individualism accounts for some of the pressure he feels to be sure his child has every opportunity in early childhood. If given the choice, he would choose a program where all of the children were accelerated and all of the children were pushed to learn and excel.

In his role as parent of a child without disabilities, he views himself as a resource for the program and always offers ideas and recommendations while preserving the

confidentiality of children enrolled. He feels that all parents would benefit from more information about delay and could get their children help if needed. When considering other training and skills or technology that would be beneficial to teachers providing support and education to young children with disabilities, Billy recognizes the costs to families paying for the child care program. He identifies as a consumer of a service and believes that he has power in his role as customer, reporting,

. . . pre-K and care centers, it's driven by money, I mean, so I think that well, you're providing money to pay to put your kid in a different class, I'm just saying your center costs x number of dollars, it's located close to my work, I can afford to pay this, this is where I want my child to go.

As a parent to a child without disabilities and as a parent who wants his child to do well and be successful, Billy cites opportunities where his child can be a helper to other children with disabilities and feels that is the way he wants him to be. He wants him to accept all people regardless of diversity status and be available to help when he can model what he knows. He acknowledges that disability is such a wide term that children could have a disability in any area and it would not yet be recognizable.

I mean one disability in one area doesn't mean your disability, you're disabled across the board . . . You can, very creative people, very successful people in life have learning disabilities, I mean you Google it, I mean people like Albert Einstein.

He also reflected on the limited influence of disability for some individuals, projecting his overall optimism about success despite disability.

Textural Analysis

In coding the data, I grouped statements into units of meaning that describe what was experienced by the participants (Creswell, 1998). The textural themes emerged for each participant and across participants. The individual textural descriptions are presented by participant first. Then, comprehensive textural descriptions and themes across participants in the study are presented. Excerpts from interview transcripts are included as evidence of what was experienced as textures are described.

Comprehensive Textural Description

After compiling and examining individual textural descriptions, a composite textural description is reported for all of the participants of the study. The themes that emerged from data taken from interview transcripts are included in the comprehensive textural experience.

Comprehensive textural description of experiences in inclusive classrooms.

The experience of being enrolled in an early childhood classroom that includes children with disabilities is largely an experience of academic and social emotional preparation for parents of children without disabilities. The parents of children without disabilities viewed and experienced the role of the classroom teachers in a variety of ways with a focus on the ways teachers provide structure, manage behaviors, and teach skills to their child. Participants also reported on the importance of teachers communicating with parents and keeping their children safe. Strict teachers were experienced as important to preparing children for the elementary years. Teachers who made individual efforts to connect with the child of participants were considered supportive of individual children.

Parents' awareness of children with disabilities varied greatly. Some parents were not aware that children with disabilities were enrolled in classrooms with their children. Other parents were aware only through observations or after there had been a particular incident that involved their own child. Parents experienced disability differently as evidenced by their description of visible or physical, behavioral, or intellectual disabilities. Their perceptions of costs and benefits of participating in an inclusive classroom for their child varied based on their awareness and experiences.

As parents of children developing typically or children without identified disabilities, all of the parent participants expressed confidence in knowing what their children liked or did not like about his or her classroom or program. All of the parents reported that their children verbally communicated likes and dislikes and that their child's behavior about school (wanting to go or not wanting to be picked up, reporting about friends, activities, new knowledge and interactions with teachers) were all indicative that the parents could easily ascertain how their child felt about his or her experiences.

Parent participants reported on a variety of experiences with their child's peers. Some experiences were directly perceived as friendship while other experiences were viewed in terms of helping children with disabilities. Further, several participants reported on experiencing the exclusion of children with disabilities as a function of safety or as a result of negative feelings about a child who had hurt their child. When children were excluded at school, teachers provided the separation. When decisions were made by families to exclude a child, those decisions were made based on parental judgment. Most

cases where participants reported not interacting with children with disabilities and their families were considered a casual function of social interactions between families.

Finally, the experiences of the participants demonstrated that early childhood inclusion is a multi-faceted phenomenon that includes wide variation for families of children without disabilities. While parents tended to focus specifically on their own child and the growth, safety and learning happening in classrooms, parents had all experienced benefits for their child from peers in the classrooms.

Textural Themes

Through my textural analysis of data coded across three viewpoint areas, I identified textural themes related to the phenomenon of parents' experiences in an early childhood inclusive program. The data were divided into those statements that represented parent perceptions, those that represented parent perceptions of their child's experience or perception, and direct experience data. After horizontalizing statements and finding best representations of text for each participant and each inquiry, textural themes across individual participants were visible. These themes, which include subthemes, help explain what participants experienced, and their perspectives about their experiences and the experiences of their child(ren) when they do not have a child with a disability: (a) Focus on Kindergarten Preparation; (b) Children as Information Source; (c) Teacher Roles; (d) Awareness of Inclusion; (f) Inclusion/ Exclusion and Friendship; and (g) "My Child is Typical." Textural themes, displayed in Appendix I, are discussed in the next section with accompanying excerpts from interview transcripts from participants.

Textural theme 1: Kindergarten preparedness. All of the participants discussed experiencing some form of preparedness for Kindergarten as an expected result of their child's classroom. For some participants this included specific curriculum and academic skills while others focused on independence and social skill development in a group setting. Parents perceived their child's experiences as preparation for more demanding and structured elementary classrooms.

Recounting the importance of allowing children to develop independence skills as they grow, Katherine said,

I feel like they're learning a lot, like they're teaching them to be very prepared for kindergarten from an academic perspective and from a—just to be a grown kid that can do things on their own, get their own silverware when they need silverware for their lunch, or you know, and just little things but they are very much empowering children to be the best version of their small selves.

Lorraine explained her understanding of developmentally appropriate instruction on skills throughout early childhood settings starting at an early age.

I think it's a developmental thing, but focusing on even the pre-academic steps and knowing that so much of what they do has those components and I wish the parents—other parents knew how much thought was going into those things, even in like the toddler curriculum or what, I think parents just have no idea that, how thought out some of these things are.

Academics in early childhood classrooms were experienced as a new concept for Eliza when her first child went through the same program. In describing her experiences with her daughter she reflected,

They're doing a lot with letters and that's something, too, is that she recognizes the letters by her friends' names and so they do stuff connecting the letters with the people, so like her friend [Bonnie], when she'll see a letter B she'll say there's [Bonnie]'s letter and so trying to figure, now we're trying to teach her, okay, well what's the name of the letter, like yes, it's [Bonnie]'s letter, good job, good job but it's called B . . . something else that's neat and this happened with my son, too, like they, one, they do a really good job like I mentioned with lesson plans and they actually teach, which I know sounds funny, but before I had kids I kind of thought about, like everything before elementary school was kind of like babysitting and I feel kind of bad about that now because they work really hard, like they have like lesson plans and they're developmentally appropriate, and it's surprising because my kids, both of them now will come home with stuff that I know they haven't learned from me, and so it's really neat because I know it's working, you know, that they are learning stuff . . . but they're actually, they're learning stuff, so they're introducing new concepts, teaching songs, you know, teaching shapes, color, letters.

Leah discussed the embedded academics approached used in her child's classroom as a function for preparing him for Kindergarten.

I love how much he's learning but I love that it's engaging, playful learning. He doesn't know he's learning if that makes sense . . . He doesn't know he's learning but I know that he's learning. It doesn't feel like learning to him necessarily. I love how structured the classroom is but yet how loving it is at the same time. It's amazing to find such an incredible mix for him, case in point, he has to call her Mrs. [Brown], you know, so it's gearing him towards kindergarten and everything she does, the teacher is so on it for, you know, is this, you know, it's helping him right now but it's also helping him long-term prepare him for kindergarten, you know, he's one of the kids, she's giving him, even though there's 18 kids in there, she has given my son and I'm sure everybody else's, she meets him where they're—he's at . . . so he's got books that he brings home where he's reading and today he wants to read one of his books to his classmates at reading time, and she is flexible enough to allow for that to happen and allow him to continue to grow instead of him just like mommy, I had to play again in blocks again today, what am I supposed to do with that . . . You know, she lets him continue on with where he is and where he needs to be and she's aware of that . . . I guess and then lastly, the communication, too, though, I mean I feel like in this pre-school setting, she's, I don't know how she does it, but she's just as much there for my child as she is for me, like if I have any concerns, she's there, if I have an questions or any, I want to participate, I want to do this or anything.

When describing her child's teacher, Lynn reported,

I do like that the teacher is structured and I think she's borderline strict, and my son is not accustomed to that and I think it's good for him, and I like it that she likes him, but she doesn't coddle him. I know she's got like a couple of assistant teachers who kind of do that, you know, and that's more in line with what he is accustomed to but you know, again, I really believe in structure and discipline, I think that's what's gonna prepare him for elementary school. . . . I think she's doing the right thing because that's just not how it's gonna be. Kindergarten teachers don't have time to do that, to coddle children, so I can appreciate that.

She valued this experience for her son as he only has one year until Kindergarten.

Rachel explains the overall tone of her child's classroom structure and atmosphere related to preparation for Kindergarten.

The classroom that she's just moved into I think is, like I said, a lot more structured, it's not, I don't know if they're just prepping for kindergarten, it's not as warm and fuzzy feeling as, as her previous classes have been. It is, and the other parents and I have talked about that, it's very organized, it's very structured, it's coming in the morning, you know, [Chloe] will bring a stuffed animal and she'll say that's great, that's lovely, put it in your cubby, you know, like so, it just strikes us as different than our previous classes, but in general I would say that the parents that I know well have loved the experience that they've had at [FCCP].

When considering the role of the classroom and program to provide academic preparation Billy reported, “. . . he can have play time at home and he needs that structure, he needs to, you know, understand his colors and his numbers and I want him to be prepared when he goes to kindergarten.”

While Jason did not specifically use Kindergarten as a point of experience he reported lots of ways his child was being prepared for the future through the use of conflict resolution skills, cooperative play skills and general adjustment to a group setting.

Textural theme 2: Children as sources of information. As parents of children without disabilities, parents experienced their child's classroom largely through the lens of reports from their child. They viewed the reports and behaviors of their children as reliable sources of information on how their children were experiencing the classroom. Specific details about the teachers, the activities, and peer interactions were evidence for parents of their children's experiences and thus part of the texture of the experience for parent participants. Parents also talked about how children's behavior about wanting to go to school and not wanting to leave were indicative of their experience with the classroom.

Sub-theme 1: Teachers. Several parents cited examples of how their children talk about their teachers. These reports were experienced as primary sources of information from which to determine the qualities of the experiences. One parent questions her child's view on the teachers asking if she is sure the child likes them. She was reassured based on her child's verbal descriptions of the teachers and the interactions with teachers reported at home. Other parents reported that their child generally talks positively about the teachers in his or her classroom. Rachel shares examples of how her daughter reported to her mother about her teacher.

She talked about her at home, and that was the one she would say, "Ms. Ruby is just gonna love this dress!" you know, "she's gonna just say how pretty I look!"

Sub-theme 2: Curriculum. Another area where parents experience their children's reporting as a valid source of information relates to the classroom curriculum. Parents cite instances where their children shared new information or discuss classroom

activities. Particularly common in parent reports were experiences recounted involving children demonstrating new knowledge. Parents reported about their children singing new songs, becoming interested in recycling and animals as a result of their experiences in classrooms, reporting knowledge of letters and numbers and children reporting on their love for books demonstrating engagement in the classroom curriculum.

Hearing children repeat common phrases in conflict resolution and having children tell their parents which words are unacceptable indicated to parents that their children were learning and progressing socially. Additionally, children's reports about their avoidance of time out or other ways they adhered to a behavioral curriculum provided parents with reliable information about the social curriculum in the classroom.

Sub-theme 3: Peers. Finally, reports about peers provide parents with information about the dynamics within the classrooms where their children are enrolled. In some cases the reports were related to the child's preferred friends while other times the children reported reasons a child has particular behaviors. Rachel reports on the typical information she got from her daughter about peers "she was three years old and coming home and saying that she had a best friend and that she and this one particular child were best friends and the other two girls were best friends, you know."

Jason experienced his child's negative reports of other children, when his child would say '[Christopher] hits. [Christopher] doesn't understand,' Jason was able to gain insight into the peer interactions that were not beneficial for his child. Through this experience he reports "he was very clearly getting the message that people different than

you are dangerous”. Parents experienced their children’s reports about peers as reliable and valid information about the classroom dynamics.

Textural theme 2: Teachers’ roles are experienced differently. Parents who participated in this study experienced the roles of their children’s teachers in a variety of ways. Their perceptions and expectations of teachers’ roles were evident in their descriptions of experiences with teachers.

Sub-theme 1: Teaching the curriculum. Several participants discussed the importance of the planning and teaching that they had experienced through interactions with their child’s teachers. Lorraine reported,

Her teacher is phenomenal at keeping things thematic and so every week they associate with their curriculum, they have a particular theme and she’s just very creative about transforming the room to fit wherever they are and so there was a week where they were learning about outer space and the home living area became a space ship and had like this whole like panel of instruments and I mean, it was amazing, and I just couldn’t believe the amount of effort and detail that they go to kind of make everything connect and she has a—I won’t keep going on and on, but she has a, like a sensory table and every week the sensory table changes based on the theme, and so the things that they get their hands into have to do with whatever they’re learning about and I just think it’s super cool how, you know, it’s not just the same thing every day, but there’s enough consistency with the layout and that kind of thing that it’s still predictable and safe enough for them where they feel like they can kind of explore, but the topics change.

One participant talked about the differences between her children’s teachers year to year reporting that teachers in one classroom were more prepared to teach and were an overall better fit, “I felt like had actually studied for the test in the birth through Kindergarten class, and like they like knew the developmental stuff.”

Sub-theme 2: Rules and structure/controlling the classroom. Other participants focused on the experiences they had with teachers exercising control and structure within the classrooms.

Mary reported,

Mrs. [Smith] is really, really good, like she's been there for years and she is on point, like she doesn't, I mean she obviously loves what she does and she's very on top of things as far as their learning and their discipline or their expectations or you know, getting them on a schedule.

Lynn experienced her child's teacher as strict and structured.

I do like that the teacher is structured and I think she's borderline strict, and my son is not accustomed to that and I think it's good for him, and I like it that she likes him, but she doesn't coddle him . . . And I don't get the sense that this is a teacher who really caters to everybody, I think it's kind of like hey, she has a way that she does things and everybody kind of needs to conform to that, and I think that's what you're gonna do, and I think those children do, so yeah, I think that's it . . . she sets the standard or the expectation and the children meet those expectations, and if they don't then they go to time out or some form of it.

Eliza reported on the importance for her oldest son of getting the teachers to provide more structure in his classroom “And then helping to be very consistent about the rule, like what, here's the rules, and I will remind you of the rules and if this doesn't happen where you don't follow the rules then these will be the consequences, if you do follow the rules, these will be the rewards, and so I know that one of the problems he was having in the pre-K class was there weren't immediate consequences kind of one way or the other. And then helping to be very consistent about the rule, like what, here's the rules, and I will remind you of the rules and if this doesn't happen where you don't

follow the rules then these will be the consequences, if you do follow the rules, these will be the rewards, and so I know that one of the problems he was having in the pre-K class was there weren't immediate consequences kind of one way or the other.

Leah reports that the structure provided by her child's teachers has been a benefit, from her perspective.

I think he likes the structure, he really does, he loves knowing what the expectations are and that she's consistent with her expectations. He always like, for example when we're here at the house, mommy, what are we doing today, you know, he's a list follower, and he wants to know and he'll call you out on it, well mommy, we didn't do so-and-so today. He never tells me any of that about her, you know, he's always, you know, so-and-so didn't do this today, you know, baby what color was your card today, my card was green and it will always be green, mommy, because he knows exactly what the expectations are and he, he loves that structure. That, I mean that's one of his favorite things, he just loves to know what's going on.

Sub-theme 3: Social emotional support. Parents reported on the role of teachers in providing social and emotional skills and support to students by teaching them how to get along, resolve conflicts and share or take turns. Participants reported these experiences for their children as benefits of their classrooms.

Jason reported,

I know most of the parents in the class really love the teacher, and I think in general one of the things that [Elliott]'s class has done well all along is emotional and social development, so that, and that's extremely important to me, so—and I think that other parents have recognized that, too, so we have comments like we, you know, the kids know how to, like they really do know how to resolve conflicts and they—and they play nicely together and they know how to, you know, like use their words, you know what I mean, you know, but yeah, they really, and I give credit to the daycare really intentionally instilling that in them, you know, they have, you know, these setups is like you guys need to make a plan, and they do, like they kind of really follow through with that, so I talked to other

parents, like we're impressed with the way that the kids play with each other and the way the conflicts are resolved in the classroom is really important.

Sub-theme 4: Safety. With several discussions of providing safety for the parent's child from a child with behaviors or disabilities, most parents interviewed for this study had experienced their child's teachers' roles with providing safe places. In the case where a parent reported that her child's teachers had not provided for his safety, she shared that the teachers were no longer employed at the program.

With a focus on the importance of safety in his perception of early childhood classrooms, Jason said,

If there's, you know, anything that I'm entrusting, you know, the daycare with is to, you know, keep my kid physically safe, number one, you know? . . . so basically what had to happen was one staff member pretty much stayed with this one kid and the other staff member handled the rest of the kid—you know, the kids, which . . . I'm glad that they did that in order to help the safety of the kids, but I think it was kind of undue burn-in on the staff—and he's a big physical kid, so you know, there's not much physical controlling that you know, she could really do safely, but she will just kind of, you know, just hang with him in the corner of the room.

Another parent reported a similar role teachers in her child's classroom fulfill.

The particular kid that I'm thinking about tends to be there at the end of the day and when I would get there, he would usually need to be—he would either sit in a little chair that was sort of safe for him to sit in and—or he would sit somewhat removed from the other children, like if they were having circle time or something like that, or he'd be engaged in an activity, but he tended to have, there was a teacher or an assistant teacher that tended to work or be with him physically, kind of one-on-one, to kind of help maintain a barrier between he and the other children, and if other children were nearby or approached they would use it as ways to interact socially, they would sort of facilitate an interaction between the children without there being—they being able to have physical contact, so what I would witness would be more like he would kick a leg way up and if a child had

been close enough it would have knocked them in the head, that kind of thing, and occasionally they would need to physically block a move on his part, I mean and I guess that that was scary occasionally because you sort of felt like if somebody's looking the wrong way this is, this kid is big compared to most the other children and could really injure a child if, you know, but they just worked hard to do that, and I would say there was not a lot of handling other than just maintaining physical boundaries and some verbal redirection or sometimes distraction if he seemed really bent on like trying to grab something or whatever.

In keeping her child safe from a child who was aggressive Leah recounts,

[Jon] gets delected on the playground by this kid, so I mean he gets pushed so hard he gets his legs swooped out from underneath him, now, the school itself took every measure they could to protect my child without kicking this other child out, which at this point, you should have kicked that child out but that's for a discussion for another day. He, this other child had a teacher specifically in the classroom to sit with him and monitor him at all times to keep him away from my son.

Leah recounts another situation where her child's safety was compromised by the teachers in her program.

There's been some really bad things that I don't know, of course I'm a parent so I get all, you know, it's probably way worse from my side that it is from him and thank goodness it happened to him when he was younger, when Jackson, this is my older one, was seven he got left on the playground the last day of school in the toddler class.

After talking to her friend about getting ready for the end of year picnic she reports that she was able to rejoin the other teachers and families,

So we were outside for a couple of minutes until I was able to calm down where I wasn't going to kill anyone . . . Yeah, so there was that, and of course those teachers are no longer there, obviously, the next year, dear Lord, I don't know how my child, I don't know how I didn't yank him, there were so many other things good going on there.

Sub-theme 5: Strategies for working with children with disabilities. Beyond just providing for the safety of children without aggressive behaviors, some participants recounted experiences that support teaching children with disabilities. One parent observed,

I think that they've really been teaching him not to hit, how to interact in the best way possible. So that's good, and the teacher that works with him primarily in the afternoon just has a good demeanor to her, she has a good makeup for you know, just staying calm and when he—and I see him throwing tantrums and she like, just bless her heart, because she just kind of stands by and is able to calmly talk to them.

Other parents offered some suggestions on how teachers might better meet the needs of children with disabilities including training and administrative support. Jason reported an incident where teachers who did not have the necessary support for working with children who had disabilities that resulting in one teacher leaving the program.

Sub-theme 6: Communicating with parents. Participants in the study expressed experiencing their child's teacher as communicator of information. Leah reported,

Most recently it was a concern that I'm having as I'm filling out his kindergarten readiness sheet, I felt, I mean as a mom I feel like I know where my son is but as his pre-school teacher, I was looking at the sheet and going, I mean I know what I think, but I'd rather her give me her opinion on, you know, what type of teacher he needs, what type of classroom he needs, and I feel that she is a better gauge for that so I contacted her and within minutes, I mean I would say it was definitely under an hour, she's contacting me back and saying "Well, do you want to meet or do you want to do this via email?" You know, "whatever's best for you."

She elaborated,

She'll send home an email, . . . this is not junk, your child really spent a lot of time on this, please dear Lord, do not throw this away, please, so she, you know, she'll even communicate that to me where I, you know, or to all of us where we go "oh sweetie, thanks for this giant cardboard box, what am I supposed to do with this?" You know, and then given the insight and I think oh, you're right [Ruth], yes, he probably spent an hour on this today, thanks for reminding me and now I'm like "oh baby, it's awesome, yay!"

Rachel reports on her desire for more information from her child's new teacher,

I mean she's new to the class so I kind of wanted more information, how's she adjusting . . . Is she getting along well with the other children? I mean just something, and so I did speak with the director and just say, you know, so tell me about this one, you know, I don't want to be, I don't want to be judgmental and I don't want to, but I'm a teacher, too, so I, I know that we're all so different, it just rubs me completely wrong and ever since then I will say she has made an effort to, [Chloe] had a great day today, she did the funniest thing . . . which, I mean, that's what I was looking for. I know why she's doing it now but that's okay, I mean I like to know what's going on . . . not always but with a new classroom I do like to know.

Other parents reported various communications they have had with their child's teachers related to curriculum, behaviors and incidents where their children had been hurt. All participants perceived that communication with teachers was a central role in their experiences.

Textural theme 4: Awareness of inclusion. Though all parents had children currently enrolled in classrooms with children who had identified disabilities, some parents were not aware that they were participating in an inclusive classroom. Being aware or unaware of children with disabilities in their child's classroom is a central texture of the experience for the parents I interviewed.

Sub-theme 1: Aware of children with disabilities. Five of the participants reported being aware of children with disabilities in their child's classroom. Though they reported various reasons for knowing, the awareness of their child's peer group provided a texture for the experience.

Several parents reported being aware as a result of negative interactions or opportunities to help. Other participants reported knowing as a result of observations of behavior, visible differences, or visits to their child's classroom when service providers or therapists were working with another child.

Eliza reports knowing that children with disabilities are enrolled in her child's classroom. She does not, however, believe that there is awareness in her child's experience.

I genuinely don't think she notices. Because I feel like especially at this point, with them being three, they're all doing things in different stages anyway, and so I think that, you know, so because she can't say the K sound so she says otay, you know, and so for her, like she's, she hasn't mastered the K and this friend isn't so great at walking, no big deal, right? It's just how we roll in the three-year-old class, you know, and so it just, like she never says anything about, about anybody having trouble doing something or—the only thing that I have wondered, and again back to the allergies, is there is a little girl that—and the only thing that Ava has ever said is that her friend eats different foods, and so like her mom, because they'll have snack together and so they all might be having pancakes and milk, you know, and her friend, there's one girl who has pretty severe allergies and so her mom brings everything, and so she might be having water and some sort of like Nutri-grain bar kind of thing.

Sub-theme 2: Not aware of children with disabilities. Some study participants were not immediately aware of children with disabilities or that their child was enrolled in an inclusive program or classroom. Linda stated that she does not believe that children

with disabilities are included with her child. Though she admits that she does not know much about disability, she has not seen a child with a disability or experienced a child needing more attention from the teacher. Likewise, Katherine reported that she is not particularly aware of children with disabilities in her child's class. She acknowledged that in her experience some individuals with disabilities do not look different so she believes that if children with disabilities are present in the classroom, her child probably does not notice.

Textural theme 5: Inclusion, exclusion, friendship. Participants in the study reported various degrees of inclusion, exclusion and friendship between their children developing typically and children with disabilities enrolled in their classrooms.

Lorraine reports when talking about her child's perception of children with disabilities in her classroom,

But I, in particular, I remember being struck with how much she wanted to help them if, you know, if she saw them needing assistance, that, you know, I mean I would say if anything the thing that kind of pulls at your heart strings sometimes, mostly for the children in the families is that they don't identify them as someone that they want to be a best friend or to be, to come have a play date, it's—they're wanting kids who they see as being more on their level.

She has experienced her child choosing friends and identifying friends based on ability status. Her child has not developed true friendships with children who have disabilities.

Leah reports,

We could go back to that one child that I mentioned that I've explained to [Brandon], that "his brain doesn't work like yours sweetheart," but he's learned,

he plays with him still and he's, you know, he's learned compassion, he's learned how to work with somebody and play with somebody that's different from him, which I think is invaluable that that's not something you can teach, that's just something that you have to be put in a situation and you know, model the behavior and you know hope and pray they pick up on it and you know, again, be nice to everybody, you know, whatever that is, but I think that's probably one of the biggest ones that he's been working through a lot this year because he's really proud of himself, mommy I played with, you know, I played with [William] today and he had a really good day today and we were able to play together.

When asked if she spends any time outside of school with children with disabilities and their families after reporting about social connections she has with other families, Eliza reported “Yeah, we really, the—that circle, we don't really overlap too much outside of school.”

Jason reports that his son has learned who to play with and who to avoid. This year he has had a better experience with a child who hit him in the past.

[Elliott] doesn't, you know, come home complaining about this, you know, being scared at school and he seems safe around him and they still do give him wide berth, you know, like they don't go up and play with him or anything like that, so you know, I think that [Elliott] still has the message that like, you know, you just you don't play with [Chris].

Other participants reported that children with significant disabilities join their child's classroom in the afternoons after attending other programs. Lorraine discussed children with significant disabilities attending other programs reporting,

. . . because they're involved in other programs in addition to this, so most of them are a part of an early intervention program, are not physically at the school the amount of time that the other children are, so I just have not had as many interactions, so like the one that was biting is dropped off after I've dropped off my child and is picked up before one o'clock.

Textural theme 6: My child is typical. Parents who were interviewed for this study experienced the early childhood setting with the paradigm of typical. Their experiences were guided by the idea that their children were developing typically. The experiences they reported having or that their children had with children who had disabilities grew out of a point of comparison where their own child was the typical or more competent peer.

Also, when parents viewed their children as typical, behaviors of other children were assessed and experienced as problematic. Whether a child has a disability or not, parents of children without disabilities attributed negative behaviors to an overall perception of behaviors that needed correction. Extreme behaviors were experienced as problems for children in the classroom as well as teachers or support staff.

For participants who did not know that there were children with disabilities enrolled, operating from a position of viewing their own child as typical lead to varying understanding of what disability looks like or how it would be manifest in a classroom setting. Participants who reported not knowing also reported concerns that a child with a disability might either lower the expectations set forth in the classroom by the teacher or require more time and attention in a way that could detract from the experience of their own child.

Structural Analysis

From the textures describing *what* was experienced, structural descriptions were created to provide “a vivid account of the underlying dynamics of the experiences”

(Moustakas, 1994, p. 135), examining the feelings and thoughts that influence *how* inclusive early childhood classrooms are experienced.

Examination of individual structural descriptions, presented by participant, and consideration of textural themes, illuminated a comprehensive structural description. From the comprehensive description of factors influencing participants' experiences and perceptions, structural themes emerged. A detailed explanation of structural themes, is presented after the comprehensive structural description.

Structural Descriptions

The following section presents the composite structural descriptions from individual structural descriptions of each of the participants in the study. Structural statements located within the transcript text relate to background, previous experiences and relevant contributing factors that relate to the experience, and specifically how the experience is perceived by the participants. The comprehensive structural description provides meaning to the experiences in inclusive classrooms for each participant and across participants.

Comprehensive structural description. All of the study participants' perceptions and experiences in inclusive classrooms were influenced by their own understanding of disability. For these parents, their majority status in these inclusive classrooms and programs may come with additional power, real or perceived. Because their children are developing typically and may need less regular and individual accommodation due to a disability, parents may be able to make requests or assert influence. The parents in this study expressed power in making requests and asserting

influence within their programs when they felt it was necessary. Though participants reporting the benefits of having their children help children with disabilities in their classrooms, it is possible that assuming helping roles with individuals with disabilities adds to marginalization of children who could also be viewed as leaders or otherwise valued contributors. Though the voices of children with disabilities and their families are not represented in this study, one parent reported that asking for information about a child based on difference might cross a boundary alluding to acknowledgement of marginalization.

Individual characteristics of children with disabilities included in classrooms or those with whom participants had experience influenced their perceptions of their child's classrooms and their perceptions about inclusion. The parents in this study expressed different views and feeling about children with disabilities based specifically on the children's disability status and personal characteristics.

For each individual, education, experience and perceptions about information influenced participants' experiences and their perceptions about inclusion and the children with disabilities enrolled in their child's classroom. Although the perceptions and experiences varied widely based on a variety of factors, many participants cited specific skills or knowledge as a result of their personal education and experience. Additionally, participants with less direct experience with individuals with disabilities felt a stronger need for information in order to garner support from families of children without disabilities.

Finally, each participant cited experiences of success and having opportunities to move ahead academically. I referred to this influence as cultural individualism as all of the participants are represented by the ideas of competitive, individual academic success in some ways and in reports of their child's academic progress. Although participants cited benefits of inclusive classrooms for children developing typically, many of those benefits related to helping, developing compassion, and giving opportunities for their child to be the more competent peer.

Structural Themes

Statements of meaning and statements of emotional significance contributed to the underlying dynamics of how participants experienced their children's early childhood classroom and programs, evident in individual structural profiles for each participant. Looking across participants, factors of influence were identified through comprehensive structural description. Through structural analysis, taking into consideration what was experienced by participants, the overall textural themes and the individual structures identified for each participant, I was able to identify structural themes, or influences related to the participants' experiences in inclusive early childhood classrooms. Excerpts from individual transcripts are provided as evidence for each structural theme identified below.

Several of the identified structural themes include subthemes. The emerging key themes are: (a) The influence of "dis/ability" and its meaning. (*Sub-themes: Typical development, Unrecognized Marginalization, Exclusion*); (b) The influence of child's disability and characteristics (*Sub-themes: Learning Disabilities and Intellectual*

Disability, Behavioral Disability, Down syndrome, Physical Disability, Autism); (c) The influence of personal knowledge and experience (*Sub-themes: Education, Career, Personal Experience/ Family, Experiences in public, Need for more information*); and (d) The influence of cultural individualism. A diagram of these themes and their sub-themes are presented in Appendix I and will be discussed in the following paragraphs.

Structural theme 1: The influence of “dis/ability” and its meaning. Parents of children without disabilities are influenced by a variety of factors related to understanding “disability.” In cases in which parents have limited experience advocating for children with disabilities for whom accommodations and services are needed, the opportunities and experiences for which these parents advocate come from a position of “typical.” Parents may have the intention of providing a diverse setting for their child, but without understanding the support children with disabilities need and that they should be afforded in inclusive settings.

Many parents of children considered to be developing typically may have little awareness of the underlying influences that affect placement choices made by parents of children with disabilities. Billy, with knowledge of the barriers faced by children with disabilities and their families, reported, “there’s such a negative stigma that comes with a label of a learning disability or specialized education.” Parents who have not experienced this stigma, may not realize it exists and thus perpetuate stigma through thoughts, feelings, or actions taken toward or with children with disabilities and their families.

Sub-theme 1: Typical development. Billy feels strongly that delays are obvious compared to typical development.

When you turn around and you see your kid has a blatant speech problem, how do you as a parent not know that your child needs speech help, maybe it's because you were the same way growing up, maybe it's you don't have the education, but some of these things, I'm just using speech as an example, I just don't, that's a part that just blows my mind at how, but that I keep telling myself they're in denial, they're in denial and nobody wants to say there's anything wrong . . . How do you not know?

The fact that he is a parent of a child without disabilities and a teacher of children with disabilities makes it difficult to determine how parents of children with delays take cues from the social and peer environment and use that information to process and compare to their child's development.

As majority stakeholders, there is inherent power in typical development. Given the population in a community-based early childhood program that includes children with disabilities, there are more parents of children with typical development than those families who have children with disabilities. For example, if a child continues to develop typically and does not struggle significantly in any domain of development, there may be little reason for that parent to consider the position of a parent whose child does. Parents who rarely need help or support for their children to meet typical milestones may feel more empowered to ask for accommodations outside the parameters of "typical" and thus, are able to access accommodations beyond what is considered standard. Parents in this study reported feeling empowered to complain to program administration about other children, teachers, and in one case, a situation where a teacher regularly mispronounced a word.

Lorraine discussed the nature of parents participating in early childhood programs by describing what she perceives as their roles in voicing opinions.

. . . When you think about early childhood, at that age, parents are sending their most precious gift, they are like micromanaging what's happening, I mean a lot of parents are, and it's like you've got a tough crowd to please and you know, you've got parents who don't know anything about child development but know they want everything perfect for their child, whatever, and they're coming in and it's like having a gazillion bosses who are gonna nitpick, you know, everything that's going on.

Parents may or may not have knowledge of typical development and the range of what is typical for any age group in early childhood. Additionally, parent participants expressed a wide range of understanding of disability with an emphasis on children who need more help, support, time and a slower pace.

For parents who voiced support for the inclusion of children with disabilities, the recognition of what is gained through these experiences varied widely. Rachel reported that she feels strongly that her child who is developing typically can benefit from children with disabilities.

I think, again, that every child has something to teach my child, to teach all of us. I think no matter who she interacts with, whether they have a disability or they don't, she's gonna learn something and maybe from a child who has a disability she'll learn compassion or she'll learn more patience or she'll learn a new skill, I mean she'll learn to relax and enjoy something new, something different.

Though the recognition of multiple strengths from these relationships is mentioned, the deviation from typical is evident in parents' descriptions of disability.

Reflecting on her approach to explaining disability to her children, Lorraine reports,

I think part of it is, I hope is how we're raising them, you know, that, you know, just to understand that everybody's a little bit different, that everyone has things

that they're good at and things that are hard for them and that some kids are not blessed with being able to learn as quickly is one of the things that we've said, some kids are not blessed with being able to walk as quickly, but they might have other things that are really neat about them and so we just sort of try to help them to see that everybody's, you know, has their strengths and weaknesses.

In communicating her philosophy about recognizing differences, Lorraine describes how she points to strengths and weaknesses for everyone, including individuals without disabilities in order to demonstrate a strengths-based view of all people and move the focus of conversations away from disability or deficit.

Sub-theme 2: Unrecognized marginalization. The marginalization evident in participants' transcript text was initially bracketed, though it provides evidence of participants' overall views about children with disabilities, although recounted here as unrecognized. Though suggestions and reported benefits of inclusive classroom settings, participants made multiple mentions of children without disabilities helping children who were less fortunate. Reporting the influence of seeing children without disabilities as helpers to those who have disabilities, Billy reported,

. . . there is a couple students in there that are very delayed and I think they, they, obviously they work with those students but then my son has learned how to deal and I don't want to say deal, but he works well, and he, you know, he's willing to help and he's learning that, I think he's starting to learn that some people are a little bit more—less fortunate so he can kind of, fortunate and he can kind of help out, too but they, they're really big, just, like I said objective based and I like it. I think so far what I've seen I've been happy.

Parents who supported having children with disabilities in their children's classrooms often made statements that were further marginalizing when describing children with disabilities as “adorable” and describing their child's friend choices not

including children on their same level as “heartbreaking.” While the intention behind these statements was often evidence of compassion, the differential evident in reports provides additional proof of sympathy or projecting that the child is not as capable, valuable, or appreciated outside of his or her disability and perhaps as a recipient of charity.

In efforts to help her children understand children with disabilities and their differences, Leah said,

This other child was little more, as I’ve told to [Brandon], ‘his brain doesn’t work like yours, sweetheart’, and so we have to talk about that all the time, and I know she is so patient and so loving and works with him, and is there for him and his parents and is guiding them through a process, which and of course, I’m a former educator, a process which I know is going to be, it’s going to be long-term.

Parents’ reports demonstrate positive intentions in including children with disabilities.

Sub-theme 2: Exclusion. Parent participants recounted several incidents of exclusion, at home and in the community, directed toward children with disabilities and their families. When talking about her older son and the experiences he had in the same early childhood program, Leah recounts her feelings of animosity toward another child who was physically aggressive towards her son. Leah admits wanting to avoid another child and his family and using what she calls a passive aggressive tactic to avoid them at the pool and in the neighborhood where they lived after having some experiences that upset her.

. . . we just kind of passively aggressively, it was more of an un—you know, an unspoken thing between the two of us, like let’s just not even go there because clearly I don’t know what’s going on in your house or what’s going on with your

child, and I'm not going to be presumptuous enough to be, so yes, we kind of, oh yeah, that is [Michael]'s house but we're not stopping today, let's keep going . . . but I never . . . we never, I try hard to never be like, "well [Michael]'s a jerk and you just need to leave him alone, don't you talk to him."

Other participants reported times where children were separated from other children in the class as a means of keeping children out of direct physical contact with a child who had aggressive behaviors. Several parents mentioned experiencing a child segregated by a teacher appointed to control that particular child as a positive strategy for keeping their child safe. While the reports of exclusion at school were provided in the context of discussing inclusive classrooms, only one parent mentioned evaluating the quality of the classroom setting for the child being intentionally excluded at school.

Children who attended early childhood programs for part of the day after spending the mornings or majority of the day in specialized settings were not a part of the social landscape of families as documented through participant reports of not knowing those children or families. Lorraine shared not knowing other families of children with disabilities enrolled in her child's classroom as a result of both gender and schedule differences.

All the children that I'm aware of, maybe except for one, are boys, and so we just have not had play dates or we wouldn't be opposed to it, and none of them go to our church, so I think mainly, it would be birthday parties and all the ones that I can think of are, because they're involved in other programs in addition to this, so most of them are a part of an early intervention program, are not physically at the school the amount of time that the other children are, so I just have not had as many interactions, so like the one that was biting is dropped off after I've dropped off my child and is picked up before one o'clock and so I, if I have even seen their parent I don't know about it. . . . I just wouldn't recognize them because our—we just connect at different times at the school.

Another parent also reported that a child with whom his child had problems in the past did not attend the program full time. Jason describes the difference in schedules between his child and a child with disabilities, saying:

And this other child is not—he's not there all the time, he's, I think he just comes in for the afternoon, he has another program, he comes over in the afternoons. And he may not be there every day of the week, I'm not really sure

Although participants did not identify the difference in schedules as a mechanism for greater isolation, it is possible that children who only participate in early childhood classrooms for a few days or a few hours per day have less opportunities to be viewed by peers as having equal ownership of the classroom. Thus, the reports of children attending more intensive programs or special settings in the mornings has influence over the perceptions of what inclusion means to these participants.

Structural theme 2: The influence of a child's characteristics and disability.

Potentially influenced by participants' understanding of disability and their ideas about children's time in specialized settings, children who attended early childhood programs included in this study for afternoons only, may have been viewed as having significant disabilities. Lorraine reports that children who are enrolled in her daughter's classroom may have disabilities of which she is unaware, though the children she identified as having disabilities were enrolled part-time.

There may be children that have special needs that I don't, I just—that I don't even know they have special needs, but the ones that I'm aware of, yes, are part-time and—and actually, the—so the one that I mentioned that was physically aggressive in the afternoon . . . I was often arriving when he was arriving but he came on a bus . . .

Generally speaking, the parents interviewed in this study reported that they supported the idea of including children with disabilities. Although parents who had experienced negative experiences with children with disabilities reported being supportive based on their perceived positive experiences, each participant reported benefits and concerns around the specific characteristics of the child. Jason, a parent who felt strongly that his child was in physical danger due to one interaction with a child who hit other children reported his support for inclusion this way:

He's had people with developmental disabilities all along, I have no problem with that, in fact I really encourage it, he's got this sweet friend [Caroline] that he's been with for a long time that loved me in the classroom and I—like she came up and called me dad all the time . . . I would say yes, I'm [Elliott]'s dad, you know, and I felt like that that interaction although drain—may be draining on the staff, because I saw that, I thought was good for [Elliott].

Katherine reported her hesitation about direct discussion of children's individual characteristics in children's classrooms with consideration to personal disability characteristics.

I think it depends on the disability and how severe, so say there is a child who can't, can't, you know, something obvious, very outward and obvious, then I think great communication around it is a positive thing but just open, you know, so-and-so has legs that don't work quite yet and you know, blah-blah-blah, whatever, but I think otherwise, if it's something that is not as severe or noticeable, I think no communication around it is fine, you know, if you need to pull someone out of class into the common area to work on something, whatever it is, but if it is a developmental issue that displays itself in some way with acting out a lot, I don't know if that even, I don't know, it's a good question to even be addressed or like Johnny is just always bad and you know. I don't know, it's a good question I mean I think it's so nice to have such innocence around people who are different and accept, you know, just general acceptance, so I hesitate in a way to think that things like that should be called out.

Sub-theme 1: Learning disabilities and intellectual disability. The visibility of a disability could influence a parent's perceptions of how that child is included in an early childhood classroom. Because learning disabilities and intellectual disabilities may be diagnosed later than other disabilities, or less noticeable to families of children in the classroom, knowledge of these disability categories can affect a parent's overall understanding of the range of disabilities that exist. Katherine reflects,

. . . there probably are kids in or have been that have learning disabilities or you know, if so-and-so has dyslexia I don't, I don't care. I'm not sure that it really impacts me or my child except that they may need some more one-on-one attention.

The costs parents may attribute to inclusion of children with an intellectual or learning disability may be less than costs associated with children who have more severe or observable disabilities.

Sub-theme 2: Behavioral disability. While not necessarily identified as children with disabilities, several parents discussed interactions with children who had behaviors that were problematic or who were aggressive and or dangerous. Katherine, who reported not knowing that children with disabilities were included in her child's classroom mentioned that the same children are in time-out every day. During our telephone screening interview she mused "things I think are problems or actual diagnoses by professionals?" when asked if she was aware of children with disabilities in her child's class.

Several participants reported concerns about children's behaviors. Lorraine addressed the concerns parents in her child's early childhood program had about

including children with aggressive behaviors. When reporting an experience where a child who was biting other children, Lorraine said,

It was very upsetting to a number of parents and even in our household we were concerned, you know, if this had happened to our pretty daughter and the potential of there being a permanent scar, that even if you couldn't, you could understand that this is just a behavior and not intentional, it still would be incredibly upsetting if that happened and so, you know, we could identify with the families that it happened to, that that—it's understandable that that would be upsetting, and so sort of figuring out, and yet the center needs to protect the identity and some of the issues related to it, so it was a hard line and I think as parents we could recognize that this was tricky, but we still have to ultimately think about what—what we wanted and if we thought that things were being managed sufficiently in the classroom and all those things, so that's an example, and there were actually, ironically, there was another child who was only there for certain hours of the day who I observed, I never observed this other child do anything but be sweet, the one that had the biting issue, but the—there was another child who was physically large and had some special needs and was—had to be kept away from other children because, was just physically aggressive and again, no mal-intent, it was a behavior, so like his reaction was hitting or kicking and that child actually scared me more, one, because I saw it, you know, he would hit or kick me if he could, but with a sweet little smile on his face, that's just how he interacted but, I know, and I was feeling for him, too, because he really had to be kept away from other children and so I thought, you know, as a psychologist it's like I'm constantly thinking, you know, you know, you're always evaluating the benefits of an inclusion classroom and sometimes I wondered if it, if it almost was detrimental that we has, in his experience, that he was needing to be kept from other children because of his behaviors but, you know, those are just things you're always thinking about. But anyway, so at the time I think we were just thinking sort of in totality, is there more going on in this classroom than these amazing, I mean they were, they are amazing teachers, than they can even manage, like is it fair and you know, we're trying to figure all that out and trust that the, you know, the administration, the process, and all of that is able to evaluate it appropriately and in the end I felt like they did, and it all kind of worked out and settled out really well.

Rachel discussed the concerns that parents might have about being hurt by another child, but reported that in her experience and opinion, any child could hurt

another child. Speculating on the potential questions other parents may ask, Rachel provided,

“Is my child being hurt?” “Is there a potential that my child could be hurt?” I don’t know, I think safety probably would be the main thing, and even though, I mean with, I mean the—could be hurt by any child, so I would argue with that, but I think in general, but right, right, I mean any child can hurt your kid, not just a child with a disability, so—but I think as a parent who maybe doesn’t have the background that we do, may question that.

It is possible that an expanded view of disability could provide for greater understanding of children with extreme behaviors. Aggressive or uncontrolled behavior of children is certainly viewed by parents of children without disabilities as problematic.

Sub-theme 3: Down syndrome. Children with Down syndrome share physical features that make their disability status visible and are often recognized by others, even when individuals have little education about disabilities and little experience working with individuals with disabilities. Parents of children without disabilities reported experiences with children with Down syndrome that both provided evidence on their perceptions of disability and influenced their perceptions and experiences in inclusive classrooms.

With the caveat that one child is not a safe friend with whom to hold hands, Jason reports his feelings about having children with Down syndrome included in his child’s classroom,

. . . in the three-year-old classroom, I just find this really adorable and really well done with the teachers, one of, you know, so they, they line up and then they, you know, walk out to the playground, they always do it in lines, and one of their—and I’m not sure if it was a formal job or not, you know, they have these

responsibilities, and so one of the responsibilities was to hold hands with these—with two kids that have developmental disabilities, not [Chris], who they—the teacher held a hand. But you know, because they were, you know, they weren't really a danger to you know, others, and so—so I would, and you know I observed that, you know, if I dropped them off when they were lining up they would line up and then the teacher would pick two kids to hold hands with, with two of the kids who—they had Down Syndrome, so two of the kids with Down Syndrome, and that they would—they would walk out holding hands together and so—and then they would like tell them, be like you're supposed to stand against the wall here, and they would like kind of help them, then, you know, like I will—and then they don't have to really like negotiate so I would even see, you know, the kids kind of get like a little bit frustrated because he wasn't standing, you know, like he wasn't standing against the wall and the teachers say it's okay, you know, he'll just, you know, you show him what to do and so they would, so it gave that opportunity to, you know, to help them, you know, it's a, you know, kind of a basic way. They, you know, other basic—then they, you know, they eat at the same table, you know, I think, just they kind of share some of that physical space together, you know, like they, they sit at the table together and they eat, and so I—you know, I think even things like that is important . . . so you know, those, I think those are my best examples of how they like work to integrate them as much as possible.

In another example of a child with Down syndrome being included in a classroom with children without disabilities a parent participant reports that the child is docile. The attributes described for children with Down syndrome may be further marginalizing even when parents of children without disabilities are describing these characteristics as benefits toward their inclusion in classrooms and programs.

Sub-theme 4: Physical disability. Physical disability is another category that often influences the perceptions of others when considering adaptations for inclusive settings and costs to typically developing children. Physical disabilities are often visually identifiable and recognizable to people who have little direct experience or education related to the wide range of possible disability categories.

Mary reported influence in her perception on disability through several examples of seeing individuals with physical disabilities in public. She made overtures towards the parents in hopes of finding better ways to include those children in conversations. She described one account,

. . . for instance outside of school we saw a child who had a—I don't know what to, I can't think of the word this second, but the, you know, like a basic prosthetic leg or a new, the new prosthetic leg, there's a metal, but you know, and I talked to the mother and said, you know, I want to make this kind of normal because we were bowling right next to them, and [Anna]'s staring and staring, you know, like she was paralyzed by staring and it was like, you know, can you help me how we talk about that, you know, or how we include him and she said well, I guess what she had learned, her child lost his leg two years prior so she said, you know, they're gonna stare, so it would be helpful for teachers to say . . . to tell me that they're telling the children how to behave and how to include someone.

Her ideas on what she needs from teachers in order to best address difference and disability with her child was influenced by her experiences seeing children with physical disabilities in public. In another situation she also approached a parent for information about how to talk to her child and how best to include the child in the wheel chair. She remembered it during our interview,

. . . then as we were leaving there was another child and their parents coming up and that child as in a wheelchair, but—and I want say more on the very disabled side, you know, where it wasn't a sit up in a chair, it was one of those lean back wheelchairs. And so I talked to that mother because the group was—their group wasn't there yet and so I talked to that mother a little bit about how you include people.

Physical disabilities were reported as most visible by her and thus most influential in her conceptualization of disability.

Sub-theme 5: Autism. Parents' views about Autism are varied, too. While some participants described behaviors that could be associated with Autism or Autism spectrum disorders, not every parent mentioned Autism specifically. One parent talked about Autism being a new syndrome, noting that when she was growing up she had never heard of it. Another parent suggested that she would recommend a child be tested for Autism based on her knowledge of the disorder. There are various associated ideas about how to include children with Autism meaningfully. A parent who reported having experience with Autism, did not share specific information about children in her child's program that had been diagnosed with Autism but did discuss children with more severe disabilities attending separate settings or special schools for the day before riding a bus to the early childhood program and joining children without disabilities in the afternoon.

Again, this particular diagnosis, associated stereotypes and perceptions about this diagnosis influence parents' views about both inclusion and children with disabilities. Further, negative interactions with a child with Autism or associated behaviors influenced parent participants' perceptions about costs and benefits to their child without disabilities.

Rachel's perspective about Autism is directly linked to her experiences as a teacher in a separate classroom for children with this diagnosis. She believes that other parents would be concerned about safety specifically when thinking about children with Autism. She takes issue with that based on her experience working, speculating on parental concerns about inclusion,

“Is my child being hurt?” “ Is there a potential that my child could be hurt?” I don't know, I think safety probably would be the main thing, and even though, I mean with, I mean the—could be hurt by any child, so I would argue with that,

but I think in general, but right, right, I mean any child can hurt your kid, not just a child with a disability, so—but I think as a parent who maybe doesn't have the background that we do, may question that.

While her experience has been largely in working with children with Autism, she also feels strongly that she wants her children to be comfortable with others who have been diagnosed with Autism, too.

My kids are around my students, and you know, who are verbal, non-verbal, who rock back and forth and who flap their hands and you know, my son, I actually taught at his school last year and he was in kindergarten and I was in a self-contained classroom with children with autism, and so he would come to my classroom every now and then to visit and my students, you know, some were non-verbal, some would yell out, he understood that oftentimes mommy got hit at work and you know, that everybody's different, and so—and that's just a part of it, but it—he was never fearful, nor would I ever expect him to be, I want that to be a part of who they are because it's a part of who I am.

She goes further to describe techniques teachers need to learn so that they can deescalate behaviors that children with Autism often exhibit. She discussed an observation of including a child in an early childhood classroom with her son at a previous center. “You know, I know my son was in pre-school with a child with autism and I only know that because I work with that population very often.”

Structural theme 3: The influence of personal knowledge and experience. The participants in the study who work in the field of special education have unique perspectives of what parents of children without disabilities might think and about what they might be concerned. Beyond the influence of career, education, personal experiences, public experiences and having had no specific experiences play a role in the ways inclusive classrooms are experienced and perceived by parents of children without

disabilities. Their experiences with individuals varied greatly from a lifetime of experience with a sibling, daily experience at work, experiences with the children enrolled in their child's classrooms, experiences in public, to no general experiences.

Sub-theme 1: Education. Study participants' perceptions and experiences in early childhood inclusive classrooms were influenced by education. One of the participants spent time in a specialized education services major and thus developed greater insight into professional perspectives on disability. A participant with a doctorate in clinical psychology cited a variety of educational experiences that affected her understanding of an experience with individuals with disabilities. Another participant cited his background in social work and human development as an asset in supporting his child through difficulties with a peer with disabilities. The participants who were special education teachers also drew from their experiences and knowledge from their education and from training experiences they have had in professional development.

Sub-theme 2: Career. Similarly and sometimes overlapping with participants' educational influences, career experiences influenced parents' perceptions of and interactions in inclusive classrooms. For teachers, experience with education and a variety of learners has influenced their understanding of and experience in a group setting.

Leah believes that her background in teaching affects her view of children in classrooms with her own.

Based on what I've seen in classrooms, because like I said, I taught, I taught high school for 11 years, it would not surprise me down the road if there was some type of diagnosis and if there's not, he's right there on the cusp of ah, sorry, you didn't quite meet our numbers, do you know what I'm saying?

She elaborates in her perceptions,

But as a former educator, when you look and you observe certain behaviors, yes, there, to me, if I were to go in there with piece of paper and write everything down I would say you may want to have your child tested would be the in my, you may want to go see somebody.

Leah has made other observations she attributes to her experience teaching before having children.

. . . but I know he's on the autism spectrum. I can see it. He's on the autism spectrum. I don't know if he's ever been tested because once again, I personally feel like it's not my business and if [Carol], his mother, wants to share that with me and talk with it about me, that's fine, I'd be happy to talk to her and, or listen to her, but I'm not gonna be like "hey, don't you think you should get your child tested for autism?, I think it'd be a great idea."

Another participant reported that her identity as a career special education teacher is important to her stated value for inclusion. Rachel reports,

My kids are around my students, and you know, who are verbal, non-verbal, who rock back and forth and who flap their hands and you know, my son, I actually taught at his school last year and he was in kindergarten and I was in a self-contained classroom with children with autism, and so he would come to my classroom every now and then to visit and my students, you know, some were non-verbal, some would yell out, he understood that oftentimes mommy got hit at work and you know, that everybody's different, and so—and that's just a part of it, but it—he was never fearful, nor would I ever expect him to be, I want that to be a part of who they are because it's a part of who I am.

Additionally, several participants reported influence from career in the areas of clinical psychology, previous teaching experience, co-teaching a high school inclusion service delivery model, and career experiences in special education. For one participant,

his wife's career experience in the child care center where his child was enrolled influenced both his decision to enroll in the program and his perceptions of his child's experiences.

Sub-theme 3: Personal experience/ family. One of the study participants reported extensive experience with a sibling with disabilities. The experiences and feelings she had about her sister and the ways her family handled discussion of her sister's disabilities influence her perceptions about disability, difference, inclusion, and providing information about differences and disabilities.

One thing that I think is important, too, is to not have such a fear for people with handicaps, and I think that all comes into play as things get more extreme obviously, but I think even with a sister who's mentally handicapped, I still was uncomfortable with it, like going to special Olympics events or . . . whenever I would volunteer or go see or just at a young age having a sister that was mentally handicapped was awkward and embarrassing or whatever, you know. I mean in growing up when people would be like I met your sister today, and I'm like, my stomach drops, like oh God, you know, you have found out, and I swear and I hate to even admit this now because it seems so evil, but like if I'll just be honest, but like we went to the same high school, but she was in separate different classes and I would legitimately hope that no one realized that we were related, you know, it's so bad, but then there's some families that the average, you know, I hate to say normal but whatever you call them, kids are so helpful and like embrace that child that has a handicap and is—it's just such a, I mean it's the sweetest situation, so what makes one thing happen and not the other, I mean a parent—I would assume I'd just like to blame it on my parents because it could not be my fault, you know.

Wrestling with some guilt about her feelings of embarrassment and rejection of her sister she reflects on the role of information provided by parents,

I think maybe and then just the like communication coming from your parents. Mine aren't usually very big on talking about things, they're not, but [Elizabeth]

always said that she had a handicap, but anyway, I don't know, but it's fascinating as to what makes you go in one direction or the other, to ostracize or protect.

Her experiences with her sister have created opportunities for her to reflect on sharing information with her children but she resists directly addressing difference.

I mean it's definitely, I think it's important to answer those questions and very honestly, but I just wonder how early on . . . Because I just, love that innocent acceptance and you know, love to play with everyone.

She reports several times during our interview about struggling with addressing issues of difference, but when asked what information would be helpful to her and her child about children with disabilities included in her child's classroom, she ultimately does not believe that it is necessary for young children in early childhood classrooms. "I don't think it makes a whole lot of sense to draw attention to differences unless they are—need an explanation."

Sub-theme 4: Experiences in public. For some participants in the study, experiences in public with individuals with disabilities had meaning that influenced their overall perspectives. Their ideas about how to talk to or address difference and disability were prompted by interactions outside of career, family, or their child's early childhood classroom.

Recounting an experience in which she addressed her child's reaction to observing an individual with a disability in public, Lorraine reported,

I can think of one example, this was not related to the classroom but like we were at Bush Gardens and my younger daughter was kind of mocking the way someone was walking who clearly had a disability and so we talked to her right away about

that, you know, we just try to capitalize on in the moment opportunities, I mean it was upsetting that that happened but—and I'm hopeful that that person didn't notice at all, but that's the only thing I can think of between either child that has ever even been close to looking down on someone or mocking them.

Similarly, Mary has reported encounters with individuals with disabilities in public during which she attempted to gain greater insight into effective ways to communicate with them and include them. She recalls,

. . . as we were leaving there was another child and their parents coming up and that child as in a wheelchair, but—and I want say more on the very disabled side, you know, where it wasn't a sit up in a chair, it was one of those lean back wheelchairs . . . And so I talked to that mother because the group was—their group wasn't there yet and so I talked to that mother a little bit about how you include people.

She reflects on other encounters with individuals in public and her philosophy about specifically recognizing individuals with disabilities.

If we're on the elevator, I can't remember the specific situation, but on the elevator was someone with a child with a disability in a wheelchair or even an adult, you know, just to say hello.

During another experience in public with a child who had a prosthetic leg, she discussed her daughter staring and her attempts to alleviate the awkwardness of the situation by talking to the family directly about the child's missing limb. Her intentions in these public encounters were described by her as attempts to “normalize” disabilities for her daughter. She viewed public interactions as opportunities to gain more information and directly address differences for and with her daughter.

In contrast, Katherine recalls struggling with providing information to her children in public situations. Although she feels that her children do not notice her sister's disability and generally attributes a lack of awareness of difference to her children's perceptions of others with disabilities she remembered a public encounter with a child with Down syndrome and her child's observations. She reported

I always wonder, like what level of handicap is noticeable versus not, and what age and whatever you know, we've run into some kids at the park, one day there was a little boy with Down Syndrome and [Gus] was like something, you know, he's, I can't remember what he said but like something is off about this kid, and he recognized that.

Although she reports public encounters when her child recognized a difference, she wrestles with providing appropriate information about differences and disabilities and did not report having a response for her son.

Sub-theme 5: Need for more information. Several parents expressed the desire for more information about children with disabilities and disability diagnoses. Particularly relevant for parents who had no direct experience with children with disabilities and their families, participants mentioned wanting to know more about disabilities and how to include children with particular disability labels. Some participants believed that information about how to talk to children was relevant and others speculated that basic information about a disability would be helpful to having parents of children without disabilities be better informed about their classmates. Participants also expressed interest in knowing more about how teachers addressed

behaviors, worked to teach children with disabilities, and about accommodations that were made in classrooms.

Leah believes some parents might need more information about particular children and their disabilities and recommends using opportunities for learning within the community of the school or program if parents of the children with disabilities want to share. She felt a real benefit to her child when he reported about learning how children who are visually impaired have an Easter Egg hunt,

I could see other parents not knowing because I mean I do feel like I have a slight advantage from where I'm coming from. So I was able to say, well his brain works differently, well maybe not every parent knows what to say or not to say to make it an issue so I think, of course you gotta be careful though because does the other, I mean I would imagine that's a fine line, too, you know, does the other parent want you talking about their child or is, I mean I'm sure it would have to be general information, you know, just a—I want you to know that we have a child with x, y, z in the class and if your child has any questions, you know, let's talk about it or here's some information to allow you, like I know there is, well, going back to the child that's blind, the mom came in at Easter and, because they, these kids don't know this other child and she taught them how to do an Easter egg hunt even though you can't see. They were little, and [Brandon] talked about he thought that was the coolest thing ever, mommy they have Easter eggs that maybe it was that chirp or beep or something, and so they're still able to find them, I'm like that is cool isn't it, yeah, so if you can't see you can still go on an Easter egg hunt. So they were, you know, they allowed this mom, because she was like well I'd like to go to all of the classrooms and talk to everybody about this and they were like yeah, that's a great idea, so that kind of stuff and then we were able to have a conversation about it, which I think sometimes is more valuable than hey, do you know your A, B, C's, sometimes that kind of stuff was invaluable because then he learns compassion and he learns that people are different.

Lorraine also believes that information for parents and children about strategies used for children with disabilities is helpful. She reports,

. . . so the child who was more physically aggressive, when they sort of figured out that hitting was kind of what he would do when he was excited to see you or that kind of thing, they had a talk with the children and sent a letter or note home that basically said you know, one of our friends in the class has, sort of expresses himself and shows that he's excited by doing this, and they taught the children a thing to do instead, kind of a replacement behavior, and so those were the kinds of things that I thought it was nice that they gave sort of a translation for what that behavior could mean, they gave them just a different perspective on him, they didn't see him as a mean kid or anything like that, they just saw him, well, this is what he does, and so I think things like that are actually really helpful for parents to hear, too, because a lot of parents, you know, when we were growing up, we didn't get that kind of sensitivity training and so I think things like that are super useful and especially if the parents of those children are open to information being shared about their child, I think it actually helps everybody because parents can be very judgmental, much more so sometimes than children, so I think those kinds of things, any, you know, I just think in general that people do better when they have real information.

Conversely, Rachel who is a special education teacher believes that she does not need any information.

I mean under confidentiality we're not really allowed to know anything, which I'm okay with, I mean honestly, again, I want her to be able to interact with anyone, whether you have a disability or whether, you know, whatever, socioeconomic status, like we want her to just be, just be a kid, you know, and understand that not everybody learns the way you learn, and not everybody behaves the way you behave, that sometimes people may have behaviors that may, you know, may affect you, but teach her the proper way to deal with that. You know, I'm really okay with not knowing, which is, you know, a part of the reason we are really wanting to get her in pre-K is, it doesn't, you know, a friend of mine said I don't think we'll probably apply, isn't that just for kids with disabilities, well no, it's not, you know, and even still if she's in a classroom where half the children have disabilities, then I would take that as a learning experience for her.

Billy goes further suggesting that parents who may have developmental concerns about their own children could benefit from some information, too.

I'm not saying we're doing this to call you out and to realize that your child has a disability, but I think the parents would—and then you've build that rapport where you could come open and ask questions, you know, and then and seek out those resources instead of waiting until it's too late, I mean it's never too late, but . . . where you could have been a little bit proactive, you know, participate, don't anticipate, you know.

The need for more information about disability and delay influenced participant perceptions of their child's early childhood classroom and programs in a variety of ways.

Structural theme 4: The influence of cultural individualism. Data from interviews with parents of children without disabilities in this study communicated that they receive cultural messages about the importance of academics, getting ahead, doing better than others. Parents report that the early childhood classrooms where their children are enrolled are all working to prepare children to be independent. Children without disabilities may be viewed as helpers and peer models but with an emphasis on being more competent.

Billy shares that he wants his child to have the advantages of being well prepared in preschool.

I was retained in first grade because I wasn't a very good reader, so I think they could have been some delays on my part just because my parents, daycares weren't big, pre-schools weren't big back then. And now, again, as an educator, and seeing what I want for my son, I don't want him to have to go through those struggles, and I don't think any parent really wants to see their kids go through those struggles, you know, you want them to be in there and unfortunately, sometimes some schools, you start grouping kids and you don't want them to fall into, you know, the red robins and all those reading groups and all that crazy stuff.

Billy reported his value for early childhood education in the context of competitive individualism,

Well especially when you, if you're and I don't want to use the word competitive but I'll just say it, when you turn around and put apples and apples you want to know why is your apple a little bit shinier than the other one, you know, you know, I mean it's, you can, you, and if you put your kid up against another kid well wait a minute, how come they're counting stuff off, they can count to ten by not just saying it but pointing at items, when my son is just sometimes he gets so excited where he just counts to ten and points at four things . . . wait a minute, what's the hold up?

Eliza reported being concerned about her oldest child during infancy when he was not meeting particular milestones at the time she expected,

He has always been way ahead of the curve cognitively and like linguistically, but then physically and socially, quite a bit behind the curve, like at every single, every single doctor's appointment, it'd be like well he's, the very first one, he's not holding his head up yet, and the doctor's like "it's okay, we'll get there," and the next one, well he's not that, you know, according to the milestones he should be rolling over and he's not.

She felt the pressure as a parent to be sure her child was doing everything he should be accomplishing during infant development on time and at a rate expected for children developing typically, without disabilities or diagnosed delays.

Katherine enjoys the regularly reported assessment results for her children by the teachers in their early childhood classrooms. She describes the information she receives as a reported strategy for meeting the needs of all of the children in the classroom. She describes the process for her, reporting,

They have this big folder of here's what she was doing the last time we tested her, so there is testing fairly regularly, so they have this little sheet where they have the kids circle all the letters that they recognize, so you know, circle the A, circle the P, circle the whatever, and then other lists of criteria that they are assessing, determining, they had examples of how she is or is not doing these things and then the next time we come in, we compare the previous assessments.

Additionally, her concerns about lowered expectations for the whole class and possible time and energy taken away from children without disabilities reflects the influence of cultural individualism. Her speculative concerns were described when she reported,

It applies a little bit more I think as they get older, so not so much in early childhood education but is the taking away from the average or well, you know, ahead, advanced, whatever kids to cater to those who need extra help, and I think that that is a problem and it's not only, I don't think just disability specific, but more, you know, teaching to the lowest common denominator.

Recognizing a common concern but approaching the concern with her experience and education, Rachel adds,

I think parents of students who are taught in the inclusion setting have worried about things getting lowered, expectations being lowered for all students, which was never the case, but I think that that's probably something that might concern parents as well.

In her experience, maintaining high expectations for all students is an important tenet of inclusion of children with disabilities. The concern that a parent's child may be negatively affected by inclusion is influenced by the focus on the individual child advancing and getting ahead.

Multiple parents reported on both the benefits of their children's programs and classrooms as well as their potential concerns about including children with disabilities from the individualistic perspectives of costs and benefits to their own child.

Essence

Essences provide information about the central experiences of participants after the data from transcripts of interviews were reduced into themes that provide information about what was experienced and themes that provide insight into the influences that affect how participants' perspectives and perceptions of early childhood inclusive classrooms and children with disabilities. Creswell (1998) describes essences as the final step in data analysis in order to describe the meaning of the experience for participants. I used information from textural and structural themes in order to describe the essence of the experiences for participants in this study. Participants experienced classrooms in three, often overlapping roles. These experiences have meaning for parents focused on their individual children, as individuals with a wide context of influence over their current views on disability and inclusion and as parents removed from immediate consideration of disability. Although the experiences in inclusive classrooms and programs varied widely in descriptions provided by parents in this study, the combined description of the experience (*essence*) illustrates three primary dimensions of positionality: Individual and Child-centric views, Context, Disability as "Other." The following figure depicts the essences of the experience as they contribute to positionality of stakeholders in early childhood inclusive classrooms.

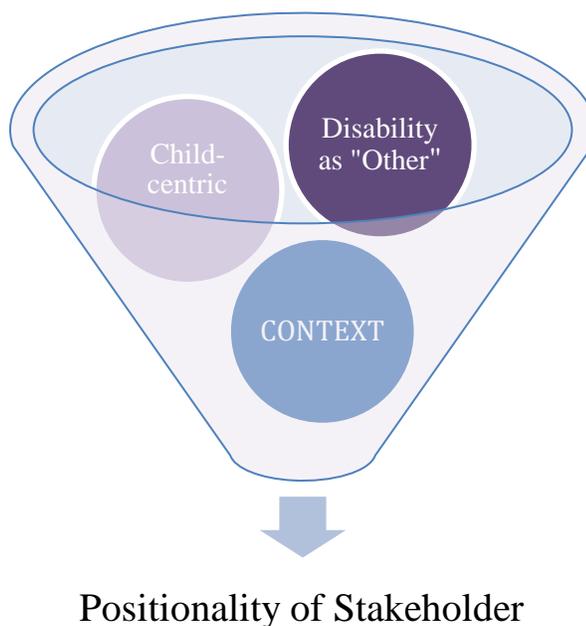


Figure 3. Essences of the Reported Experiences and Perceptions of Parents of Typically Developing Children about Inclusion in Early Childhood Programs.

The influence of child-centric views was evident in the experiences and perceptions reported by the parents included in this study. Parents placed an emphasis on their children's kindergarten readiness and expressed concerns about inclusion of children with disabilities when including those children might detract from their own child's progress or hold the class back. The dimension of child-centric views goes beyond a consideration of inclusion and encompasses overall perceptions about early childhood program participation for participants of the study. The parents interviewed in this study all focused on their own child's (or children's) experiences. The expectations and experiences parents reported of teachers' roles, experience and perceptions about the curriculum, and perceived benefits and costs inherent in their perspectives on inclusion were directed toward the development and progress of their own child or children.

Parents expressed expectations of preparing their child for the future in multiple domains through their discussion of the early childhood program. Participants in this study chose programs individually, based on a variety of factors and they pay for early childhood experiences for their child. As such, they approach experiences as consumers of a service.

Context matters to the parents included in the current study. Parents' perceptions of children with disabilities and experiences in early childhood classrooms and programs are affected by and influenced by personal context (education, experience, and knowledge.) The context of classrooms and programs within which their children were enrolled were also tenets relevant to the essence of the participants' perceptions and experiences. Moreover, the individual characteristics of the children with whom participants' children were enrolled contributed to the essence of the experiences for parents and their perceptions of their child's experiences in inclusive classrooms. The context of time was also a component of meaning for study participants. The contexts as described as part of the essence of the experience contribute to the understanding of the influence of positions held by participants when experiencing early childhood inclusive classrooms.

Participants with roles in the community or in their child's program, including special education teachers, the psychologist, and the participants who participated on the board of one program and ministry team of another, experienced their child's classrooms with the awareness of children with disabilities and issues related to inclusion from a more informed perspective. Parents who had experienced positive or negative interactions with children with disabilities and/or their related services providers

experienced the programs and classrooms with specific contextual knowledge that affected their perceptions. In some cases, stereotypes about children with disabilities were evident in descriptions of interactions, benefits and concerns. In cases where parents wanted or did not want additional information, their own personal contextual positions informed those perspectives.

Parents in this study experienced their child's classroom from the perspective of disability as "Other." Their status as parents of children developing typically, without identified or diagnosed disabilities or delays plays a role in their overall experience. Parents in this study valued the reports of their children as accurate and reliable sources of information on their classrooms' curriculum, activities and interactions with teachers and peers. They operated with expectations of typical development and were able to access information from teachers about their child's typical development and progression across developmental and curricular goals.

Parents included in the study viewed their child's programs without the specific awareness or focus on the inclusion of children with disabilities. Although parents experienced different levels of awareness of children with disabilities as participants in their child's classroom, the experiences of parents who were aware of inclusion can largely be related to context. Whether through personal experiences, education, or past problems, the parents who reported awareness of inclusion did not identify the inclusion of children with disabilities as a factor immediately identified as a reason they liked or did not like their child's programs. Further, none of the parents in the study had relationships outside of the school or program with the parents of children with

disabilities enrolled in their child's classroom. Only the parent representing the half-day program (CPP) reported knowing the parents of children with disabilities although she reported not having a social relationship in one case and avoiding a parent altogether in another. Most of the parents included in the study reported not knowing the parents or families of children with disabilities enrolled in their child's classrooms. The parents in this study, outside of their experiences included in the description of context, operate as part of a social network outside of their early childhood program that does not include children with disabilities and their families. Therefore, irrespective of other factors affecting context, the concept of disability is removed from their daily interaction as part of a family in the community. Even for participants with direct daily contact and experience with children or individuals with disabilities, their own views about their child's experiences in early childhood programs were perceived from a position removed from disability.

CHAPTER V

DISCUSSION

Overview

The inclusion of children with disabilities has been the subject of research inquiry for several decades and is currently recognized as best practice in early childhood education settings by national professional organizations and teacher preparation programs. The United States Department of Health and Human Services and the United States Department of Education Office of Special Education Programs (2015) recently released a draft of an upcoming policy statement during the time of the current study, validating the importance of continuing to explore increased avenues towards inclusion for young children with disabilities. The introduction to the current study provides a rationale for the current study including laws and policies, research results, and my personal experiences as a participant in early childhood inclusive programs and as an advocate for inclusion of children with disabilities. The upcoming federal policy statement affirms the need for examination of the results of the current study as support for inclusion exists as a priority across the nation.

I explored and presented a detailed review of relevant research related to attitudes towards individuals with disabilities, parent perspectives on inclusion and children with disabilities from the perspective of parents with and without children with disabilities, and studies that investigated parent perspectives related to choice of child care in the

second chapter of the current study. The exploration of past research revealed the continuing need for examination of stakeholder perspectives as much of the data was conducted more than ten years ago. As the professional practices in early childhood education continue to move toward the expanded inclusion of children with disabilities, continuing to collect stakeholder information serves as a measure for addressing change in perceptions, support and community level inclusion.

Methodology described in the third chapter of this dissertation study includes a detailed description of the process for securing programs that supported the selection participants and the process for recruitment and inclusion of potential participants. The third chapter discussed the process used for creating interview questions, screening participants, and conducting in-depth interviews. Finally, in chapter three I provided a description of the methods employed to analyze and make meaning from the data collected.

I investigated stakeholder perspectives through the use of in-depth interviews with parents of children without disabilities with a goal of uncovering the perceptions and experiences these parents report in inclusive early childhood programs and classrooms. Results of the current study appear in the fourth chapter. These results included detailed descriptions of the sites that supported participant recruitment as well as demographic information collected for participants. Investigating the participants' perspectives on inclusion, the children with disabilities enrolled with their children and the experiences they report for their children in these classrooms and programs resulted in dynamic and varied perceptions about early childhood inclusion in programs in which participants had

an enrolled child. Using phenomenological data analysis to arrive at descriptions of textural and structural themes, I provided the results of these analyses processes for individual participants and in comprehensive descriptions across participants. The results encompass detailed descriptions of themes that emerged across participants after horizontalizing coded transcriptions from interview participants with examples from the text of participant interviews. The overall textural and structural themes were again combined to describe the essence of the experience for parents of children without disabilities. The essences included dimensions of context, individual and child-centric views and the position of disability as “other.”

In the current chapter, I address my research questions, revisit my original conceptual framework and explore the evolution of concepts to consider including information garnered from the results of the participants’ interview data. The concepts considered as a result of this study will introduce influence to parents’ perceptions of inclusion. A discussion of implications for practice, future research and action necessary to address the inclusion of children with disabilities in meaningful ways follows the presentation of concepts presented from the results of this study.

Concepts Influencing Perceptions of Early Childhood Inclusion

The positions of participants strongly influenced their experiences and perceptions of experiences and thus, must be considered in the conceptual framework for the study. This chapter presents additional relevant information necessary to my conceptual framework for better understanding of the factors influencing parent perceptions. After presenting the influence of stakeholder positions to the concept of

parent perceptions of early childhood inclusion, I revisit my epistemological approach in analyzing the participant data to uncover barriers and avenues toward enacting inclusion of children with disabilities in early childhood programs and classrooms. Using the critical lens employed in the study (Schram, 2006), I discuss marginalization, false beliefs, isolation and exclusion, and power and majority status as potential barriers worthy of deeper investigation. Future directions in research and practice are recommended before I make known potential limitations to the current study.

The original framework for the current study proposed that perspectives about children with disabilities, perspectives about inclusion and perspectives about their child's experiences in inclusive classrooms would comprehensively describe participants' perceptions of early childhood inclusion and the children with disabilities enrolled in classrooms with the children of the participants. The original proposed framework described the experiences and perceptions inclusive of these three perspective dimensions shown. Although results from the current study demonstrate the interactions of parents' perspectives as they contribute to overall perceptions of early childhood programs, the original conceptual framework needs adjustment in order to better account for the contribution of each to the parents' perceptions. The influence of participant positionality was not originally described as a contributing factor to overall perceptions. In order to best answer the research questions guiding this study and to uncover the perspectives of parents of typically developing children or children without disabilities about inclusion and the children with disabilities who are enrolled with their child in inclusive and private, community-based early childhood programs or childcare, and the ways parents of

typically developing children describe their perceptions of the experiences of their children who are enrolled in inclusive and private, community-based early childhood program or childcare, a model for accounting for the difference in perceptions and descriptions is necessary.

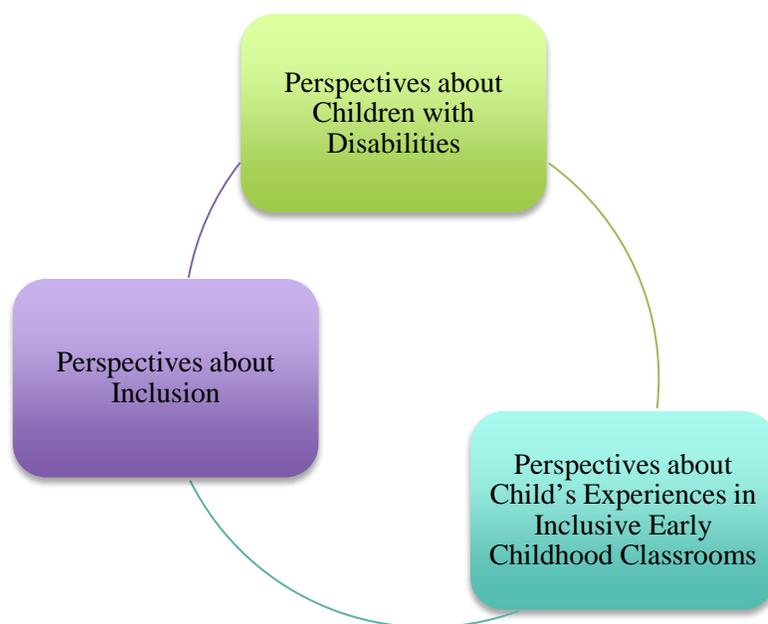


Figure 4. Original Conceptual Framework for the Study.

Derived from the overall essences of the experience, the participants' positionalities account for the influential factors affecting their perceptions. In addition to direct quotes that reveal the dynamics of the experience and the associated perspectives on the classrooms, programs, teachers, and peers, the revised conceptual framework allows the positionality of individuals to be considered. Figure 4 illustrates the combination of stakeholder positionality, including past experiences, education, and

beliefs, and current experiences in inclusive early childhood classrooms as they inform overall perceptions of early childhood inclusion.

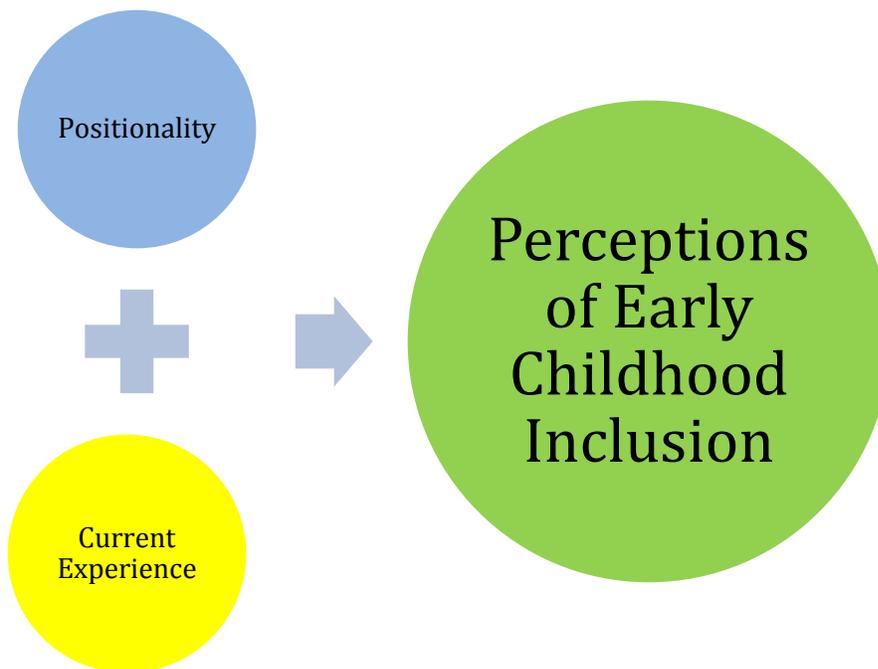


Figure 5. Evolution of Concepts to Consider Toward Shifting Perceptions of Inclusion.

For participants in the current study, positionality matters. The participants in this study reported widely variable influential factors that contribute to their overall positionality when experiencing and reflecting on early childhood inclusion. The essences, or underlying meanings of the experiences from the emic perspective or internal perspective can be described as positionality from the etic perspective, or outside perspective, in this case the researcher's perspective (Creswell, 1998).

Thus, the combined influence of current experience and positionality of participants leads to overall perceptions of early childhood inclusive classrooms and

programs and the children with disabilities enrolled in those programs. Both positionality and current experience must be considered by professionals interested in shifting the overall perceptions of early childhood inclusion as we move forward.

Research Questions

1. What do parents of typical children say about children with disabilities?
2. What do they say about the inclusive programs in which their typical children are enrolled?

The results of this study demonstrate a variety of perspectives from parents of children without disabilities about inclusive early childhood classrooms. Participants shared their perspectives about their expectations for teachers and their interest in having their children well-prepared for Kindergarten and elementary school. Parents who participated in the current study expressed their expectations and interests about their children's classrooms and programs with little direct attention to the inclusion of children with disabilities. Thus, their perspectives demonstrated the importance for understanding how parent perspectives about inclusion exist within a set of expressed goals and priorities for their own typically developing children.

Four of the nine parents who participated in the study were unaware that their children were enrolled in classrooms with children with identified disabilities. The parents who were aware that children with disabilities were enrolled with their own typically developing children did not have social relationships with the families of those children and reported not knowing them. Although the parent participants in the current study were largely focused on their own children and the experiences their children have

in their early childhood classrooms, especially related to preparation for later school experiences, stereotypes about children with disabilities were prevalent.

Concerns about inclusion and children with disabilities were shared with an expressed desire for more information about children with disabilities or specific disability categories. Marginalization of the children with disabilities enrolled in the early childhood classrooms with the children of participants in the current study evident in the shared perspectives of participants signals a pressing need for addressing the attitudes and beliefs of majority stakeholders who participate in early childhood programs and classrooms. Issues of marginalization, power as the majority voice, attention to the positionality of stakeholders and the need for building community within early childhood programs are discussed in consideration for future needs for the professional field of early childhood education on several of levels of practice.

Because of the small number of interviews and the selection criteria that were used to select participants, being aware of overgeneralization from the current sample population is important (Creswell, 1998; Creswell, 2009). The results of this study represent a small segment of potential informants regarding the research area targeted: Inclusion in a small segment of the field of early childhood education. It has been crucial to report findings specific to the participants rather than extrapolating data in order to make broad claims about parents of typically developing children and their views of quality and inclusion. However, the results of these parents' shared experiences and perspectives should not be discounted. It is clear that the findings of this study confirm the continued barriers to inclusion for children with disabilities and their families

participating in the programs chosen. Maxwell (2005) also warns against assuming that data collected from a small number of participants is typical or representative of a larger population. Although generalizability is not completely forbidden, it is imperative to consider the issues within the group of participants studied as well as beyond the study to other groups or settings as the professional field of early childhood education moves toward more successful inclusion of children with disabilities in a variety of community settings (USDHHS & USDOE, 2015). Continued exploration of stakeholders in specific early childhood programs will afford opportunities to programs assessing needs and priorities of all participants. Research conducted using parent perspectives should be continued to add to the data relevant to assessing and addressing the overall shift in attitudes and beliefs as children are included in programs more frequently and more meaningfully.

Epistemological Lens

In the current study, my lens as a researcher was used to uncover meaning both for participants in the study (parents of children developing typically) and as a path toward greater inclusion of children in early childhood settings. Further, a primary objective of this study was to take issue with the things as they are. I employed a critical lens as described by Schram (2006) in order to identify and address the underlying elements of data collected in participant interviews in order to expose evidence of marginalization of children with disabilities and their families. The overall essence of the described experience of disability as “other,” when viewed as part of the participants’ positionality, points to a greater need for increasing both awareness and understanding in

terms of disability, inclusion and practices that best support all children in early childhood classrooms. When we address what is happening in classrooms and how it is being perceived by all of the participants, given the wide range of contextual information and influence that lends to their positionality, then we can uncover a starting point from which to shift perceptions away from those that perpetuate marginalization, false beliefs, isolation and exclusion. Using this lens, I discuss marginalization and potential imbalances of power that result from majority stakeholders in programs including a proportionally representative number of children with disabilities and their families and continued marginalization that affects the inclusion of children with disabilities. Additionally, I address stakeholder positionality and the continued need for building communities within early childhood programs as a foundational step toward reducing stigma, increasing awareness and understanding, building genuine relationships and promoting full access to the community beyond early childhood for children with disabilities and their families.

Factors Affecting Inclusion

Marginalization

Individuals with disabilities are marginalized when they are viewed as less valuable or less capable of fulfilling the roles imagined and expected for individuals without disabilities. When children with disabilities are viewed with pity or as objects of compassion and in need of help, their disability (as viewed through the perception of another) becomes a greater limitation as their roles are limited by adults. The societal construction of expectations for children with disabilities begins when disabilities are

diagnosed or recognized by others. “A key site of the oppression of disabled people pertains to those moments when they are judged to fail to match up to the ideal individual” (Goodley, 2013, p. 639). When participants in the current study recognized disabilities in other children, the perspectives they shared indicated judgment of a deficit within the child. Although participants did not recognize the barriers inherent in these perspectives for the children who were the subjects of their reports (and their families), discussion about marginalization and oppression is crucial to bringing greater attention to the processes that limit children’s potential from a very early age.

Unrecognized marginalization. I considered the marginalization of children with disabilities and their families unintentional as a result of bracketing my own views informed by my positionality and in an effort to provide themes that represent the emic view of participants. Statements of marginalization of children with disabilities including the sentiments of being less fortunate or having parents refer to their own children as more blessed contribute to the overall marginalization of individuals with disabilities and their families.

Additional marginalization may emerge from perspectives that limit children with disabilities to positions within classrooms of being helped where children without disabilities are viewed as models and helpers. Given evidence that marginalization continues through the perspectives of participants in the current study, more action is necessary to draw awareness to a greater understanding of roles that individuals with disabilities can fulfill.

In two excerpts from interview transcripts, the two special education teachers pointed out examples that provide more equitable portrayal of individuals with disabilities. One participant who was also a special education teacher pointed to accounts of famous people who also had disabilities and used that description to illustrate a broader point that a limitation or perceived limitation in one area does not equal a limited life. The other participant who is also currently employed as a special education teacher described her hopes that her children would find something worthy of learning from everyone. She cited working with children with disabilities who are non-verbal and always learning something new. She also discussed play and friendship as a valued interaction between children without disabilities (her own) and children with disabilities. Other participants did not discuss friendship as a benefit to their own children, though several mentioned learning compassion and being kind. Evidence of stereotyping was documented in the perspectives of some study participants.

With greater awareness about marginalization, children with disabilities and their families may benefit from a broader view of roles afforded for these children in classrooms and communities. Odom, Buysse, and Soukakou (2011) identified continued negative attitudes and beliefs about inclusion of children with disabilities as a barrier to enacting successful inclusion. Additional inquiry into the effects of marginalizing stakeholder perceptions can provide greater awareness and create change in programs to enact the inclusion of children with disabilities more effectively.

False beliefs. Another point of discussion centered on marginalization arises from findings that families of children without disabilities in this study described concerns

about the time being taken away from the children developing typically. False beliefs or myths that children with disabilities take time and resources away from children developing typically promote deficit-based ideas that the presence of children with disabilities detracts from the learning environment of classrooms for children. These beliefs do not represent understanding of nor do they value classrooms that are diverse, individually, culturally and developmentally appropriate for all children enrolled as reflected in best practices cited by the North Carolina Foundations Task Force (2013). Consistent with past research (Barton & Smith, 2015; Peck et al., 2004) and reported in the current draft of the policy statement on early childhood inclusion (DHHS & USDOE, 2015), perspectives about the costs of including children with disabilities to children without disabilities remain as a barrier evident in the perceptions of participants from the current study. One parent described a concern for “teaching to the lowest common denominator” while another parent cited concerns if her child was struggling and needed help, she would be concerned about the time children with disabilities take away from her child. In addition to concerns about time and attention taken away from children without disabilities, study participants reported concerns or potential concerns about lowered expectations and the negative effects these practices would have on their child who was perceived as developing typically. The current drafted policy statement calls for “a strong focus on shifting attitudes and beliefs,” (USHHS & USDOE, 2015, p. 5). Although some participants reported benefits of inclusion to their typically developing child, the overall evidence from participant perspectives in the current study supports the continued efforts

by professionals and researchers to shift attitudes and beliefs about including children with disabilities promoted by the policy statement.

Reported benefits of inclusive classrooms by parent participants included opportunities for their child to help others and learn compassion. Consistent with previous research by Peck et al (2004), participants acknowledged social benefits for their typically developing children when they are in classrooms with children with disabilities. Similarly, parent participants in the current study demonstrated varying degrees of understanding of the connection between socially and emotionally supportive environments and academic preparedness. Parents need more education on developmentally appropriate practices including the importance of social-emotional development as a foundation for academic learning in order to appreciate the multiple connections between domains of development for young children in inclusive classrooms (NC Foundations Taskforce, 2013). When connections between domains of development and opportunities for academic learning embedded in play are more apparent to parents of typically developing children, views on appropriate environments can be expanded.

What is most concerning about the perceptions of their children's classrooms is the indication from the current results of views of children with disabilities as objects of compassion in a more limited way than other children developing typically. Would these same parent participants report that children with disabilities are capable of also giving compassion, or are they relegated to receiving compassion? Failure to see a wide variety of roles perpetuates both marginalization and false beliefs about the responsibilities and

positions within the classroom, peer group, and community that are afforded to children based on perceptions of their abilities.

Peck et al. (2004) revealed that some parents with children developing typically found their own children's self-image improved as a result of participating in inclusive classrooms. Similarly, a parent in the current study reported that having children with disabilities in the classroom would allow her child exposure and understanding of a wider range of abilities, thus bolstering her confidence through comparison. She cited an example of running fast, reporting that her daughter might not be able to run as fast as other children in the class but if there was a child with a disability who was slower than her daughter, her child would not be as discouraged about running. We need to be careful that having a child with disabilities in the classroom is not viewed as a benefit simply because that child is perceived to be able to do less than children developing typically. Thus, parent perceptions that their children's positive feelings about themselves are bolstered by experience in inclusive classrooms should be investigated more closely.

If children with disabilities were valued as equal members of the classroom community one would expect that other parents would recognize that these children are viewed as friends and peers. In the current study, for parents who reported that they were aware of children with disabilities in their child's classroom that was not the case. One parent discussed her child's choice of friends other than individuals with disabilities as "heartbreaking" while another parent reported that his child had learned who to help and who to avoid. These accounts of peer interactions evidence a vast distance between marginalization and true inclusion.

Isolation and exclusion. Although the current study focused on exploring the perspectives and experiences of parents of children without disabilities who had children currently enrolled in inclusive early childhood classrooms, several accounts of exclusion and isolation provided insight into experiences that do not capture true inclusion. The participants in the current study reported having little contact with families of children with disabilities enrolled in their children's classrooms. Participants recounted incidents and situations where children with disabilities and behaviors considered dangerous were intentionally isolated from the other children in the classrooms in order to provide for the safety of children in the classroom. Further, participants in the current study reported several occasions of complaints about children with disabilities.

Given previous studies of the perspectives of parents of children with disabilities that resulted in reports of experienced stigma and social isolation, connecting families of children with disabilities to their communities continues to be a need. Green (2003) and Worcester et al. (2008) found that families of children with disabilities experience stress and stigma associated with parenting a child with a disability. Several recent studies also address the experiences of social stigma and isolation and concerns about social acceptance experienced by parents of children with disabilities (Fox et al., 2002; Worcester et al., 2008).

More in-depth examination of all of the participants in the programs representing positions as parents with and without children with disabilities in addition to the experiences and perceptions evidenced in the current study will add to a more

comprehensive picture of the processes of inclusion, exclusion and/or isolation reported by the participants in this study.

Majority Stakeholders

Power and majority. The parents in the current study expressed that they felt empowered to complain and discussed positions as consumers of programs that they choose and pay for to support their children's early childhood education. As majority stakeholders, an investigation into power inherent in this position would help identify the presence of a power differential between parents of children who have disabilities compared with families of children with disabilities.

For families that operate from a position removed from disability (disability as "other"), a variety of other factors guide their choices in enrollment. Past research has explored the factors that motivate choice of program for parents of children with disabilities. Previous studies found that parents of children with disabilities place emphasis on programs willing to enroll their children when seeking child care (DeVore & Bowers, 2006; Gilbert, 2009; Stoner et al., 2005). Future research should address possible power differentials between these two stakeholder groups as initiatives to increase access to inclusive programs continue.

The proposed policy statement (USDHHS & USDOE, 2015) directs high quality early childhood programs to enroll children with disabilities in inclusive classrooms. Although the purpose of the current study was limited to exploring the perceptions and perspectives of parents of children without disabilities, it is possible that the parents of the children who were the sources of complaints from these participants did not feel an

equal sense of power in making recommendations towards more effective inclusion of their children. Given past research on the experiences with stigma and social isolation (Chambres et al., 2008; Fox et al., 2002; Green, 2003), parents of the children discussed in the current study may have also experienced these negative consequences of disability. As access to programs increases, it is logical to believe that parents of children without disabilities will remain the vocal majority, given our current understanding of naturally occurring rates of disability in the overall population and assuming that programs would likely represent these proportions. Will parents of children with disabilities be afforded the same opportunities for ownership and power in these programs for which they pay tuition? Through what processes will parents of children with disabilities be heard?

Future examination of the power and influence families exercise as a result of their positions as parents and the needs (or perceived needs) of their children could illuminate further barriers for families of children with disabilities and thus, draw awareness to the need for greater balance. The discussion of power and marginalization calls for the invocation and review of relevant theories, DisCrit (Annamma et al., 2013), and Critical Disability Studies (Goodley, 2013) toward creating future studies that represent the voices of all individuals to uncover power differentials in early childhood inclusive programs and classrooms.

Positionality

Stakeholder positions. As majority stakeholders, addressing the current and past education, experience, and cultural influences contribute to the positions expressed by participants and described in the essences of the study can provide avenues toward

addressing a necessary shift in understanding, awareness and support for the inclusion of children with disabilities. Finding that the positionality of participants is relevant to their understanding and belief about children with disabilities and inclusion is congruent with providing my personal description of my positionality as a researcher as a path to understanding my support for inclusion. When reflecting on my positionality I describe my arrival at a position of advocacy through the personal and professional experiences gained throughout my life. My views and experiences in early childhood inclusive classrooms are influenced by my position. Thus, my experiences and position inform my overall perception as a stakeholder in early childhood inclusive education.

Participants' contextual experiences including specific experiences with children with disabilities and their attributions of characteristics to a child or children, past and present education or career experience, and other experiences with family members and in the public contributed to participants' positionality. The focus on their own child and his or her achievement and opportunities for success added to their positions as participants in inclusive classrooms. The final dimension of the experience for participants was their position removed from immediate concern or consideration for disability. Each participant in the study experienced some form of disability as "other." Consistent with the findings of Gorenczny et al. (2011), it is possible that participants in this study identified less with individuals with disabilities as a result of limited contact and interaction for most of the study participants, and for all of the participants when considering interactions with the children with disabilities enrolled in inclusive

classrooms with their children. This result points to the need for greater opportunities for connecting with these children and their families.

Seery et al. (2000) found a decrease in support amongst parents participating in inclusive classrooms over the course of a school year, attributed in part to their experiences in those classrooms. Consistent with that finding, offering that experience in current classrooms and programs should be considered along with the overall positionality of a stakeholder in determining overall perceptions is appropriate for a more comprehensive conceptual framework. Acknowledging the combination of influential experiences and beliefs from the perspectives of participants, and the positions held by these participants provides greater insight into the overall perceptions held by these stakeholders.

Recognition of position. Issues related to inclusion in early childhood classrooms cannot be viewed outside of the context of overall quality improvement in early childhood education (Deiner, 2013; USDHHS & USDOE, 2015). For parents of children without disabilities, recognizing their general concerns and positions as stakeholders in early childhood classrooms includes validation of their general concerns about their children. As parents of children developing typically, the participants in the current study placed a heavy emphasis on their expectations and experiences related to preparation for Kindergarten. As such, any progress toward the improvement of access for children with disabilities should recognize these sources of influence and priority for parents without disabilities. Again, finding paths toward raising awareness of the inclusion of children with disabilities without propagating false beliefs or stereotypes and that do not result in

marginalization of children and stigma for families endures as a goal. Continual input from stakeholders is necessary by programs and across programs to ensure that all priorities are addressed.

Community

Awareness and information. A goal for advocates of inclusion persists in increasing public perceptions about the benefits of inclusion for all children in meaningful ways that do not marginalize individuals with disabilities. Although study participants shared perspectives on the need for more information about children with disabilities, one participant identified the potential barriers and need for boundaries associated with explaining a child's difference to other program participants. It is possible to share information about the benefits of inclusion for all children and families along with relevant and appropriate teaching strategies while maintaining confidentiality and speaking generally rather than about a particular child or specific disability diagnosis. In past research involving parents of typically developing toddlers, parent education opportunities contributed to parents' reports of new knowledge through parent education opportunities and overall positive feelings about the inclusion of toddlers with Autism, (Stahmer et al., 2003). Thus, programs should offer parents additional information on inclusive teaching strategies and the benefits of inclusion.

Building community. Finding ways for families to connect would increase opportunities for understanding and building community. The policy statement in draft (USDHHS & USDOE, 2015) points to a need for action on the part of high quality early childhood programs to increase the community of stakeholders as they build investment

in inclusive classrooms. Evidence from the current study coupled with evidence from past research demonstrates that efforts are needed to have families connected in more authentic ways.

Reports that children with disabilities are tolerated or ignored by peers without disabilities should be addressed immediately. One of the issues of having children with disabilities attend separate settings or (schools for children with disabilities) in the mornings and then join a classroom in progress in the afternoon is the lack of ownership provided to the children who arrive late in the day. If all of the children without disabilities have been in the classroom since early in the morning and then two or three children arrive on a bus in the early afternoon, the dynamic of providing equal ownership and sense of belonging is already skewed towards the children who have been there all day. When a child experiences barriers in friendship building skills, such as limited or delayed language development, more support is needed to ensure that he or she can successfully enter play and that other children “hear” what he or she is saying- verbally or non-verbally. When a child attends a separate setting that may involve a high demand for the child to complete non preferred activities or that requires a high demand for communication and engagement in a teacher-directed classroom all morning and then he or she rides a bus to another classroom that has different demands, he or she may be extremely tired, hungry or have trouble transitioning between the two settings. When another set of rules, expectations, teachers and a classroom full of children are added to the early childhood day, any three or four or five year old child could be intensely overwhelmed. Based on the accounts of participants in this study, it is possible that

children with disabilities who attend early childhood classrooms only in the afternoons are not being included. For example, in one parent's experience, a child is kept separate and plays alone in the corner. This scenario does not describe inclusion. In the event that the participant who reported that scenario is incorrect in his account of what is happening with the child who comes to his son's class in the afternoons, the perception he has of how that child is "handled" by teachers continues to propagate false myths and marginalization. Clearly more action is needed to alleviate such marginalization.

Based on the results of the site search for the current study and student data from USDOE (2013) finding children with disabilities ages 3-5 who are enrolled in inclusive early childhood classrooms can be difficult. Parent participants in the current study expressed power in their roles as majority stakeholders in these classrooms and programs. Evidence gathered from the study participants included parent reports of complaints to directors and expressions of feeling empowered to affect change in early childhood as stakeholders.

Reflections for Future Practice

How can we move from a place of seeing children with disabilities as a valuable asset to a child developing typically as a source of compassion, charity or learning to help others to a valued peer and friend with whom to work and play and ascribe the same goals and expectations while respecting and valuing difference? This is the question that teachers, programs, faculty in higher education and researchers need to ask regularly. Is it acceptable that families of children developing typically would value having a child with a disability in their child's classroom as a way to ensure that their child would not be the

slowest? Or so their child would have a child who can do less to whom they can compare themselves and bolster their self-confidence or self-worth? Teachers, programs and higher education faculty in particular should continue developing skills and strategies for addressing parents of children developing typically in a way that supports their goals for their own children while providing continual information about best practices that support all children. These skills and practices should be regularly embedded in classrooms in which all children are valued, respected and provided with opportunities to lead and to be lead, where all children are provided with high expectations, access to all activities, support to participate and accommodations that appreciate differences without marginalization. Every program and every teacher should share information about inclusion to raise awareness of the benefits to *all* children, while protecting the confidentiality of *all* children, asserting confidence in best practices that support *all* of the children, and promoting high expectations for *all* children. While it is clear, based on the results of the current study, relevant research, recent policy statements and position statements, that a paradigm shift has yet to occur, the future of true inclusion depends on continued efforts toward that change.

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APPENDIX A

SITE SELECTION PROCEDURE

- 1- Identify early childhood program and center sites in “Middle” or “Green” County that list “*Serves Children with Special Needs*” or “*This Facility is Accredited by a National Organization*” under the special facility features tab on the NC DCDEE (Division of Child Development and Early Education) Website: <http://ncchildcare.dhhs.state.nc.us>
- 2- Call programs that have been identified as previously inclusive of children with disabilities by early childhood teacher preparation faculty in “Middle” County and that meet criteria in item number 1 above (“*Serves Children with Special Needs*” or “*This Facility is Accredited by a National Organization*” according to listing on the NC DCDEE website.
- 3- Call Directors of those centers identified in item number 2 above and explain that I am a doctoral student at UNCG interested in investigating parent perspectives of inclusive classrooms. (See Appendix B- Site Selection Script.)
- 4- Ask if they enroll children with disabilities. Identify the preschool age classrooms that serve children with disabilities with their typically developing peers. (See Appendix B- Site Selection Script.)
- 5- Ask if families are aware of the children with disabilities. Ask how families know that children with disabilities are present in the center/ classroom. (See Appendix B- Site Selection Script.)
- 6- If the director responds that they currently enroll children with disabilities and families are aware that children with disabilities are enrolled in the center/ classrooms (See # 4 and # 5 above), I asked if they would support my project by allowing me to distribute invitation letters within inclusive preschool classrooms as identified by the director. (Thus, potential participants can opt to participate by leaving their signed invitation letter and contact information in a designated area within the center.) (See Appendix B- Site Selection Script.)
- 7- Ask the center director for a letter of support for the study (IRB). (See Appendix B- Site Selection Script.)
- 8- Collect Demographic information from the center director to inform my description of sites. (During that phone call or at a later time that is more convenient). (See Appendix C- Center Demographics Information Form).
- 9- Visit the center and drop off letters of invitation in classrooms where children with identified disabilities are served in classrooms with typically developing children. (See Appendix D- Consent Process, Part A- Letter of Invitation to Participate.)

APPENDIX B

SITE SELECTION SCRIPT FOR CENTER DIRECTORS

Initial Script for Site Selection:

Hi,

My name is Carol Jordan and I am a doctoral student at UNCG interested in learning more about family perspectives of inclusive early childhood programs. A faculty member at “Middle” Tech who has placed students in your classrooms recommended that I call your program. Would you mind answering a few quick questions about your program? Does your program enroll children with disabilities? Are there currently children with disabilities in the classrooms for children who are 3 and 4? How many classrooms do you have for this age group that currently include children with disabilities? Do families know that there are children with disabilities enrolled in their classrooms? How do they know?

(IF YES-) Would you be interested in serving as a site for my research? (I invited parents from those classrooms to participate in a quick telephone screening and possibly a longer interview in person to find out more about their experiences and perspectives on inclusion.) I would like to bring invitation letters to families in the next week if that is OK with you.

(IF YES) I will need to collect a letter of support to turn in to the UNCG IRB in order to distribute letters of invitation to families in those classrooms. Would you be willing to provide me with a letter of support for my research? I can email you about the letter of support. What is your best email? (Follow up with a short email asking for a letter of support that can be turned into the IRB before inviting participants).

(IF YES) Thank you so much! I have a few questions about the center demographics that helps me describe my research sites. Do you have a few minutes to answer those or is there a better time that would be convenient for me to call back and ask for that demographic information?

(IF YES- NOW IS A GOOD TIME- PROCEED TO CENTER DEMOGRAPHICS INFORMATION FORM. IF A MORE CONVENIENT TIME IS IDENTIFIED, I WILL CALL BACK AT THAT TIME TO COLLECT CENTER DEMOGRAPHIC INFORMATION.)

SITE SELECTION CRITERIA (Based on Center Director Report)

SELECT SITES WHERE FAMILIES KNOW CHILDREN WITH DISABILITIES ARE ENROLLED BECAUSE: a.) The center director reports that service providers are present often and visible to families; b.) The center director reports that the child (ren) has (have) a visible disability c.) The center director reports having explicit policies in documents

provided to parents (handbooks, website, newsletters, brochures, etc.); and/or d.) The center director reports having had communications with families about children with disabilities in classrooms

****Exclude:** Programs that do not currently enroll children with disabilities & programs that report that families do not know that children with disabilities are enrolled.

APPENDIX C

PROCESS FOR OBTAINING CONSENT FROM PARTICIPANTS

CONSENT PROCESS- SECTION A:

INVITATION TO PARTICIPATE IN UNCG STUDY

We are looking for parents of 3 and 4 year old children willing to participate in an interview in order to assist with doctoral research. We are interested in learning more about parents' perceptions of their child's experiences and to learn more about parents' perspectives and views associated with early childhood inclusive classroom experiences. The initial telephone screening interview should take about 5 minutes. The extended interview should take about an hour. We are happy to arrange these calls/interviews at convenient times for anyone willing to participate.

Participants chosen for the extended interviews will receive a \$10 gift card as thanks for your input and assistance.

Please fill out the attached form and leave it in the envelope placed in the front office for pick up if you are willing to participate in this study. Thank you in advance for your help!

-Carol Jordan and Dr. Mary V. Compton
(336-558-3651) (336-334-5843)

Project Title: Parents' Perceptions of Inclusive Child Care

Principal Investigator: Carol Jordan (email: cwjordan@uncg.edu phone: 336-558-3651)
Faculty Advisor: Dr. Mary V. Compton (email: mvcompto@uncg.edu phone: 336-334-5843)

What is this all about?

I am asking you to participate in this research study because I'm interested in learning more about parents' perspectives and experiences of childcare. This research project will only take about an hour and will involve a short phone interview (5 minutes), and possibly a longer interview (up to an hour). Your participation in this research project is voluntary.

Will this negatively affect me?

No, other than the time you spend on this project there are no know or foreseeable risks involved with this study.

What do I get out of this research project?

You and/or society will or might benefit from knowing more about what is important to parents.

Will I get paid for participating?

You will receive a \$10 gift card for participating in the extended interview portion if you are chosen after the initial screening interview.

What about my confidentiality?

We will do everything possible to make sure that your information is kept confidential. None of your responses will be shared with the childcare center. We will not include any identifying information with extended interview transcripts. All information will be kept on a password protected computer and password protected electronic space. Paper copies of any information collected will be stored in a locked filing cabinet. Your name and participation will be kept confidentially at all times. All information obtained in this study is strictly confidential unless disclosure is required by law.

What if I do not want to be in this research study?

You do not have to be part of this project. This project is voluntary and it is up to you to decide to participate in this research project. If you agree to participate at any time in this project you may stop participating without penalty. Choosing not to participate or withdrawing from the study at any time will not affect your relationship with the childcare center in which you were recruited from.

What if I have questions?

You can ask Carol Jordan (336.558.3651) anything about the study. You are also welcome to contact the faculty advisor, Dr. Mary V. Compton at mvcompto@uncg.edu or 336.334.5843. If you have concerns about how you have been treated in this study call the Office of Research Integrity Director at 1.855.251.2351.

I am willing to participate in the study of parents' perceptions inclusive of childcare:

Name _____ Phone number _____

CONSENT PROCESS—SECTION B:

Initial Phone Call: Screening Interview Consent Script:

Thank you for your willingness to participate in this study. Your answers provide important information to researchers and professionals wanting to learn more about parent perspectives of early childhood programs. Have you had the opportunity to review

the consent form? Do you have any questions? All of the information we collect will be kept confidential, on a password-protected computer and in a locked filing cabinet and will not be shared with the individual childcare centers or teachers. Your participation is entirely voluntary and you can decide to quit the interview or choose not to be involved in the research at any time without any penalty.

CONSENT PROCESS – SECTION C:

Interview Consent Script: (Extended Interview)

Thank you again for participating in this study. Your answers will provide important information to researchers and professionals wanting to learn more about parent perspectives of early childhood programs. Have you had the opportunity to review the consent form? Do you have any questions? All of the information we collect will be kept confidential, on a password-protected computer and in a locked filing cabinet and will not be shared with the childcare centers. Your participation is entirely voluntary and you can decide to quit the interview or choose not to be involved in the research at any time without any penalty.

APPENDIX D

ORIGINAL TELEPHONE SCREENING INTERVIEW PROTOCOL

Screening interview:

Thank you for your willingness to participate. Your answers will provide important information to researchers and professionals wanting to learn more about parent perspectives of early childhood programs. Have you had the opportunity to review the consent form? Do you have any questions? All of the information we collect will be kept confidential, on a password-protected computer and paper copies will be stored in a locked filing cabinet and will not be shared with the childcare centers. Your participation is entirely voluntary and you can decide to quit the interview or choose not to be involved in the research at any time without any penalty. Today I will ask you a few brief questions as we are determining who will. We will go back and analyze the answers to determine who will be called for a full interview (1 hour)

- 1- Would you be willing to participate in a full interview?
- 2- How many hours/ week do you typically work?
- 3- What is your child's current age?
- 4- How many children do you have/ live in the household?
- 5- Do any of your children currently receive or have they received early intervention services or PT, OT, ST, etc. in the past? Or- Do you have a child who qualifies for special education? (asked for parents of school age children)
 - 5- b. For participants who answer no to all of the prompts about children with disabilities: Are there children with disabilities in your child's childcare classroom? How do you know?
- 6- How long has your child been in his or her current classroom?
- 7- How long has your child been at his or her current setting/program?
- 8- What were the main reasons you chose that placement? Or- What are the reasons you chose your child's current arrangement?

***I WILL SELECT PARTICIPANTS FROM FAMILIES WHO DO NOT NOW NOR HAVE NOT IN THE PAST HAD A CHILD WITH AN IDENTIFIED DISABILITY (IFSP, IEP, or MEDICAL DIAGNOSIS) WHO ARE AWARE THAT THERE ARE CHILDREN WITH DISABILITIES IN THEIR CHILD'S CLASSROOM AND THOSE WHO ARE NOT AWARE OF A CHILD WITH DISABILITY ENROLLED

APPENDIX E

ORIGINAL TELEPHONE SCREENING DEMOGRAPHIC FORM

Q/ Prompt	Initial Answer	Notes
How many hours/ week do you typically work?		
What is your child's current age?		
How many children do you have/ live in the household? (Ages)		
Do any of your children currently receive or have they received early intervention services or PT, OT, ST, etc. in the past? Or- Do you have a child who qualifies for special education? (asked for parents of school age children)		
Are you aware of children with disabilities in your child's classroom? How are you aware of CWD in your child's classroom?		
How long has your child been in full-time childcare? Or current classroom		
How long has your child been at his or her current setting/ program?		

Q/ Prompt	Initial Answer	Notes
What were the main reasons you chose that placement? (Or- What are the reasons you chose your child's current arrangement?)		

APPENDIX F

EXTENDED INTERVIEW PROTOCOL

Thank you again for participating in this study. Your answers will provide important information to researchers and professionals wanting to learn more about parent perspectives of early childhood programs. Have you had the opportunity to review the consent form? Do you have any questions? All of the information we collect will be kept confidential, on a password-protected computer and in a locked filing cabinet and will not be shared with the child care centers. Your participation is entirely voluntary and you can decide to quit the interview or choose not to be involved in the research at any time without any penalty.

PART 1: PARENT PARTICIPANT REPORTS KNOWING THAT CHILDREN WITH DISABILITIES ARE ENROLLED IN THEIR CHILD'S CLASSROOM

ADDRESSES PERCEPTIONS/ PERSPECTIVES OF:

1-DISABILITY 2- INCLUSION 3- PARTICIPANTS' {Typically Developing} CHILD'S EXPERIENCE

1- Describe all of the things you like about your child's (3 or 4 year old) classroom?
 {Interviewer will prompt with} what else/ anything else? {And will select several responses identified to ask the following prompts:}

What about that do you like?

What do you think other parents in the classroom/program like about the class/ program?

In conversations with other parents, what do parents talk to you about?

2- Describe the things your child likes about school/ child care? (How do you know?)

Describe what your child does not like about school/ child care?

3- Tell me about the children in your child's classroom.

Describe some interactions your child has had with other children that you feel he/she has benefitted from.

Can you provide an example?

Describe any issues between children in your child's classroom that have caused a problem for your child.

Can you provide an example?

In what ways do you interact with any of the children from your child's class outside of (school)?

- 4- How well do you know the child(ren) with disabilities in your child's classroom?
- 5- In what ways do you interact with the parents/ families of children with disabilities in your child's classroom?
- 6- How does your child talk about the child(ren) with disabilities in his/her classroom?
- 7- How do you believe your child views the children with disabilities in the classroom?
- 8- What information would be helpful for you or your child regarding having a child with a disability in your child's classroom?
- 9- EXPERIENCES IN "SCHOOL": ie: Inclusive Child Care –
Tell me about your child's teachers.
- {INTERACTIONS:} Describe how they interact with your child.
Describe how they interact with the other children in the classroom.
- {Perceptions of Inclusion: MEET NEEDS OF ALL:} How do the teachers meet the needs of all of the children in the classroom?
- Can you give me an example of that?
- {Perception of INCLUSION:} How are the teachers equipped to work with children with disabilities in your child's classroom?
- 10- {Perceptions of Program:} What type of recommendation would you give others about this program?
- 11- Is there any other information you would like to share with me about your experiences with a program or teachers that include(s) children with disabilities?

PART 2: PARENT PARTICIPANT REPORTS NOT KNOWING ABOUT CHILDREN WITH DISABILITIES ENROLLED IN THEIR CHILD'S CLASSROOM

ADDRESSES PERCEPTIONS/ PERSPECTIVES OF:

1-DISABILITY 2- INCLUSION 3- PARTICIPANTS' {Typically Developing} CHILD'S EXPERIENCE

1- Describe all of the things you like about your child's (3 or 4 year old) classroom?
 {Interviewer will prompt with} what else/ anything else? {And will select several responses identified to ask the following prompts:}

What about that do you like?

What do you think other parents in the classroom/program like about the class/ program?

In conversations with other parents, what do parents talk to you about?

2- Describe the things your child likes about school/ child care? (How do you know?)

Describe what your child does not like about school/ child care?

3- Tell me about the children in your child's classroom.

Describe some interactions your child has had with other children that you feel he/she has benefitted from.

Can you provide an example?

Describe any issues between children in your child's classroom that have caused a problem for your child.

Can you provide an example?

In what ways do you interact with any of the children from your child's class outside of (school)?

4- EXPERIENCES IN "SCHOOL": ie: Inclusive Child Care –

Tell me about your child's teachers.

{INTERACTIONS:} Describe how they interact with your child.
 Describe how they interact with the other children in the classroom.

{Perceptions of Inclusion: MEET NEEDS OF ALL:} How do the teachers meet the needs of all of the children in the classroom?

Can you give me an example of that?

{Perception of INCLUSION:}

5- What information would be helpful for you or your child regarding having a child (or children) with a disability/ies in your child's classroom?

6- What do you think the benefits would be? What would concern you?

7- How are the teachers equipped to work with children with disabilities in your child's classroom? What would they need?

8- (Perceptions about disability) What experiences have you had with individuals with disabilities? Children with disabilities? Families?

[Possible prompt] –What would be needed so that the needs of those individuals could be met in your child's classroom?

9- {Perceptions of Program:} What type of recommendation would you give others about this program?

10- Is there any other information you would like to share with me about your experiences with this early childhood program?

APPENDIX G

INTERVIEW QUESTION MATRIX

Research Questions	Interview Questions	Prompts	Literature
What do they say about the inclusive programs in which their typical children are enrolled?	<p>1- Describe all of the things you like about your child's (3 or 4 year old) classroom?</p> <p>3- Tell me about the children in your child's classroom.</p> <p>Describe some interactions your child has had with other children that you feel he/she has benefitted from.</p> <p>4- How well do you know the child(ren) with disabilities in your child's classroom?</p> <p>5- In what ways do you interact with the parents/ families of children with disabilities in your child's classroom?</p> <p>8- What information would be helpful for you or your child regarding having a child with a disability in your child's classroom?</p>	<p>1. a. What about that do you like?</p> <p>1. b. What do you think other parents in the classroom/ program like about the class/ program?</p> <p>1. c. In conversations with other parents, what do parents talk to you about?</p> <p>d. Can you provide an example?</p> <p>3. a. In what ways do you interact with any of the children from your child's class outside of (school)?</p> <p>3. b. Can you provide an example?</p> <p>3. c. Describe any issues between children in your child's classroom that have caused a problem for your</p>	<p>Adult Attitudes:</p> <p>1-Odom, Buysse, Soukakou (2012)</p> <p>2- Westbrook, Legge, Pennay (1993)</p> <p>3- Darwalla & Darcy (2005)</p> <p>4- Gorenczny, Bender, Caruso, & Feinstein (2011)</p> <p>5- E. Miller et al. (2009)</p> <p>6- Iobst et al. (2008)</p> <p>7-Chambres, Auxiette, Vansingle, and Gill (2008)</p> <p><u>Parent Perceptions</u></p> <p><u>CWD:</u></p> <p>1-Kayama (2010)</p> <p>2-Leiter (2007)</p> <p>3- Worcester, Nesman, Raffelle Mendez, & Keller (2008)</p> <p>4- Green (2003)</p> <p>5- Fox, Vaughn, Wyatt, & Dunlap (2002)</p> <p>6- Halvorsen & Hanline (1989)</p> <p>7- L. J. Miller and Strain (1992)</p> <p>8-Stoiber, Gettinger, Goetz,</p>

	<p>9- EXPERIENCES IN “SCHOOL”: ie: Inclusive Childcare – Tell me about your child’s teachers.</p> <p>{ INTERACTIONS: } Describe how they interact with your child. Describe how they interact with the other children in the classroom.</p> <p>{ Perceptions of Inclusion: MEET NEEDS OF ALL: } How do the teachers meet the needs of all of the children in the classroom?</p> <p>Can you give me an example of that?</p> <p>{ Perception of INCLUSION: } How are the teachers equipped to work with children with disabilities in your child’s classroom?</p> <p>10- { Perceptions of Program: } What type of recommendation would you give others about this program?</p> <p>11- Is there any other information you would like to share</p>	<p>child.</p>	<p>(1998)</p> <p>9- Hurley & Horn, 2010</p> <p>10- Stoner, et al (2005)</p> <p>11- Palmer, Borthwick-Duffy, & Widaman (1998)</p> <p>12- Wertz, Harris, Tillery, & Roark (2004)</p> <p><u>TDC</u></p> <p>1- L. J. Miller and Strain (1992)</p> <p>2- Seery, Davis & Johnson, (2000)</p> <p>3- Peck et al. (2004)</p> <p>4- Stahmer, Carter, Baker, and Miwa (2003)</p>
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	with me about your experiences with a program or teachers that include(s) children with disabilities?		
<p>What do they say about the inclusive programs in which their typical children are enrolled?</p> <p>What do parents of typical children say about children with disabilities?</p>	<p>2- Describe the things your child likes about school/ childcare? (How do you know?)</p> <p>Describe what your child does not like about school/ childcare?</p> <p>3- Tell me about the children in your child's classroom.</p> <p>6- How does your child talk about the child(ren) with disabilities in his/her classroom?</p> <p>7- How do you believe your child views the children with disabilities in the classroom?</p>	<p>2 a.(How do you know?)</p> <p>3 a. Describe some interactions your child has had with other children that you feel he/she has benefitted from.</p> <p>3. b. Can you provide an example?</p> <p>3. c. Describe any issues between children in your child's classroom that have caused a problem for your child.</p> <p>3. d. Can you provide an example?</p> <p>3. e. In what ways do you interact with any of the children from your child's class outside of (school)?</p>	<p><u>Parent Perspectives of Inclusive Experiences:</u></p> <p><u>CWD:</u></p> <p>1- Wertz, Harris, Tillery, & Roark (2004)</p> <p>2- Seery, Davis & Johnson, (2000)</p> <p>3-L. J. Miller and Strain (1992)</p> <p>4- Stoiber, Gettinger, Goetz, (1998)</p> <p>5- Halvorsen & Hanline (1989)</p> <p>6- Palmer, Borthwick-Duffy, & Widaman (1998)</p> <p>7- Hurley & Horn (2010)</p> <p>8- Ceglowski, et al., (2009)</p> <p><u>TDC:</u></p> <p>Seery, Davis & Johnson,(2000)</p> <p>L. J. Miller and Strain (1992)</p> <p>Stoiber, Gettinger, Goetz, (1998)</p> <p>5- Stahmer, Carter, Baker and Miwa (2003)</p> <p>6- Knoche, Peterson, Edwards</p>

			& Jeon (2006) 7- Fantuzzo, Perry, and Childs (2006)
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APPENDIX H

TABLE OF HORIZONS EXAMPLE

EXAMPLE OF HORIZONTALIZATION PROCESS “All text samples are given equal value” – (Moustakas, 1994)	SAMPLES FROM TEXT	MOST REPRESENTATIVE FOR PARTICIPANT
Code- how parent knows that child likes what parent reports child likes (Child does not want to leave)	Yeah, and you know, it’s gotten to the point this year which has really surprised me, like when I come in to pick him up, he wants to finish the game that he’s playing, you know he wants to use, kind of like dad, you’re gonna have to wait for a little bit and wants to play, you know, wants to finish playing legos or—and oftentimes it’s with his other friends that he’s sitting there playing, so that gives me a good, you know, whereas, you know, before as he was all through coming up, you know, through daycare he would kind of run up to me and grab, it’s like let’s get out of here, you know, like finally dad, you know, but you know, this year more and more he’s so comfortable there that yeah, he’s kind of mad	it’s gotten to the point this year which has really surprised me, like when I come in to pick him up, he wants to finish the game that he’s playing, you know he wants to use, kind of like dad, you’re gonna have to wait for a little bit and wants to play, you know, wants to finish playing legos or—and oftentimes it’s with his other friends that he’s sitting there playing, so that gives me a good, you know, whereas, you know, before as he was all through coming up, you know, through daycare he would kind of run up to me and grab, it’s like let’s get out of here, you know, like finally dad, you know, but you know, this year more and more he’s so comfortable there that yeah, he’s kind of mad at me that I picked him up

	<p>at me that I picked him up, it's just like.</p> <p>2- It does yeah, I mean you know, I much prefer that than him crying about being there, being upset, you know, it gives me confidence in what they're doing there</p> <p>3-you know, it— there's a certain amount that feels good when you're a parent, you're like hey, you know, I missed you all day, but you know, when you get the opposite, yeah, but I— it makes me feel good that he's comfortable there all day long and that he's having fun with his friends and having fun with his teachers and learning things.</p> <p>4- Yeah, it's like hold on, why don't you go get go get Zebe first is often sometimes one of the things I do, I'll go get his sister first and then I'll come back and get him so he can finish.</p> <p>5-Yeah, yeah, it gives him a little time to play—finish up.</p>	
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APPENDIX I

TEXTURAL AND STRUCTURAL THEMES

Textural Themes

Textural Theme 1: Focus on Kindergarten Preparation

Textural Theme 2: Children as Source of Information

Sub-Theme 1: Teachers

Sub-Theme 2: Curriculum

Sub-Theme 3: Peers

Textural Theme 3: Teacher Roles

Sub-Theme 1: Teaching the Curriculum

Sub-Theme 2: Rules and Structure/ Controlling the Classroom

Sub-Theme 3: Social Emotional Support

Sub-Theme 4: Safety

Sub-Theme 5: Communicating with parents

Textural Theme 4: Awareness of Inclusion (knowing/ not knowing)

Sub-Theme 1: Aware of children with disabilities

Sub-Theme 2: Not aware of children with disabilities

Textural Theme 5: Inclusion, Exclusion, and Friendship

Textural Theme 6: My child is typical

Structural Themes

Structural Theme 1: The influence of “dis/ability” and it’s meaning.

Sub-Theme 1: Typical development (will this kid take away from mine?)

Sub-Theme 2: Unintentional Marginalization (helping, adorable, etc.)

Sub-Theme 2: Exclusion

Structural Theme 2: The influence of child's disability and characteristics.

Sub-Theme 1: Learning Disabilities and Intellectual Disability

Sub-Theme 2: Behavioral Disability

Sub-Theme 3: Down syndrome

Sub-Theme 4: Physical Disability

Sub-Theme 5: Autism

Structural Theme 3: The influence of personal knowledge and experience.

Sub-Theme 1: Education

Sub-Theme 2: Career

Sub-Theme 3: Personal Experience/ Family

Sub-Theme 4: Experiences in public

Sub-Theme 5: Need for more information

Structural Theme 4: The influence of cultural individualism.